MONAHAN HAROLD F

Form 4

March 22, 2006

FORM 4

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

OMB Number: 3235-0287

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005
Estimated average

OMB APPROVAL

Form 4 or Form 5 obligations may continue.

See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

burden hours per response... 0.5

1(b).

Common

Stock

03/20/2006

(Print or Type Responses)

| 1. Name and A MONAHAN | Symbol | 2. Issuer Name and Ticker or Trading Symbol TREX CO INC [TWP] | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|-----------------------|---------------------|---|---------------------------------|---------------------------|---|--|------------|--|--|--|
| (Last) | (First) (N | Middle) 3. Date o | 3. Date of Earliest Transaction | | | =(eneen an approacte) | | | | |
| 160 EXETE | ` | (Month/Day/Year) 03/20/2006 | | | ve title 0the below) and General Ma | er (specify | | | | |
| | (Street) | 4. If Ame | 4. If Amendment, Date Original | | | 6. Individual or Joint/Group Filing(Check | | | | |
| WINCHEST | ΓER, VA 22603-8 | · · | Filed(Month/Day/Year) | | | Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) | (State) | (Zip) Tab | le I - Non-D | Perivative Securities Acq | uired, Disposed o | of, or Beneficial | ly Owned | | | |
| 1.Title of | 2. Transaction Date | | 3. | 4. Securities Acquired | 5. Amount of | 6. Ownership | | | | |
| Security | (Month/Day/Year) | Execution Date, if | | on(A) or Disposed of (D) | Securities | Form: Direct | Indirect | | | |
| (Instr. 3) | | any | Code | (Instr. 3, 4 and 5) | Beneficially | (D) or | Beneficial | | | |
| | | (Month/Day/Year) | (Instr. 8) | | Owned | Indirect (I) | Ownership | | | |
| | | | | | Following | (Instr. 4) | (Instr. 4) | | | |

Code V Amount

4,292

F

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

03/20/2006

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 control number.

SEC 1474

(9-02)

Reported

32,725

Transaction(s) (Instr. 3 and 4)

D

(A)

(D)

D

Price

28.99

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

Edgar Filing: MONAHAN HAROLD F - Form 4

| 1. Title of | 2. | 3. Transaction Date | | 4. | 5. | 6. Date Exerc | | 7. Title a | | 8. Price of | 9. Nu |
|--------------------------------------|---|---------------------|---|----------------------------------|---|---------------------|--------------------|--|-----------|--------------------------------------|---|
| Derivative Security (Instr. 3) | Conversion or Exercise Price of Derivative Security | (Month/Day/Year) | Execution Date, if any (Month/Day/Year) | Transactic Code (Instr. 8) | onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | | Amount Underlyi Securitie (Instr. 3 | ing es | Derivative Security (Instr. 5) | Deriv Secur Bene Own Follo Repo Trans (Instr |
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | or Title N of | umber | | |

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

MONAHAN HAROLD F 160 EXETER DRIVE WINCHESTER, VA 22603-8605

Exec VP and General Manager

Signatures

Lynn E MacDonald by power of attorney

03/22/2006

**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.

Reporting Owners 2