FORM 4

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

OMB APPROVAL						
OMB Number:	3235-0287					
Estimated average burden						
nours per response						

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)													
Name and Address of Reporting Person* Nelson James W				2. Issuer Name and Ticker or Trading Symbol HUNTINGTON BANCSHARES INC/MD [HBAN]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title below) Other (specify below) Chief Risk Officer & EVP					
(Last) (First) (Middle) HUNTINGTON CENTER, 41 S. HIGH STREET				3. Date of Earliest Transaction (Month/Day/Year) 01/27/2006							Cnier	Risk Officer	& EVP		
(Street) COLUMBUS 43287			4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
(Instr. 3) Date		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year	(Instr. 8)		4. Securities Acqui (A) or Disposed of (Instr. 3, 4 and 5)		of (D)	Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) Ownership Form: Direct (D)		Beneficial Ownership				
				Coe	de	V	Amoun	(A) or (D)	Price	:			or Indirect (I) (Instr. 4)	(Instr. 4)	
Common	Stock		01/27/2006		P)		625	A	\$ 23.69	9 625 D				
Reminder:	Report on a s	eparate line f		Derivative Securit	ties Acq	quire	Pers cont the f	ons when ained in the constant of the constant	no responding this formal splays and the splays and the splays and the splays are splays and the splays are splays and the splays are splays ar	orm an a curre eneficia	re not requently valid	OMB con	ormation spond unle trol numbe	ss	1474 (9-02)
1 7711 6		2 T		(e.g., puts, calls, w		s, opt						lo B :	0.37	6 110	11.37
Security	2. Conversion or Exercise Price of Derivative Security	3. Transactic Date (Month/Day/	Execution Da (Year) any	4. Transaction Code Year) (Instr. 8)	5. Numbo of Deriva Securi Acquii (A) or Dispos of (D) (Instr. 4, and	tive ties red sed	and Expiration Date (Month/Day/Year) A U See (Ir		An Un Sec	Fitle and nount of derlying curities str. 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form o Derivat Security Direct (or Indir	Beneficial Ownership (Instr. 4)	
				Code V	(A)	(D)	Date Exer		Expiration Date	on Tit	Amount or le Number of Shares				

Reporting Owners

D 4 0 N 4	Relationships						
Reporting Owner Name / Address	Director	10% Owner Officer		Other			
Nelson James W HUNTINGTON CENTER 41 S. HIGH STREET COLUMBUS 43287			Chief Risk Officer & EVP				

Signatures

Elizabeth B. Moore	01/27/2006
**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.