FORM 4

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

OMB APPROVAL
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Estimated average burden
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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 Ty | pe Response | s) | | | | | | | | | | | | | | | | | |
|--|--|------------------|--|--|--|------|--|---|---|---------------------------|--|---|-------------------------------------|--|------------------------------|---|-------|--------------------|---------------|
| 1. Name and Address of Reporting Person* AUSLEY DUBOSE | | | | 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 | | | | | | | |
| (Last) (First) (Middle) P.O. BOX 391 | | | | 3. Date of Earliest Transaction (Month/Day/Year) 11/30/2007 | | | | | | | | | | | | | | | |
| (Street) TALLAHASSEE, FL 32302 | | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | Line) | | |
| (City | | (State) | (Zip) | Table I - Non-I | | | | | on-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | |
| 1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year) | | | Execution Date, if Code | | | Code | . Transaction d. Securities Acquired (A) or Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) | | | (D) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | | | Ownership o Form: | | . Nature f Indirect Beneficial Ownership | | | |
| | | | | | | Coo | de | V | Amoun | (A or (D | | Price | (mour. 5 c | | 01 (I (I | | | nstr. 4) | |
| Common | Common Stock 11/30/2007 | | 11/30/2007 | | | | S | | | 20,000 | D | \$ 29 | 9.63 | 349,150 | 349,150 | | D | | |
| Common | n Stock | | | | | | | | | | | | | 12,500 | | | Ι | | eld by ife |
| Common | Stock | | | | | | | | | | | | | 23,437 | | | I | He IR | eld by |
| Common | n Stock | | | | | | | | | | | | | 285,431 | | | I | | SA RUST |
| Common Stock | | | | | | | | | | | | | 350 | | | I | W | oint ith ife | |
| Reminder: | Report on a | separate line fo | or each class of secur | rities bei | neficially | owi | ned d | | Pers | ons whained i | o res | forn | n are | not requ | ction of inf uired to res | spond unle | ess | C 147 | 74 (9-02) |
| | | | Table II - | | | | | | | | | | | y Owned | | | | | |
| Derivative Security | 2. 3. Transaction Date Execution Date, if (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Instr. 8) (Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | er tive ties red sed 3, | 6. D and | 6. Date Exercisable and Expiration Date (Month/Day/Year) 7. An Un Sec | | 7. Tit Amor Unde Secur (Instr | ount of derlying urities tr. 3 and Derivative Security (Instr. 5) Instr. 5) Derivative Security Securities Benefici Owned Followin Reported Transact (Instr. 4) | | Securities Beneficiall | Ownershi Form of Derivative Security: Direct (D or Indirec | | Beneficia Ownershi (Instr. 4) | | | | | | |
| | | | | | Code V | V (| (A) | | Date Exe | | Expir Date | ation | Title | Amount or Number of Shares | | | | | |

Reporting Owners

| | Relationships | | | | | | |
|------------------------|---------------|--------------|---------|-------|--|--|--|
| Reporting Owner Name / | Director | 10% Owner | Officer | Other | | | |
| Address | | | | | | | |

| AUSLEY DUBOSE P.O. BOX 391 TALLAHASSEE, FL 32302 | X | | | | |
|--|---|--|--|--|--|
|--|---|--|--|--|--|

Signatures

| DuBose Ausley | 12/04/2007 |
|----------------------------------|------------|
| ***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).

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.