LAKELAND FINANCIAL CORP

1. Name and Address of Reporting Person *

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

SMITH CHARLES D

Form 5

February 11, 2011

OMB APPROVAL FORM 5 **OMB** UNITED STATES SECURITIES AND EXCHANGE COMMISSION 3235-0362 Number: Washington, D.C. 20549 Check this box if January 31, Expires: no longer subject 2005 to Section 16. ANNUAL STATEMENT OF CHANGES IN BENEFICIAL Estimated average Form 4 or Form burden hours per 5 obligations OWNERSHIP OF SECURITIES response... 1.0 may continue. See Instruction Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b). Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported 30(h) of the Investment Company Act of 1940 Form 4 Transactions Reported

2. Issuer Name and Ticker or Trading

Symbol

			LAKELAND FINANCIAL CORP [LKFN]				(Check all applicable)				
(Last)		(Month/	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2010				Director 10% Owner Officer (give title Other (specify below) Executive Vice President				
1902 IV. DF	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)				. Individual or Joint/Group Reporting (check applicable line)				
WARSAW	, IN 46580					_	X_ Form Filed by 0 Form Filed by Merson	One Reporting Po			
(City)	(State)	(Zip) Tak	ole I - Non-Dei	rivative Se	curiti	es Acquii	red, Disposed of	, or Beneficial	ly Owned		
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. Securi (A) or D (Instr. 3,	ispose 4 and (A) or	d of (D)	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	Ownership Form: Direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	12/31/2010	Â	J4 <u>(1)</u>	4,360	A	\$ 19.62	83,103	I	401(k) Plan		
Common Stock	Â	Â	Â	Â	Â	Â	725 (5)	D	Â		
Common Stock	Â	Â	Â	Â	Â	Â	773 (5)	I	By Spouse		

Persons who respond to the collection of information contained in this form are not required to respond unless

5. Relationship of Reporting Person(s) to

Issuer

SEC 2270 (9-02)

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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)			6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
					(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Share
Restricted Stock Units	\$ 0 (2)	Â	Â	Â	Â	Â	02/05/2012	02/05/2012(3)	Common Stock	6,161
Restricted Stock Units (4)	\$ 0	Â	Â	Â	Â	Â	03/15/2012	03/15/2012(3)	Common Stock	4,000
Restricted Stock Units (4)	\$ 0 (2)	Â	Â	Â	Â	Â	02/01/2013	02/01/2013(3)	Common Stock	4,000
Stock Options (Right to Buy)	\$ 8.125	Â	Â	Â	Â	Â	12/11/2006	12/11/2011	Common Stock	2,800
Stock Options (Right to Buy)	\$ 17.185	Â	Â	Â	Â	Â	12/09/2008	12/09/2013	Common Stock	10,000

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
SMITH CHARLES D 1902 N. BAY DR. WARSAW. IN 46580	Â	Â	Executive Vice President	Â			

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Signatures

Teresa A. Bartman, Attorney-in-Fact

02/11/2011

**Signature of Reporting Person

Date

Explanation of Responses:

- * 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).
- (1) Salary redirection to 401(k) plan for 2010.
- (2) Each Restricted Stock Unit exercises into 1 share of Common Stock.
- (3) Restricted Stock Unit awards are a conditional promise to transfer a share at a specific futurue date and do not have an expiration date.
- (4) The Restricted Stock Units are subject to forfeiture based on corporate performance criteria.
- (5) Previous balance was mistated in error.

Note: File three copies of this Form, one of which must be manually signed. If space provided is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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