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MORTENSEN PETER

Form 4

February 09, 2006

FORM 4

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

OMB APPROVAL

Number: 3235-0287

Expires: January 31, 2005

0.5

Estimated average burden hours per response...

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Form 5 obligations may continue.

See Instruction

Check this box

if no longer

subject to

Section 16.

Form 4 or

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Add MORTENSEN	*	ng Person *	2. Issuer Name and Ticker or Trading Symbol	5. Relationship of Reporting Person(s) to Issuer			
			FNB CORP/FL/ [FNB]	(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction				
426 ROBERTSON ROAD			(Month/Day/Year) 03/17/2005	X Director 10% Owner X Officer (give title Other (specify below) Chairman			
(Street) HERMITAGE, PA 16148			4. If Amendment, Date Original 6. Individual or Joint/Grou				
			Filed(Month/Day/Year)	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 Acc	quired, Disposed of, or Beneficially Owned			

(City)	(State) (Z	Table	I - Non-Do	erivative S	ecurities	s Acq	quired, Disposed	of, or Beneficial	lly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securit onAcquired Disposed (Instr. 3,	(A) or of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock							82,241	D	
Common Stock							467.2907 <u>(1)</u>	I (2)	By Wife
Common Stock							28,681.313	D	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (Instr.		5. Number of onDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and A Underlying S (Instr. 3 and	
				Code	V	(A)		(D)	Date Exercisable	Expiration Date	Title
Stock Options (Granted 01/20/2002)	\$ 12.94							. ,	<u>(3)</u>	01/20/2012	Common Stock
Stock Options (Granted 01/20/2002)	\$ 12.94								01/21/2003	01/20/2012	Common Stock
Stock Options (Granted 01/20/2003)	\$ 13.75								01/21/2004	01/20/2013	Common Stock
Common Stock Equivalent	\$ 19.1	03/17/2005		C	V		15,8	19.1334 (1)	<u>(5)</u>	<u>(6)</u>	Common Stock

Reporting Owners

Reporting Owner Name / Address	Relationships								
	Director	10% Owner	Officer	Other					
MORTENSEN PETER 426 ROBERTSON ROAD HERMITAGE, PA 16148	X		Chairman						

Signatures

/s/ Peter
Mortensen

**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).

Reporting Owners 2

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- (1) Includes 186.3457 shares acquired under the F.N.B. Corporation Dividend Reinvestment Plan.
- (2) Beneficial ownership of these shares are disclaimed.
- (3) Options are fully vested and are available for immediate exercise.
- (4) Represents credit under a supplemental retirement plan for employer matching stock contributions which reporting person receives upon retirement.
- (5) Upon entitlement to amounts under exempt 401(k) Plan.
- (6) Not applicable; represents credit under supplemental retirement plan for employer matching stock contribution which reporting person was prevented from receiving under exempt 401(k) plan.

Remarks:

Statement of 2005 holdings.

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.