FORM 4

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

OMB APPROVAL
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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* NAVARRO MARY W				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) Director X Officer (give title below) Other (specify below)							
(Last) (First) (Middle) HUNTINGTON CENTER, 41 S. HIGH STREET						3. Date of Earliest Transaction (Month/Day/Year) 03/15/2010									Sr EV	/P of I	Principal S	ub		
(Street) COLUMBUS, OH 43287					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 Acqui								Acquir	uired, Disposed of, or Beneficially Owned						
1.Title of Security (Instr. 3)		Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		if (Code		1	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		of	5. Amount of Sec Beneficially Own Reported Transac (Instr. 3 and 4)		Owned Follonsaction(s)	ned Following		7. Nature Indirect Benefici Ownersh	al nip	
						Code V Amount (A) or (D) Price		•	(I) (Instr. 4)			A (IIISII. I)								
Common	Stock		03/15/	2010				A			709 (1)	A	\$0	79,	506	D				
Common Stock													13,0	13,629		Ι	By Issu Investr and Ta Saving (401(k)	ment x s Plan		
Common Stock													2,0:	55	ĵ		I	By Issu Supple Stock Purcha Tax Sa Plan	mental se and	
Reminder:	Report on a s	separate line	e for each							Pe cc th	ersons w ontained e form d	ho res in this isplay	form s a c	n are urren	not requ tly valid	ction of inf lired to res OMB cont	pond	l unless	SEC 14	74 (9-02)
				Table II							Disposed ons, conve				y Owned					
1. Title of Derivative Security (Instr. 3) 1. Title of Conversion or Exercise Price of Derivative Security		(Month/Day/Year) any		Date, if	ate, if Transaction Code (Year) (Instr. 8)		Number		ar (N	6. Date Exercisable and Expiration Date (Month/Day/Year)		Amor Unde Secur	rlying rities . 3 and	(Instr. 5) Ber Ow Foli Rep Tra	Deriv Secur Benet Owne Follor Repor	vative (inities Fericially Fericially Fericially Fericially Fericial Fericia	Ownership Form of Derivative Security: Direct (D) or Indirect	Beneficial		
						Code	V	(A)	(D)	Е	ate xercisable	Expir Date	ration		Amount or Number of Shares					

Reporting Owners

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

	NAVARRO MARY W HUNTINGTON CENTER 41 S. HIGH STREET COLUMBUS, OH 43287			Sr EVP of Principal Sub		
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Signatures

Elizabeth B. Moore	03/16/2010
**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).
- These are shares of restricted stock that are 100% vested; however, they may not be sold, transferred, pledged, assigned, or otherwise disposed of until the later to occur of (1) (1) or (2): (1) The date that is six months after the payment date; or (2) the earliest to occur of the following events: (A) 6 months after the repayment of any loan issued to the company under the Troubled Asset Relief Program ("TARP"), (B) January 1, 2012, or (C) a change in control of the company.

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.