


2008 FOR PROFIT CORPORATION ANNUAL REPORT

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

DOCUMENT # F99000000304

1. Entity Name
 UNIVERSAL FOREST PRODUCTS EASTERN DIVISION, INC.



Principal Place of Business
 2801 E. BELTLINE, NE
 GRAND RAPIDS, MI 49525

Mailing Address
 2801 E. BELTLINE, NE
 GRAND RAPIDS, MI 49525

DO NOT WRITE IN THIS SPACE



04222008 No Chg-P CR2E034 (11/05)

4. FEI Number
 23-2864976

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

WHITE, STEVE
 105 PROGRESS RD.
 AUBURNDALE, FL 33823

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	GREENE, C SCOTT
STREET ADDRESS	5200 HWY. 138
CITY-ST-ZIP	UNION CITY, GA 30291
TITLE	SD
NAME	MISSAD, MATTHEW J
STREET ADDRESS	2801 E. BELTLINE NE
CITY-ST-ZIP	GRAND RAPIDS, MI 49525
TITLE	T
NAME	COLE, MICHAEL R
STREET ADDRESS	2801 E. BELTLINE NE
CITY-ST-ZIP	GRAND RAPIDS, MI 49525
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

05/20/08-80093-019 150.00

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12. I hereby certify that the information supplied with this filing 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 trustee 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 address, with all other like empowered.

SIGNATURE: Michael R. Cole Michael R. Cole 4/24/08 616-364-6161

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #