2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # 828606

1. Entity Name

UNIVERSAL FOREST PRODUCTS, INC.



Principal Place of Business

2801 E BELTLINE, N.E. GRAND RAPID, MI 49525

Mailing Address

2801 E BELTLINE, N.E. GRAND RAPID, MI 49525

FILED Apr 28, 2008 08:00 AN Secretary of State



04222008

No Chg-P

CR2E034 (11/05)

4. FEI Number 38-1465835

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

616-364-614

6. Name and Address of Current Registered Agent

WHITE, STEVE 105 PROGRESS RD. AUBURNDALE, FL 33823-7217

SIGNATURE: _\O

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	named entity submits this statement for the plions of registered agent.	ourpose of changing its register	ed office or re	egistered agent, or bo	th, in the State of Florida. I am familiar with, and acce	эpt
SIGNATURE				required when reinstating)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.			. –	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIRECT	CTORS]			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C CURRIE, WILLIAM G. 1830 BEARD DR. S.E. GRAND RAPIDS, MI				Haaaaaaaa	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT COLE, MICHAEL R 2801 E BEHLINE NE GRAND RAPIDS, MI 49525				U00000927132 05/20/08-80093-021 150.00	
TITLE NAME STREET ADDRESS CITY: ST-ZIP	SVP MISSAD, MATTHEW J 3987 BRIDGESTONE NE GRAND RAPIDS, MI 49546			DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO GLENN, MICHAEL B 1405 BOLLYBUNION SE GRAND RAPIDS, MI 49546		:	IN ⁻	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	take to en-	, as as see				
NAME STREET ADDRESS	The state of the s		, , , , ,	State of the state	i i ·	
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or truetee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an addiess, with all other like empowered.						

SUNATURE AND TYPED OR PARKITED NAME OF SIGNING OFFICER OR DIRECTOR