FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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Vashington.	D.C.	20549

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP**

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

Form 3 Holdings Reported.

X Form 4	1 Transactions	Reported.	Fil	ed pursuant t or Sectio	o Sect on 30(h	ion 16 n) of th	i(a) of the	e Sec ment	curities Excha Company A	ange Act ct of 1940	of 1934								
1. Name and Address of Reporting Person* FINDLAY DAVID M				2. Issuer Name and Ticker or Trading Symbol LAKELAND FINANCIAL CORP [LKFN]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) Executive Vice president								
(Last) (First) (Middle) 2828 E. PRESTWICK RD					3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2008												pecify		
(Street) WINNIE LAKE IN 46590 (City) (State) (Zip)				4. If Amer	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 Person						
		Tab	le I - Non-Deri	vative Sec	curiti	es A	cquire	ed, C	Disposed	of, or I	3enefi	ciall	y Owne	d					
Date		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any		Code (Ins		4. Securities Acquired (A) or Dispose Of (D) (Instr. 3, 4 and 5)		sed	5. Amour Securitie Beneficia	s ally	6. Ownership Form: Direct		7. Nature of Indirect Beneficial Ownership					
				(WOTHIT/Day	(Month/Day/Year)		8)		ount	(A) or (D) Price			Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)		(D) or Indirect (I) (Instr. 4)		(Instr. 4)		
Common Stock		12/31/2008			J4 ⁽¹⁾			240 A		\$ <mark>21</mark> .	21.58		444		I 401(k		(k) Plan		
Common Stock												26,000		D					
Common Stock												2,0	2,000		I By		Spouse		
		Т	able II - Deriva (e.g., p	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)	of	Expirat (Month ired osed . 3, 4		Exercisable and tion Date n/Day/Year)		7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		8. Price o Derivative Security (Instr. 5)		9. Numbe derivative Securitie Beneficia Owned Following Reported Transacti (Instr. 4)	or long (I) (Inside tion(s)		ship of Indire Benefic (D) Owners rect (Instr. 4	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amou or Numl of Title Share								
Stock Options (Right to Buy)	\$8.125						12/11/20		12/11/2011	Commo Stock	n 6,00	00		6,000		D			
Stock Options (Right to Buy)	\$17.185						12/09/2	2008	12/09/2013	Commo Stock	n 10,0	00		10,00	00 D				
Stock Options (Right to	\$24.05						05/14/2	2013	05/14/2018	Commo Stock	n 10,0	00		10,00	00	D			

Explanation of Responses:

Buy)

1. The number of shares represents equivalent shares based on the fair market value of the shares of Lakeland Financial Common Stock held by the unitized stock fund under the Lakeland Financial Corporation 401(k) Plan based on a report from the Plan Administrator dated as of December 31, 2008. The Reporting Person has an interest in the unitized fund, which holds shares of Lakeland Financial Corporation Common Stock and short-term investments.

> Teresa A. Bartman, Attorneyin-Fact

02/11/2009

** Signature of Reporting Person

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.