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November 7, 2008

U.S. Department of Labor
200 Constitution Avenue, NW
Top Hat Plan Exemption
Employee Benefits Security Administration
Room -153
Washington, D.C. 20210

Dear Sir or Madam:

On behalf of The Plan Administration, Wood Goods Industries Inc., pursuant to the Department of Labor Regulations, 29 C.F. R. §2520.104-23, under Section 110 of Title I of the Employee Retirement Income Security Act of 1974, the undersigned provides the following information in compliance with the alternative method of reporting and disclosure for unfunded plans maintained for a select group of management or highly compensated employees.

STATEMENT OF COMPLIANCE

1. Name and address of employer: Wood Goods Industries, Inc.
407 South Duncan Street
Luck, WI 54853
2. Employer Identification Number: 41-1447073
3. Wood Goods Industries, Inc. maintains a plan primarily to provide deferred compensation benefits for a select group of management of highly compensated employees.

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4. Number of such Plans and number of Participants in each Plan:

| <u>Plan</u> | <u>Number of Participants</u> |
|-------------|-------------------------------|
| #1 | 1 |

Wood Goods Industries, Inc. will provide a copy of the Plan document upon request by the Secretary.

Sincerely,



G. Craig Howse

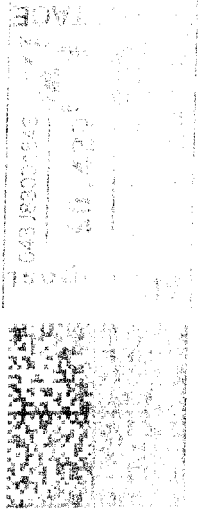
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