FORM 4	4
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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).

(Print or Type Responses)

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

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SEC 1474 (9-02)

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 Type Respon		*								(), T		
1. Name and Address BARRON THON	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) XDirector10% Owner Officer (give title below)Other (specify below)					
PO BOX 900	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 06/05/2007					Treasure	I <u></u>			
TALLAHASSEE	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					
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acqui					ties Acqui	ired, Disposed of, or Beneficially Owned			
(Instr. 3)		2. Transaction Date (Month/Day/Year)		Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	Ownership Form:	Beneficial	
			(Month/Day/Year)	Code	V	Amount	(A) or (D)	(Instr. 3 and 4) Price		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common Stock		06/05/2007		S		2,500	D	\$ 30.894	203,799 (1)	D		
Common Stock		06/05/2007		S		1,000	D	\$ 30.81	8,624	Ι	Trust For Elizabeth	
Common Stock									18,158	Ι	Trust For Anne	
Common Stock									12,312	Ι	Trust For Rebecca	
Common Stock									10,937	Ι	Z.P. Barron Trust	
Common Stock									28,906	Ι	Spouse	
Common Stock								6,790.489 ⁽²⁾	Ι	401(k) Plan		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)															
1. Title of	2.	3. Transaction	3A. Deemed	4.		5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transact	ion	Num	hber and Expiration Date A			Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		of		(Month/Day/Year) U			rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)		Deriv	ative	ative			rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Secur	rities	ities		(Instr	. 3 and		Owned	Security:	(Instr. 4)
	Security					Acqu	ired			4)			Following	Direct (D)	
						(A) o	(A) or					Reported	or Indirect		
						Disposed							Transaction(s)	(I)	
						of (D	(D)						(Instr. 4)	(Instr. 4)	
						(Instr									
						4, and	, and 5)								
											Amount				
								D (.		or				
									Expiration	Title	Number				
								Exercisable	Date		of				
				Code	V	(A)	(D)				Shares				

Reporting Owners

Reporting Owner Name /	

Relationships

Address	Director	10% Owner	Officer	Other
BARRON THOMAS A PO BOX 900 TALLAHASSEE, FL 32302	Х		Treasurer	

Signatures

Thomas A. Barron	06/07/2007
**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).
- (1) Mr. Barron acquired 258 shares through an ASPP event/transaction which is not a reportable item. However, it must be noted for the clarification of the increase in the total amount of shares Mr. Barron directly owns.
- (2) Mr. Barron acquired 626.039 shares in his 401(k) Plan which is not a reportable event/transaction.

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.