LAKELAND FINANCIAL CORP

Form 4 April 18, 2014

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1(b).

P.O. BOX 1387

(City)

(Instr. 3)

(Print or Type Responses)

1. Name and Address of Reporting Person *

O'Neill Lisa M

2. Issuer Name and Ticker or Trading

Symbol

LAKELAND FINANCIAL CORP [LKFN]

(Last) (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) 04/16/2014

(Street)

4. If Amendment, Date Original

3.

Filed(Month/Day/Year)

Person

Director

Applicable Line)

X_ Officer (give title

WARSAW, IN 46581

1.Title of 2. Transaction Date 2A. Deemed Security

(State)

(Month/Day/Year)

(Zip)

Execution Date, if (Month/Day/Year)

TransactionAcquired (A) or Code Disposed of (D) (Instr. 3, 4 and 5) (Instr. 8)

4. Securities

Code V Amount (D) Price

(A)

5. Amount of Securities Beneficially Owned Following Reported

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

Issuer

below)

Form: Direct (D) or Indirect Beneficial (T) (Instr. 4)

6. Ownership

7. Nature of Indirect Ownership (Instr. 4)

10% Owner

Other (specify

OMB APPROVAL

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0.5

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Number:

Expires:

response...

5. Relationship of Reporting Person(s) to

(Check all applicable)

EVP & CFO

6. Individual or Joint/Group Filing(Check

X Form filed by One Reporting Person Form filed by More than One Reporting

below)

Estimated average

burden hours per

Transaction(s) (Instr. 3 and 4)

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security

Conversion or Exercise

3. Transaction Date 3A. Deemed (Month/Day/Year)

Execution Date, if any

4. 5. Number Transaction of Derivative Expiration Date Code Securities

6. Date Exercisable and (Month/Day/Year)

7. Title and Amount of Underlying Securities (Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8	Acquired (A) or Disposed (D) (Instr. 3, and 5)	d of				
				Code V	/ (A)	(D)	Date Exercisable	Expiration Date	Title	Amoun or Number of Shares
Restricted Stock Units (1)	\$ 0 (2)	04/16/2014		A	4,000		02/01/2017	02/01/2017(3)	Common Stock	4,000
Restricted Stock Units	\$ 0 (2)	04/16/2014		A	3,000		04/16/2017	04/16/2017(3)	Common Stock	3,000

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			

O'Neill Lisa M P.O. BOX 1387

EVP & CFO

WARSAW, IN 46581

Signatures

Teresa A. Bartman, Attorney-in-Fact 04/18/2014

**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) The Restricted Stock Units are subject to forfeiture based on corporate performance criteria.
- (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.

Note: File three copies of this Form, one of which must be manually signed. If space 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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