FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0287
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Typ	pe Response	s)																
1. Name and Address of Reporting Person* KNOX RUTH A				CA	2. Issuer Name and Ticker or Trading Symbol CAPITAL CITY BANK GROUP INC [CCBG]							5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_Director Officer (give title below) Other (specify below)					
	ENT OF W EE, 4760 F		N	(Middle)		ate of Earl 30/2006	liest '	Transa	ction ((Month/D	ay/Yeaı	;)						
(Street) MACON, GA 31210				4. If Amendment, Date Original Filed(Month/Day/Year) 05/31/2006								6. Individual or Joint/Group Filing(Check Applicable Line) X_Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City) (State) (Zip)			Table I - Non-Derivative Securities Acqu						cquir	ired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3)		Date	nsaction h/Day/Year)	Execu any	eemed tion Date, h/Day/Yea	if (3. Tran Code Instr. 8	3)	or Disp (Instr. 3	osed of 3, 4 and (A) or	(D) 5)	rice	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock		05/30	0/2006				P		600 A \$ 32.		\$ 32.4	1699	3,588	88 (1)		D		
Reminder: I	Report on a s	eparate line	for each	Table II -	· Deriv	ative Secu	ıritic	es Acq	Pe co th uired,	ersons v ontained e form c	who res in this lisplay	forms a cu Benef	n are urren ficially	not requ tly valid	OMB con	ormation spond unle trol numbe	ss	1474 (9-02)
Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transacti Date (Month/Day	y/Year)	3A. Deemed Execution D any (Month/Day	ate, if	Code	on Non II	5.	6 ar (I) tive ies ed ed 3, 5)	. Date Ex. nd Expira Month/Da	ercisable tion Da	e te	7. Tit Amou Unde Secur	Amount or		9. Number Derivative Securities Beneficially Owned Following Reported Transactior (Instr. 4)	Owners Form of Derivat Security Direct (or Indir	Beneficia Ownershi (Instr. 4)

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
KNOX RUTH A PRESIDENT OF WESLEYAN COLLEGE 4760 FORSYTH ROAD MACON, GA 31210	X					

Signatures

Ruth A. Knox	06/01/2006
**Signature of Reporting Person	Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. *See* 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) The error was made in the total amount of shares owned by Ms.Knox filed on May 31, 2006.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.