FORM 4

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

OMB APPROVAL
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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 Type	Responses	s)												
1. Name and Address of Reporting Person* BARRON THOMAS A			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						
(Last) (First) (Middle) PO BOX 900			3. Date of Earliest Transaction (Month/Day/Year) 12/23/2003					X Officer (give title below) Other (specify below) Treasurer						
(Street)			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						
TALLAHASSEE, FL 32302 (City) (State) (Zip)			Table I - Non-Derivative Securities Acqu					uired, Disposed of, or Beneficially Owned						
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed 3. Transac Execution Date, if Code			4. Securities Acquired			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership	
Common S	Stock		12/23/2003		G	V	271	+ ` ´	\$ 0	179,890			D	
Common S	Stock		12/23/2003		G		234	D	\$ 0	179,656			D	
Common S	Stock									10,500			I	Trust For Elizabeth
Common S	Stock									14,250			I	Trust for Rebecca
Common S	Stock									16,927			I	Trust for Anne
Common S	Stock									23,125			Ι	Spouse (1)
Common Stock									8,750			I	Trustee for Z.P. Barron Trust	
Common S	Stock									3,409.97	77		I	By 401(k) Plan
Reminder: Re	eport on a s	eparate line fo	or each class of secur	ities beneficially ov	vned direct	ly or	indirectly	у.						
						cont	tained ii	n this for	m ar	e not requ	ction of inf uired to res OMB cont	spond unl	ess	C 1474 (9-02)
				Derivative Securiti										
(Instr. 3) Pr	Conversion	3. Transaction Date (Month/Day/	n 3A. Deemed Execution Data	4. Transaction Code (Instr. 8)	5.	and Expiration Date (Month/Day/Year) e Arr Un. Sec (In: 4)		Amount or Number of Number of Shares		Owner Form Ouriva Securi Direct or Ind	Ownershi (ty: (D) rect			

D 41 0 N /	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
BARRON THOMAS A PO BOX 900 TALLAHASSEE, FL 32302	X		Treasurer			

Signatures

Thomas A. Barron	12/29/2003
***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 reporting person disclaims beneficial ownership of these shares and this report shall not be deemed an admission that the reporting person is the beneficial owner of such shares for purposes of Section 16 or any other purpose.

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.