SEC Form 5

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FORM 5

|) | Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. <i>See</i> Instruction 1(b). |
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Form 3 Holdings Reported.

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

| 0 | |
|----------------------|-----------|
| OMB Number: | 3235-0362 |
| Estimated average bu | ırden |
| hours per response: | 1.0 |

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| Form 4 Transact | tions Reported. | File | | | e Securities Exchange Act of 1934 ment Company Act of 1940 | | | | |
|--|-----------------|-----------------|---|---|---|--------|---|---|---|
| 1. Name and Addre HILL ROBE (Last) 2801 EAST BE | Middle) | UFPI] | AL FORF | Trading Symbol <u>ST PRODUCTS INC</u> [I Year Ended (Month/Day/Year) | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) President, UFP Western Div. | | | | |
| (Street) GRAND RAPIDS (City) | 9525 Zip) | 4. If Amendmen | t, Date of Orig | inal 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 | | | | |
| | Tabl | e I - Non-Deriv | ative Securitie | es Acquire | ed, Disposed of, or Benefi | cially | Owned | | |
| Date (Month/Day/Year) | | | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) | 4. Securities Acquired (A) or Dispo Of (D) (Instr. 3, 4 and 5) | | 5. Amount of Securities Beneficially Owned at end of | 6. Ownership Form: Direct (D) or | 7. Nature of Indirect Beneficial Ownershin |

| (Month/Day/Ye | | if any (Month/Day/Year) | Code (Instr. | | | | Beneficially Owned at end of | Form: Direct (D) or | Beneficial Ownership |
|---------------|------------|----------------------------|--------------|----------|---------------|-------|---|--------------------------------------|-------------------------|
| | | (Monthi/Day/rear) | 0) | Amount | (A) or (D) | Price | Issuer's Fiscal Year (Instr. 3 and 4) | (D) Of Indirect (I) (Instr. 4) | (Instr. 4) |
| Common Stock | 12/31/2005 | | J | 38 | D | (1) | 16,829 | Ι | By P/S Plan |
| Common Stock | | | | | | | 82,045 | D | |
| Common Stock | | | | | | | 684 | Ι | By Trust |
| Common Stock | | | | | | | 6,879 | Ι | By Trust |
| | | | | <u>.</u> | <u> </u> | e · u | · · | | |

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

| | (e.g., puts, cans, 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. Transaction Code (Instr. 8) | of | | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Phantom Stock Units | (2) | 12/15/2005 | | А | 61 | | (3) | (3) | Common Stock | 61 | \$56.97 | 18,935 | D | |

Explanation of Responses:

1. Shares disposed of during fiscal year 2005 pursuant to the Company's Profit Sharing and 401(k) Retirement Plan.

2. 1-for-1

3. The phantom stock units were accrued under the Company's Deferred Compensation Plan and are payable in cash or shares of the Company's common stock until the reporting person's death, disability or retirement.

02/06/2006 Date

** Signature of Reporting Person

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

 * 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.

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 Number.