### FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response... 0.5

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 Type	e Responses	s)																		
1. Name and Address of Reporting Person* Dunlap James E				HU	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)  Regional Banking Group Pres.							
(Last) (First) (Middle) HUNTINGTON CENTER, 41 S. HIGH STREET						3. Date of Earliest Transaction (Month/Day/Year) 12/31/2010								Regiona	I Bank	ang Group	Pres.			
(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 Person _Form filed by More than One Reporting Person							
(City)	503, 011	(State)		(Zip)			Ta	able I - N	on-I	Derivative	Securi	ties A	cqui	ired, Disp	osed of, or E	Benefi	cially Ow	ned		
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Ye			any	ion Date, i			n	(A) or Disposed of (D) (Instr. 3, 4 and 5)		Ber Rej	5. Amount of Securities Beneficially Owned Fol Reported Transaction(s) (Instr. 3 and 4)		wing	Form: Benefic Direct (D) Owners or Indirect (Instr. 4		al nip				
								Code	V	Amount	(A) or (D)	Price	:				(I) (Instr. 4)			
Common	Stock		12/31/	2010				A		564 (1)	A	\$ 0	14	2,097			D			
Common S	Stock												35	35,620		Ι	Investr and Ta Saving	By Issuer's Investment and Tax Savings Plan (401(k) Plan)		
Common S	Stock												9,0	063			I	By Issu Supple Stock Purcha Tax Sa Plan	mental se and	
Common S	Stock												8,2	203			I	by Tru	st	
Reminder: R	deport on a s	eparate line	for each		- Deriv	rative Secu	ırit	ies Acqui	Pe cc th	ersons wontained e form di	ho res in this isplays	forms a cu	are urre	not requ	ction of inf iired to res OMB cont	pond	lunless	SEC 147	74 (9-02)	
(Instr. 3) I			ıy/Year)	3A. Deeme Execution I any (Month/Da	ed Date, if	4. Transacti Code	on	5.	6. ar (N	ate Expiration Date Annth/Day/Year)  An Un Se (Ii 4)		7. To Amo Und Secu (Inst	7. Title and Amount of Underlying Securities (Instr. 3 and 4)  8. Price of Derivative Deriv Security S		ative rities ficially ed wing rted action(s)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	Beneficial			
						Code	V	(A) (D		xercisable	Date			of Shares						

## **Reporting Owners**

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

Dunlap James E			
HUNTINGTON CENTER		Regional Banking Group Pres.	l
41 S. HIGH STREET		Regional Banking Gloup Fies.	ĺ
COLUMBUS, OH 43287			ĺ

### **Signatures**

Elizabeth B. Moore	01/03/2011
**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).

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.