FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

| OMB APPR | OVAL |
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| OMB Number: | 3235-028 |
| Estimated average b | ourden |
| hours por rosponso | 0 |

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 OF SECURITIES

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

| (Print or Ty | pe Response | 3) | | | | | | | | | | | | | | |
|--------------------------------------------------------------|-----------------------------------------------------------|-----------------------------------------|---------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|--------------------------------|---------------------------------------------------------|-------------------------------------------------------------------------------|------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------|-----------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|---------------------------------------------------------------|
| 1. Name and Address of Reporting Person* SCHARNOTT GREGORY J | | | 2. Issuer Name and Ticker or Trading Symbol PATRICK INDUSTRIES INC [PATK] | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | | |
| P.O. BOX 638 (Street) (Middle) | | | | 3. Date of Earliest Transaction (Month/Day/Year) 10/31/2005 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | | _X_6 | X Officer (give title below) Other (specify below) Vice President-Operations East 6. Individual or Joint/Group Filing/Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| | | | 4. If Aı | | | | | | | _X_ Fo: | | | | | | |
| ELKHART, IN 46515 (City) (State) (Zip) | | | | Table I - Non-Derivative Securities Acqu | | | | | | Acquired, D | uired, Disposed of, or Beneficially Owned | | | | | |
| (Instr. 3) Date | | 2. Transaction Date (Month/Day/Ye | ear) any | | emed 3 | | 3. Transaction | | ecurities Acqui or Disposed of r. 3, 4 and 5) | red (D) S. Amo Owned Transa | d 5. Amount of Se | | eficially (| Ownership of Borm: | Beneficial Ownership | |
| | | | | | | | | Code V | 7 Amo | ount (A) or (D) | Price | | | (I | | nsu. 4) |
| Reminder: | Report on a | separate fine for each | | | | | | in th | nis fori | ho respond n are not red valid OMB | uired to re | spond u | | | | 74 (9-02) |
| Reminder: | Report on a s | separate file for each | | | | | | in that a cu | nis fori irrently pisposed | n are not rec | uired to re control nur cially Owned | spond ui nber. | | | | 74 (9-02) |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative | 3. Transaction Date | Table I 3A. Deemed Execution Date, if | 4. Transac Code | puts, of string | calls, was 5. Number of Deriva Securities Acquired or Dispos | er er ative s (A) | cquired, Donts, options 6. Date Ex Expiration (Month/Da | nis form irrently visposed s, conve cercisab in Date | n are not rec y valid OMB of or Benefic rtible securiti | uired to re control nur cially Owned | spond unnber. I Amount | 8. Price of | 9. Number o Derivative Securities Beneficially Owned | f 10. Ownership Form of Derivative Security: | 11. Natur of Indirec Beneficia |
| 1. Title of Derivative Security | 2. Conversion or Exercise Price of | 3. Transaction Date | Table I 3A. Deemed Execution Date, if any | 4. Transac Code | puts, of string | calls, was 5. Number of Deriva Securities Acquired | er ative s (A) sed | cquired, Donts, options 6. Date Ex Expiration (Month/Da | nis form irrently visposed s, conve cercisab in Date | n are not rec y valid OMB of or Benefic rtible securiti | cially Owned es) 7. Title and of Underlyi Securities | spond unnber. I Amount | 8. Price of Derivative Security | 9. Number o Derivative Securities Beneficially Owned Following Reported Transaction(| f 10. Ownership Form of Derivative Security: Direct (D) or Indirect | 11. Natur of Indired Beneficia Ownersh (Instr. 4) |
| 1. Title of Derivative Security | 2. Conversion or Exercise Price of Derivative | 3. Transaction Date | Table I 3A. Deemed Execution Date, if any | 4. Transac Code | puts, of string | calls, was 5. Numborf Deriva Securitie. Acquired or Disposof (D) (Instr. 3, and 5) | er ative s (A) sed | cquired, Donts, options 6. Date Ex Expiration (Month/Da | nis forn urrently visposed s, conve cercisab n Date ay/Yean | n are not rec y valid OMB of or Benefic rtible securiti | cially Owned es) 7. Title and of Underlyi Securities | spond unnber. I Amount | 8. Price of Derivative Security | 9. Number o Derivative Securities Beneficially Owned Following Reported | f 10. Ownership Form of Derivative Security: Direct (D) or Indirect | 11. Natur of Indire Beneficia Ownersh (Instr. 4) |

| P (0 N / | Relationships | | | | | |
|-------------------------------------|---------------|--------------|--------------------------------|-------|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | |
| SCHARNOTT GREGORY J P.O. BOX 638 | | | Vice President-Operations East | | | |
| ELKHART, IN 46515 | | | • | | | |

Signatures

| Gregory J. Scharnott by Andy L. Nemeth, Agent | 11/02/2005 |
|-----------------------------------------------|------------|
| **Signature of Reporting Person | Date |

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).
- (1) Vesting 25% per year commencing after original date of grant of 10/31/05

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.