## FORM 5

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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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).	

## ANNUAL STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP**

OMB APPROVAL								
OMB Number:	3235-0362							
Estimated average burden								
hours per response:	1.0							

Form 3 Holdings Reported. Form 4 Transactions Reported.

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* <u>DEARDORFF KEVIN L</u>				2. Issuer Name <b>and</b> Ticker or Trading Symbol  LAKELAND FINANCIAL CORP [ LKFN ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title Other (specify						
(Last) LAKELA P.O. BOX	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2019							Year)	X Officer (give title below)  Executive Vice President					w)`			
(Street) WARSAV	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)	(Sta		Zip)	entitus Cons		- 4-		-d D:		- <b>f</b>	Damafiai	- U	0	. al			
1. Title of Security (Instr. 3)  2. Transact Date		2. Transaction	2A. Deemed 3. Execution Date, Trans		3. Transa Code	action	Amount (A) or Price			or Dispose				6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock			12/03/2019		(		3	9	900	(D)	\$0	49,635		,635	D		
	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)	5. Nu of Deriv Secu (A) or Dispo of (D) (Instr and 5	rative rities ired r osed	Expiratio (Month/D		te Exercisable and ation Date th/Day/Year) Expiration Date Date		e and nt of ities clying stive ity (Instr. 3			9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership (Instr. 4)

**Explanation of Responses:** 

Teresa A. Bartman, Attorneyin-Fact

\*\* Signature of Reporting Person Date

02/06/2020

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

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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).