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 | | | | | | |
|--|---|--|---------------------------------|--|---|---------------|--|--|---|--|--|--|---|---------------------------------------|---|----------|
| 1. Name and Address of Reporting Person* MASTROIANNNI GERARD P | | | | | 2. Issuer Name and Ticker or Trading Symbol HUNTINGTON BANCSHARES INC/MD [HBAN] | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director 10% Owner Officer (give title below) Other (specify below) | | | | | |
| (Last) (First) (Middle) HUNTINGTON CENTER, 41 S. HIGH STREET | | | | 3. Date of Earlie 07/21/2008 | 3. Date of Earliest Transaction (Month/Day/Year) 07/21/2008 | | | | | | | | | | | |
| (Street) | | | | 4. If Amendmen | 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 | | | | | |
| COLUMBUS, OH 43287 (City) (State) (Zip) | | | | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | |
| 1.Title of Security (Instr. 3) | | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, i | 3. Transaction Code (Instr. 8) | | | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | | | 6. Ownership Form: Direct (D) | | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | Code | V | Amount | (A) or (D) | Price | | | | (I) | or Indirect (Instr. 4) (I) (Instr. 4) | | 4) |
| Common Stock | | 07/21/2008 | | A | | 2,500 (1) | A | \$ 0 | 51,240 | | D |) | | | | |
| Common Stock | | | | | | | | | 200 | | I By Chile | | By Child | Iren | | |
| Common Stock | | | | | | | | | 2,766 | | I | | By Partn | ership | | |
| Reminder: | Report on a s | separate line | for each class of sec | urities beneficially | owned dire | Pe | rsons wh | no resp n this f | orm a | re not requ | ction of inf uired to res I OMB conf | spond u | ınless | SE | C 147 | 4 (9-02) |
| | | | Table II | - Derivative Secur (e.g., puts, calls, | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transacti Date (Month/Day | Execution I any | | 5. | 6. and (M. 1) | 6. Date Exercisable and Expiration Date (Month/Day/Year) (Month/Day/Year) 7. 7 Un Sec | | Title and mount of nderlying curities astr. 3 and | 8. Price of Derivative Security (Instr. 5) Benefic Owned Followi Reporte Transac (Instr. 4) | | ive es ially ng ed etion(s) | ve Ownership Form of Derivative Security: Direct (D) or Indirect ion(s) | | 11. Nature of Indirec Beneficia Ownershi (Instr. 4) | |
| | | | | Code \ | (A) (E | | ate ercisable | Expirat Date | ion Ti | Amount or Number of Shares | | | | | | |

Reporting Owners

| | Relationships | | | | | |
|---|---------------|--------------|---------|-------|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | |
| MASTROIANNNI GERARD P HUNTINGTON CENTER 41 S. HIGH STREET COLUMBUS, OH 43287 | X | | | | | |

Signatures

| Elizabeth B. Moore | 07/22/2008 |
|---------------------------------|------------|
| **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) A vested deferred stock award these shares are deliverable to the Reporting Person six months following separation from service as a director.

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.