FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>COLE MICHAEL R</u>						2. Issuer Name and Ticker or Trading Symbol UNIVERSAL FOREST PRODUCTS INC UFPI UFPI 1									(Check all app Direct		licable) tor er (give title	109 Oth	Person(s) to Issuer 10% Owner Other (specify below)	
(Last) (First) (Middle) 2801 EAST BELTLINE, N.E.					3. Date of Earliest Transaction (Month/Day/Year) 07/20/2006										Chief Financial Officer					
(Street) GRAND RAPIDS (City)	ND MI 49525				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									. Indivi ine) X	-,				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
					2. Transaction Date (Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year)					ties Acquired (A) of (D) (Instr. 3, 4			5. Amo Securi Benefi Owned Report	ties cially I Following	6. Ownershi Form: Direct (D) or Indiret (I) (Instr. 4)	of Indirect	
							Code	v	Amount	() (I	A) or D)	Price		Transaction(s) (Instr. 3 and 4)			(,			
Common Stock																15,172		D		
Common Stock					07/20/2006				P		868		A	\$49.52		6,716 ⁽¹⁾		I	P/S Plan	
		Та									sed of, onvertib					vned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date, Transact Code (In:					6. Date E Expiratio (Month/D		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)				vative urity ir. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ot (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or	ount nber ires						

Explanation of Responses:

1. Reflects non-discretionary transactions affected in account purusuant to the terms of the Company's Profit Sharing and 401(k) Retirement Plan.

/s/ Christina A. Holderman,

Attorney-in-Fact for Michael

R. Cole

** Signature of Reporting Person Date

07/20/2006

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.