## Edgar Filing: FNB CORP/FL/ - Form 4

FNB CORP/	FL/									
Form 4										
May 19, 201	6									
FORM	14								OMB AF	PROVAL
	UNITED	STATES		RITIES A shington,			NGE C	COMMISSION	OMB Number:	3235-0287
Check the									Expires:	January 31,
if no long subject to		MENT OF	F CHAN	<b>GES IN</b>	BENEF	ICIA	LOW	NERSHIP OF	Estimated a	2005 Verage
Section 1				SECUR	RITIES				burden hour	•
Form 4 o					~ .				response	0.5
Form 5 obligation	<b>*</b>						•	e Act of 1934,		
may cont								f 1935 or Sectior	1	
See Instru	uction	30(h)	of the In	vestment	Compar	iy Ac	ct of 194	10		
1(b).										
(Print or Type F	Responses)									
(										
1. Name and A	ddress of Reporting	g Person <sup>*</sup>	2. Issue	r Name <b>and</b>	l Ticker or	Tradi	ng	5. Relationship of	Reporting Pers	on(s) to
HORMELL	ROBERT A		Symbol				0	Issuer		
			•	ORP/FL/	[FNB]					
(Last)	(First)	(Middle)		f Earliest Tı				(Check	k all applicable	)
(Lust)	(1130)	(initiality)	(Month/E		ansaction			X Director	10%	Owner
ONE NORT	TH SHORE CEN	ITER	05/18/2	-				Officer (give t	title Othe	r (specify
								below)	below)	
	(Street)			endment, Da	-	ıl		6. Individual or Jo	int/Group Filin	g(Check
			Filed(Mor	nth/Day/Year	.)			Applicable Line)	no Donostino Dos	
DITTODUD	CH DA 15212							_X_ Form filed by O Form filed by M		
PIIISDUR	GH, PA 15212							Person		
(City)	(State)	(Zip)	Tabl	le I - Non-E	Derivative	Secur	ities Acq	uired, Disposed of	, or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)		n Date, if	3. Transactic Code (Instr. 8)	4. Securi on(A) or D (Instr. 3,	ispose	d of (D)	5. Amount of Securities Beneficially Owned	6. Ownership Form: Direct (D) or	7. Nature of Indirect Beneficial Ownership
		(WORTH/D	ayricar)	(1150.0)		(A) or		Following Reported Transaction(s)	(D) of Indirect (I) (Instr. 4)	(Instr. 4)
				Code V	Amount	(D)	Price	(Instr. 3 and 4)		
Common Stock	05/18/2016			А	3,490	А	\$ 12.96	48,217.1172	D	

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

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)		4. Transact	5. ionNun	ıber	6. Date Exerce Expiration D		7. Titl Amou		8. Price of Derivative	9. Nu Deriv
Security (Instr. 3)	or Exercise Price of Derivative Security	(nondi Duy rour)	(Month/Day/Year)	Code (Instr. 8)	of Deri Secu Acq (A) Disp of (I (Inst	vative urities uired or osed O)	(Month/Day/ e		Under Secur	rlying	Security (Instr. 5)	Secur Bene Owne Follo Repo Trans (Instr
				Code N	7 (A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

_						
F	Reporting Owner Nam	ie / Address	Director	10% Owner	Officer	Other
ON	RMELL ROBERT E NORTH SHORE TSBURGH, PA 15	E CENTER	Х			
Sig	gnatures					
	Robert A. mell	05/19/	2016			
	**Signature of eporting Person	Date	e			

## **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.