## FORM 4

(Print or Type Responses)

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response... 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

**Reporting Owners** 

Relationships

#### 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

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) 12/31/2003						X Officer (give title below) Other (specify below)  Treasurer					
(Street) TALLAHASSEE, FL 32302				4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line)					
(City) (State) (Zip)			Table I - Non-Derivative Securities Acqui						red, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr. 8)		4. Securities Acquir (A) or Disposed of (Instr. 3, 4 and 5)		of (D)	Beneficia	ant of Securities ally Owned Following d Transaction(s) and 4)		6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership	
				Code	V	Amount	(A) or (D)	Price		., ,		or Indirect (I) (Instr. 4)		
Common	Stock		12/31/2003		A		184 <u>(1)</u>	A	\$ 32.472	178,840	)		D	
Common	Stock									10,500			I	Trust for Elizabeth
Common	Stock									14,250			I	Trust for Rebecca
Common	Stock									16,927			I	Trust for Anne
Common	Stock									8,750			I	Trustee for Z.P. Barron Trust
Common	Stock									23,125	(2)		I	Spouse
Common Stock									3,453.5174 (3)			I	By 401(k) Plan	
Reminder:	Report on a s	separate line	for each class of secu Table II -	Derivative Securit	ties Acquir	Per cor the	sons what tained in form dis	no responding this splays	form are a currer Seneficial	not requ ntly valid	ction of inf uired to res OMB conf	spond unl	ess	C 1474 (9-02)
1. Title of	2.	3. Transaction	on 3A. Deemed	(e.g., puts, calls, w	arrants, of		s, conver			tle and	8. Price of	9. Number	of 10.	11. Natur
1. Title of 2. 3. 1 Derivative Conversion or Exercise (Instr. 3) Price of Derivative Security  Security		Date	Execution D any			and (M	nd Expiration Date Month/Day/Year)			ount of derlying urities str. 3 and Derivative Security (Instr. 5)			Owner Form of Deriva Securi Direct or Indi	rship of Indirect Beneficia Ownershity: (Instr. 4)
				Code V	(A) (D)			Expirat Date	Title	Amount or Number of Shares				

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

## **Signatures**

Thomas A. Barron	01/06/2004
**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).
- These shares of common stock were purchased in 2003 pursuant of the Company's Associate Stock Purchase Plan and were exempt from teh reporting and short-swing profit liability requirements of Section 16 pursuant to Rule 16b-3(c) prmulgated thereunder.
- (2) The reporting person disclaims beneficial ownership of these shares and this report shall not be deemed an admission that the reporting person is beneficial owner of such shares for purposes of Section 16 or any other purposes.
- (3) Includes 43.5404 shares of common stock that were purchased under the Company's 1997 401(k) Profit Sharing Plan and were exempt from teh reporting and short-swing provisions of Section 16 pursuant to Rule 16b-3(c) promulgated thereunder.

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.