FORM 4

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

OMB APPR	OVAL
OMB Number:	3235-0287
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nours per response	e 0.5

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	s)															
1. Name and Address of Reporting Person * LUNG MERVIN D				2. Issuer Name and Ticker or Trading Symbol PATRICK INDUSTRIES INC [PATK]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner					
P.O. BOX	·	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 02/24/2005						Office	er (give title belo	ow)	Other (specify l	pelow)			
(Street) ELKHART, IN 46515				4. If Amendment, Date Original Filed(Month/Day/Year)							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					
(City		(State)	(Zip)			Tabl	le I - N	Non-I	Derivat	tive S	ecuritie	s Acqu	l iired, Disp	osed of, or l	Beneficially	Owned	
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year)				e, if	(Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)			Ownership of Form:	Beneficial			
				(Month	/Day/Ye	ear)	Code	e i	V An	nount	(A) or (D)	Price				Ownership (Instr. 4)	
Common	Stock		02/24/2005				S		1,0	000		\$ 10.28	863,990	363,996		D	
Common	Stock		02/24/2005				S		1,0	000		\$ 10.25	862,996			D	
								th uired,	ontain e forn Dispo	ed in n disposed of	this fo plays a f, or Be	orm ar curre	e not requently valid	I OMB con	formation spond unle trol numbe	SS	1474 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transactic Date (Month/Day	on 3A. Deemed Execution Da	ate, if 4.	ransactio	5. Non No of Do Se A (A D of (In	umber	ive es ed	and Expiration Date (Month/Day/Year) A U Si Si I I I I I I I I I I I I I I I I I		7. TAM Und Sec (Ins 4)	Amount or Number of			Owners Form of Derivati Security Direct (or Indire	Benefici Ownersh (Instr. 4)	

Reporting Owners

P (0 N /	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
LUNG MERVIN D	37	77					
P.O. BOX 638 ELKHART, IN 46515	X	X					

Signatures

Mervin D. Lung by Andy L. Nemeth, Agent	02/25/2005
**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).

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.