1. Name and Address of R Steininger, Donald B. 6914 Woodcroft Fort Wayne, IN 46804 2. Date of Event Requiri 06/12/2001 3. IRS or Social Securit 4. Issuer Name and Ticke Lakeland Financial Co 5. Relationship of Repor (X) Director ( ) Officer (give tit 6. If Amendment, Date of 7. Individual or Joint/G (X) Form filed by One ( ) Form filed by Mor  TABLE I Non-Derivativ	ng Statement y Number of r or Trading rporation (I ting Person( (le below) ( Original (N roup Filing Reporting F	Reporting F g Symbol LKFN) (s) to Issue ) 10% Owner ) Other (sp Month/Day/Ye (Check Appl Person Reporting Pe	Person (Voluntary) er (Check all applice pecify below) ear) licable Line)	able)			
  1. Title of Security     		j	Amount of Securities Beneficially Owned	3. Ownership   Form:   Direct(D) o   Indirect(I)	i r i	ure of Indirect	Beneficial Ownership
TABLE II Derivative S 	+  2.Date Exer	rcisable	3.Title and Amount			•	+
Security         	and Expiration Date   (Month/Day/Year) +		Underlying Deriva Security	j	sion or   Exercise + Price of		Beneficial Ownership   
	Date   Exer-   cisable +	Expira-   tion   Date	Title	Amount or   Number of   Shares	vative	, , ,	
Stock Options (Right to	06/12/2006	06/12/2011	Common Stock	1000	\$14.25	D	

buy)

Explanation of Responses:

SIGNATURE OF REPORTING PERSON /s/ Donald B. Steininger

DATE 07/10/2001