## FORM 5

Check this box if no longer subject to

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	$D \subset$	205/10
wasiiiigton,	D.C.	20549

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL

**OWNERSHIP** 

Washington,	D.C.	20549	
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## **OMB APPROVAL** OMB Number:

Estimated average burden hours per response: 1.0

כ	Section 16. Form 4 or For obligations may continue. Instruction 1(b).	m 5 ´
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U Foilis	Holdings Repo	rteu.															
Form 4	Transactions R	eported.	File	ed pursuant to or Sectior					ities Excha ompany Ad								
1. Name and Hurford (Last)	Issuer Name and Ticker or Trading Symbol     LAKELAND FINANCIAL CORP [ LKFN ]      Statement for Issuer's Fiscal Year Ended (Month/Day/Year)     12/31/2014						KFN] (	5. Relationship of Reporting (Check all applicable) Director X Officer (give title below) Vice Presiden				10% Othe	Owner r (specify w)				
(Street) ARGOS (City)	IN (Sta		16501 Zip)	4. If Amen	4. If Amendment, Date of Original Filed (Month/Day/Year)  6. Indi Line)  X												
		Tabl	e I - Non-Deriv	ative Sec	uritie	s Ac	quire	ed, Di	sposed	of, or	Benefici	ally	Owne	ed			
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Year)			Execution Date, if any		3. Transaction Code (Instr. 8)					or Disposed	Securiti Benefic		es	6. Ownership Form: Direct (D) or		7. Nature of Indirect Beneficial Ownership	
							Amour	nt	(A) or (D)	Price		Issuer's Fiscal Year (Instr. 3 and 4)		Indirect (I) (Instr. 4)		(Instr. 4)	
Common Stock 12/31/			12/31/2014	J		<b>J</b> (1	12		A	\$38.48		693		D			
Common Stock			12/31/2014	<b>J</b> (:		1)		13	A	\$38.48		183			I ·	401(k) Plan	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	of Deriv Secu Acqu (A) or Dispo	rivative curities quired or sposed (D) str. 3, 4 d 5)		6. Date Exercisable and Expiration Date Expiration  Date Expiration		Amor Secu Unde Deriv Secu and 4	rities rlying ative rity (Instr. 3	ınt per		9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	i lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)

## **Explanation of Responses:**

1. Dividend reinvestment for 2014.

Teresa A. Bartman, Attorneyin-Fact

02/11/2015

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.