FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
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

(11iiit Oi 1y	pe Kesponse	8)																	
1. Name and Address of Reporting Person * COX CADER B III					2. Issuer Name and Ticker or Trading Symbol CAPITAL CITY BANK GROUP INC [CCBG]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director 10% Owner Officer (give title below) Other (specify below)							
(Last) (First) (Middle) 11991 RIVERVIEW ROAD				,	3. Date of Earliest Transaction (Month/Day/Year) 02/20/2009														
(Street)				2	4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person _Form filed by More than One Reporting Person							
CAMILLA, GA 31730 (City) (State) (Zip))							_[
				Table I - Non-Derivative Securities Acqui							, , ,								
1.Title of Security (Instr. 3)		Date (Month/Day/Year) Example 1		Deemed ecution Date, i	if T	Code		or Disposed of (D) (Instr. 3, 4 and 5)			`	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			Ownership Form: Bo Direct (D) O		Indired Benefi Owner	ct icial rship	
							Code	V	Amount	(A) or (D)	Price	e	or Indirect (Instr. (I) (Instr. 4)		4)				
Common	Stock		02/20/2009)			P		8,000	A	\$ 10.030	07	10,500			I M		Wife Martl F.H.	ha
Common	Stock												13,000			I			rview ation,
Common	Stock												26,358.2	296		D			
Reminder:	Report on a s	separate line	e for each class	of securit	ies beneficial	lv o	wned dire	ectly	or indirect	ılv.									
	r					-, -		P	ersons w ontained	ho re in thi	s form	are	not requ	ction of inf ired to res OMB cont	pond un	iless	SE	C 1474	1 (9-02)
			Ta		erivative Sec								ly Owned						
	2. Conversion or Exercise Price of Derivative Security		Exect ay/Year) any	Deemed ution Date	4. Transact Code (Instr. 8)	ion	5.	ve es d	6. Date Exercisable and Expiration Date (Month/Day/Year) (Month/Day/Year) 7. Arr Urr Se		7. Ti Amo Unde Secu (Inst	itle and ount of Derivative Security Unities tr. 3 and Security Reporte Transac (Instr. 4)		Derivativ Securities Beneficia	re s ally g on(s)	Ownership of Form of Educative Control or Indirect		Beneficial	
					Code	V	(A) (I	E	Date Exercisable		ration	Title	Amount or Number of Shares						

Reporting Owners

B 41 0 N 4	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
COX CADER B III 11991 RIVERVIEW ROAD CAMILLA, GA 31730	X						

Signatures

Cader B. Cox, III	02/20/2009
**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.