SEC Form 4	
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## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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

U obligat	n 16. Form 4 or tions may conti tion 1(b).			File					(a) of the Se e Investmen				f 1934			11		verage burde sponse:	n 0.5		
1. Name and Address of Reporting Person* <u>WELCH M SCOTT</u>						2. Issuer Name and Ticker or Trading Symbol <u>LAKELAND FINANCIAL CORP</u> [ LKFN ]									lationship o ck all applic Directo	,					
(Last) (First) (Middle) 6 LONGWOOD CT.						3. Date of Earliest Transaction (Month/Day/Year) 08/13/2003									Officer below)	(give title		Other (s below)	specify		
(Street) ELKHA	RT IN 46516					4. If Amendment, Date of 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)	(S		(Zip)																		
1. Title of Security (Instr. 3) Date				saction				e, 3. Code (	e, Transaction Disposed Of (D) (Instr. 3, Code (Instr. 5)					or 5. Amount of and Securities Beneficially Owned Followin			n: Direct r Indirect Istr. 4)	7. Nature of Indirect Beneficial Ownership			
			CodeVAmount(A) or (D)PriceReported Transaction(s) (Instr. 3 and 4)								(Instr. 4)										
Common	Stock														2,	850	D				
Common Stock 08/				08/13	3/200	3/2003			Р		700		A	\$ <mark>31</mark>	7	700			By Spouse		
		٦							quired, D s, option						Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	4. Transa Code ( 8)		of Deriv Secu Acqu (A) o Disp of (D	r osed ) r. 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and of Securiti Underlying Derivative (Instr. 3 an			ities ng /e Secur		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	s Ily	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisable		piration	Title	Amor or Numl of Share	ber							
Stock Options (Right to buy)	\$13.5								06/13/2005	06	/13/2010	Common Stock	<sup>1</sup> 50	0		500		D			
Stock Options (Right to buy)	\$13.625								01/09/2006	01	/09/2011	Common Stock	<sup>1</sup> 1,0	00		1,000	•	D			
Stock Options (Right to buy)	\$15.125								02/08/2005	02	/08/2010	Common Stock	<sup>1</sup> 60	0		600		D			
Stock Options (Right to buy)	\$19.4375								02/09/2004	02	/09/2009	Common Stock	<sup>1</sup> 57	5		575		D			
Phantom Stock	\$0								01/01/2003	01	/01/2003	Common Stock	<sup>1</sup> 2,08	4.9		2,084.	9	D			

01/07/2003

01/28/2003

04/28/2003

07/10/2003

07/30/2003

**Explanation of Responses:** 

Phantom

Phantom

Phantom Stock

Phantom Stock

Stock

Stock Phantom Stock \$<mark>0</mark>

\$<mark>0</mark>

\$<mark>0</mark>

\$<mark>0</mark>

\$<mark>0</mark>

297.3

17.3

16.5

238

14

Common Stock

Common Stock

Common

Stock

Common Stock

Common Stock

01/07/2013

01/28/2013

04/28/2013

07/10/2013

07/30/2013

08/13/2003

297.3

17.3

16.5

238

14

D

D

D

D

D

\*\* Signature of Reporting Person Date

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

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 Number.