FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP**

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

Instruction 1(b).

Form 3	3 Holdings Rep	orted.																	
_	4 Transactions		Fil	ed pursuant t or Sectio															
1. Name and Address of Reporting Person* <u>KUBACKI MICHAEL L</u>				or Section 30(h) of the Investment Company Act of 1940 2. Issuer Name and Ticker or Trading Symbol LAKELAND FINANCIAL CORP [LKFN]								Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner							
(Last) (First) (Middle) 1401 E. NORTH SHORE DR					3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2008									X Officer (give title Other (specify below) President					
(Street)	USE IN	1 ,	46567	4. If Amendment, Date of Original Filed (Month/Day/Year)							Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting								
(City)	(S	tate)	(Zip)	Person											porting				
		Tab	le I - Non-Deri	vative Sec	curiti	es A	cquire	ed, C	isposed	of, or	Benefi	ciall	y Owne	d					
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Dispos Of (D) (Instr. 3, 4 and 5)		Securiti Benefic		es	6. Ownership Form: Direct (D) or		7. Nature of Indirect Beneficial Ownership					
				(monain buy)	ricary	, 		Amo	unt	(A) or (D)	Price		Issuer's Year (Ins 4)	Fiscal	Indire	direct (I) (Instr. 4)			
Common	Stock												88,6	80(1)		D			
Common	Stock	ck 12/31/2007					J (2)		1,648	A \$2		.52 19		,192		I	401(k) Plan		
Common Stock												600		I A		As Trustee			
		Т	able II - Deriva	tive Secu outs, calls									Owned						
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 Acqu (A) o Dispo	umber 6. Date Expirat (Month urities uired or cosed b) 7. 3, 4		e Exercisable and titon Date h/Day/Year)		7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number derivative Securitie Beneficia Owned Following Reported Transacti (Instr. 4)	e s ally g	10. Ownersh Form: Direct (D or Indire (I) (Instr.	Beneficial Ownership ct (Instr. 4)		
					(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amou or Numb of Share	oer							
Stock Options (Right to buy)	\$6.75						06/13/2	2005	06/13/2010	Commo Stock		00		20,00	00	D			
Stock Options (Right to buy)	\$6.8125						01/09/2	2006	01/09/2011	Common Stock 20,0		00		20,000		D			
Stock Options (Right to buy)	\$7.5625						02/08/2	2005	02/08/2010	Commo		00		17,00	00	D			
Stock Options (Right to buy)	\$17.185						12/09/2	2008	12/09/2013	Commo Stock		00		20,00	00	D			
Stock Options	\$19.96						12/11/2	2012	12/11/2017	Commo	on 15,00	00		15,00	00	D			

Explanation of Responses:

buy)

- 1. As adjusted to reflect the removal of 200 shares held by Mr. Kubacki's daughter no longer reportable by him.
- 2. Salary redirection to 401(k) plan for 2007.

Teresa A. Bartman, Attorney-

02/11/2008

in-Fact

** 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.