FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0287
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	s)															
1. Name and Address of Reporting Person * BIGGS RAYMOND J				HU	2. Issuer Name and Ticker or Trading Symbol HUNTINGTON BANCSHARES INC/MD [HBAN]						5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_Director Officer (give title below) Other (specify below)					
(Last) (First) (Middle) P.O. BOX 46620					3. Date of Earliest Transaction (Month/Day/Year) 07/29/2005												
(Street) MT. CLEMENS 48046				4. If	4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting PersonForm filed by More than One Reporting Person					
(City) (State) (Zip)					Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned												
1.Title of Security (Instr. 3)		Date (Month/Day/Year) Exc		Execution any	A. Deemed secution Date, if y Ionth/Day/Year) 3. Transa Code (Instr.		Transaction Code		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Form: Direct (ship Indirect Benefici	Beneficial Ownership		
							V	Amount	(A) or (D)	Price				(I) (Instr. 4	(I) (Instr. 4)		
Commor	Stock 07/29/2005 A 2,929 A \$ 25.10 7,113			I	Deferro Compe Plan fo Huntin Bancsh Incorpo	By Issuer's Deferred Compensation Plan for Huntington Bancshares Incorporated Directors											
Commor	n Stock											5,27	77		I	By Wi	fe
Common Stock											1,753,838		I	By MS Family Partner	Ltd		
Reminder:	Report on a s	separate lii	ne for each		I - Deriv	ative Secu	urities A	cquire	Persons containe	who r d in th displa	nis form ays a co or Benef	n are uurrent urrent ficially	not requ tly valid	OMB cont	ormation spond unles rol number	s	74 (9-02)
Security	2. Conversion or Exercise Price of Derivative Security		Day/Year)	3A. Deem Execution any (Month/Da	Date, if		of	vative rities ired or osed b) : 3, d 5)	and Expiration Date (Month/Day/Year) Date Exercisable Expiration Date		Title	int of rlying	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	Ownership Form of Derivative Security: Direct (D) or Indirect	11. Nature of Indirec Beneficia Ownershi (Instr. 4)	

Reporting Owners

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

BIGGS RAYMOND J P.O. BOX 46620 MT. CLEMENS 48046	X				
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Signatures

Elizabeth B. Moore	08/01/2005
***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).

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.