# FORM D



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

### FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

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OMB A	pproval
OMB Number:	3235-0076
Expires:	May 31, 2005

Estimated average burden hours per response................. 16.00

SEC	USE ONLY
Prefix	Serial
DATE	E RECEIVED

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)							
Quaker American, LLC Placement of Limited Liability Company Interests							
Filing Under (Check box(es) that apply):   Rule 504 Rule 505 Rule 506	Section 4(6) ULOE						
Type of Filing: New Filing ☐ Amendment ATR 25 1003 >							
A. BASIC IDENTIFICATION DATA							
Enter the information requested about the issuer							
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)							
Quaker American, LLC							
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)						
P.O. Box 961; 101 Sanctuary Drive, Crystal Beach FL 34681	(727) 781-9745						
Address of Principal Business Operations (Number and Street, City, State, Zip Code)  (if different from Executive Offices)  Telephone Number (Including Area Code)							
Brief Description of Business:	@CFCCET						
Restaurant	DKOC E22F1						
Type of Business Organization	1 0.1 2002						
corporation   limited partnership, already formed   business trust   limited partnership, to be formed	other (please specify MAY 0 1 2003 limited liability company						
Month	Year FINANCIAL						
Actual or Estimated Date of Incorporation or Organization:  0 9 0	2 Actual Estimated						
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State;  CN for Canada; FN for other foreign jurisdiction)	D E						

## GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

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 control number.

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#### A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Beneficial Owner □ Director General and Managing Partner Full Name (Last Name First, If Individual) Church, William E. Business or Residence Address (Number and Street, City, State, Zip Code) 101 Sanctuary Drive, Crystal Beach FL 34681 Beneficial Owner Executive Officer Director Check Box(es) that Apply: Promoter General and Managing Partner Full Name (Last name first, if individual) Chautauqua Trust; William Church, Trustee Business or Residence Address (Number and Street, City, State, Zip Code) 101 Sanctuary Drive, Crystal Beach FL 34681 Beneficial Owner Executive Officer Director Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer Director Check Box(es) that Apply: General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Promoter Check Box(es) that Apply: Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Promoter Beneficial Owner Executive Officer Director General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

	B. INFORMATION ABOUT OFFERING															
Has the issuer sold or does the issuer intend to sell, to non-accredited investors in this offering?  Answer also in Appendix, Column 2, if filing under ULOE.									,	Yes	No ⊠					
2.	2. What is the minimum investment that will be accepted from any individual?											\$ 15,000				
3.	3. Does the offering permit joint ownership of a single unit?										Yes No □ ⊠					
4.																
Full	Name (	Last	name	first, if	individ	ual)										
Bus	iness or	Resi	idence .	Addres	s (Num	ber and	d Street	, City,	State, Z	Zip Cod	e)					
Nan	ne of As	socia	ated Br	oker or	Dealer	•	·,							<u>.    </u> .		
	es in Wl eck "All													☐ All States		
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Full	Name (	Last	name i	first, if	individ	ual)										
Bus	iness or	Resi	dence .	Addres	s (Num	ber and	Street	, City,	State, Z	ip Cod	e)					
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	Name (														<u>.</u>	
	iness or						l Street	, City, S	State, Z	ip Cod	e) ———					
Nan	ne of Ass	socia	ated Br	oker or	Dealer											
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)						□ A	.ll States									
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero". If the transaction is an exchange offering, check this box and indicate in the column below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security				
			Aggregate Offering Price	Ar	mount Already Sold
	Debt	_		\$	
	Equity	\$		\$	
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	\$		\$	
	Partnership Interests	\$		\$	
	Other (specify) limited liability company interests	\$	1,700,000_	\$	1,700,000
	Total	\$	1,700,000	\$	1,700,000
	Answer also in Appendix, Column 3, if filing under ULOE	<b>-</b>			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number Investors		Aggregate ollar Amount of Purchases
	Accredited Investors		15	\$	1,700,000
	Non-accredited Investors		0	\$	0
	Total (for filings under Rule 504 only)	······	N/A	\$	N/A
	Answer also in Appendix, Column 4, if filing under ULOE				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.				
	Type of offering				
			Type of	D	ollar Amount
			Security		Sold
	Rule 505		N/A	\$	0
	Regulation A		N/A	\$	0
	Rule 504		N/A	\$	0
	Total		N/A	\$	0
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			\$	
	Printing and Engraving Costs			\$	
	Legal Fees		$\boxtimes$	\$	10,000
	Accounting Fees			\$	
	Engineering Fees		$\bar{\Box}$	\$_	
	Sales Commissions (Specify finder's fees separately)			\$	
	Other Expenses (identify)			 \$_	
	Total		×	\$_	10,000

	C. OFFERING PRICE, NU	IMBER OF INVESTORS, EXPI	ENSES AN	D USE OF	PROCEED	S
	b. Enter the difference between the aggregate of 1 and total expenses furnished in response to Par gross proceeds to the issuer."	\$_1,690,000				
	Indicate below the amount of the adjusted gross of for each of the purposes shown. If the amount for and check the box to the left of the estimate. adjusted gross proceeds to the issuer set forth in r	or any purpose is not known, furnish a The total of the payments listed mus	an estimate t equal the			
				Off Dire	nents to ficers, ctors, & filiates	Payments To Others
	Salaries and fees			\$		\$
	Purchase of real estate			\$	⊠	\$ <u>1,400,000</u>
	Purchase, rental or leasing and installation of	machinery and equipment		\$	⊠	\$ <u>290,000</u>
	Construction or leasing of plant buildings and	facilities		\$		\$
	Acquisition of other businesses (including the offering that may be used in exchange for the pursuant to a merger)	assets or securities of another issuer		\$		\$
	Repayment of indebtedness			\$		\$
	Working capital (to be called as needed)			\$		\$
	Other (specify)			<u> </u>		
				\$	🗆	\$
	Column Totals			\$	<u>⊠</u> \$ <u>1,6</u>	\$_1,690,000 90,000
		D. FEDERAL SIGNATUR				
sign	e issuer has duly caused this notice to be signed nature constitutes an undertaking by the issuer to ormation furnished by the issuer to any non-accre	by the undersigned duly authorized to furnish to the U.S. Securities and I	person. If t	ommission, up		
Issu	ner (Print or Type)	Signature		Date /	1	_
Qu	aker American, LLC	955		913	2110	了 ————
Naı	ne of Signer (Print or Type)	Title of Signer (Print or Type)				
Wi	liam E. Church	President				
		ATTENTION		•		
	Intentional misstatements or omis	ssions of fact constitute federal	criminal v	iolations. (S	ee 18 U.S.(	C. 1001.)