# 1220736



**SEC** 

Potential persons who are to respond to the collection of information 1972 (6- contained in this form are not required to respond unless the form

02)

displays a currently valid OMB control number.

ATTENTION

RECD S.E.C.

MAY 5 - 2003

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 state exemption unless such exemption is predicated on the filing of a federal notice.

1086

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

FORM D

OMB APPROVAL OMB Number: 3235-0076

Expires: May 31, 2005

Estimated average burden

hours per response... 1

MAY 07 2003

SEC USE ONLY

Prefix

Serial

DATE RECEIVED

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

Name of Offering ([] check if this is an amendment and name has changed	, and indicate
change.) Pinnacle Growth Holdings I	

Filing Under (Check box(es) that apply):

[ ] Rule 504 [ ] Rule 505 [X] Rule 506 [ ] Section 4(6) [ ] ULOE

[x ] Amendment Type of Filing: [ ] New Filing

## A. BASIC IDENTIFICATION DATA

1. Enter the information requested about the issuer

Name of Issuer ([ ] check if this is an amendment and name has changed, and indicate change) Pinnacle Growth Mamagement, LLC

Address of Executive Offices

(Number and Street, City, State, Zip Code)

Telephone

Number

7874 East Las Piedras Way, Scottsdale, Arizona 85262

(928) 710-8796

Address of Principal Business Operations - Same

Brief Description of Business Real Estate



Type of Business Organization				
[ ] corporation	[ ] limited partnership, alre	ady formed	[x ] ot	
[ ] business trust	[ ] limited partnership, to b	Tenant In Common		
	Mont			
Actual or Estimated Date of Incorp	oration or Organization: [0]2	[2003]	[X] Actual	[] Estimated
Jurisdiction of Incorporation or Org	panization: (Enter two-letter U.S CN for Canada; FN for c			on for State: [A][Z]

### **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. 77d(6).

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 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 in the notice constitutes a part of this notice and must be completed.

# 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 issuers; and
- Each general and managing partner of partnership issuers.

***************************************	***************************************	*****			***************************************
Check Box(es) that Apply:	[ ] Promoter [	] Beneficial Owner	[X] Executive Officer	[] Director []	General and/or Managing Partner
Full Name (Last nam Olafson, Steve	ne first, if individua	ni)			••••
Business or Resider 7874 East Las Piedr			t, City, State, Zip Cod	e)	
Check Box(es) that Apply:		() Beneficial Owner			General and/o Managing Partner
Full Name (Last nam Gimbel, David	ne first, if individua	•			
Business or Residen 7874 East Las Piedr	ce Address (Num	ber and Stree	t, City, State, Zip Cod	e)	
Check Box(es) that Apply:	[ ] Promoter [ ]	Beneficial Owner	[x] Executive Officer	[ ] Director [ ]	General and/o Managing Partner
Full Name (Last nam Dahms, Alan	ne first, if individua	l)			
7874 East Las Piedr		e, Az <mark>85262</mark>	t, City, State, Zip Cod	e)	•••••
Check Box(es) that Apply:					
Full Name (Last nam	e first, if individua				
Business or Residen	ce Address (Num		t, City, State, Zip Code		
Check Box(es) that Apply:	[ ] Promoter [ ]	Beneficial Owner	[ ] Executive Officer	[ ] Director [ ]	General and/or Managing Partner
Full Name (Last nam	e first, if individua	l)			
Business or Residen	ce Address (Num	ber and Stree	t, City, State, Zip Code	e)	
Check Box(es) that Apply:	[ ] Promoter [ ]	Beneficial Owner	[ ] Executive Officer	[ ] Director [ ]	General and/or Managing Partner

Full	Name (La	st nam	e first, if	individu	ıal)	************	***************************************	******************	***************************************	*************	*****	*****	
Busin	iess or R	esiden	ce Ad <b>d</b> r	ess (Nur	nber and	Street,	City, Sta	ate, Zip C	code)	************	************	*****	
Chec Apply	k Box(es) ':	) that	[]Pro	moter [	] Benef Owne			ecutive ficer	[]	Director		naging	
Full N	lame (La	st nam	e first, if	individu	al)	***************************************		***************************************	***************************************		*************		
Busin	ess or Re	esiden	ce Addre	ess (Nur	nber and	Street,	City, Sta	ite, Zip C	ode)	***********			
	(Use bla	nk she	et, or c	opy and	l use add	ditional	copies	of this s	heet, as	necessa	ary.)		
				B. INFO	RMATIO	N ABO	UT OFFE	ERING					
1. Has	s the issung?	ier sold						accredite			s	Yes	No [X]
2. Wh	at is the i	minimu						_				\$20 (	0.00
	es the off											Yes	No [×
directl conne persor the na	er the inf y or indir ction with n or agen ime of the ns of sucl	ectly, a n sales it of a b e broke	any comi of secu proker or er or dea	mission rities in t dealer ler. If m	or simila the offeri registere ore than	r remune ng. If a p d with th five (5) p	eration for person to ne SEC a persons	or solicita be listed and/or wit to be liste	tion of pl d is an as th a state ed are as	urchaser ssociated e or state ssociated	s in d s, list l		
Full N	ame (Las	st name	e first, if	individu	al) N/A.		****************	**************	****************	***********	***************************************	••••	
Busine	ess or Re	sidenc	e Addre	ss –	*******************		**************	****************	***********	**************************************	*************	****	
Name	of Assoc	iated E	Broker o	Dealer	<del>-</del>	~~~	***************	***************************************	***************************************		***************************************		
States	in Which	n Perso	n Listed	Has Sc	licited or	· Intends	to Solic	it Purcha	sers	***************************************	***************************************		
(Chec	k "All S	tates"	or chec	k indiv	idual Sta	ates)				[	] All S	States	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	[HI]	[10	-
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[M	-
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [XT]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[DN] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[P) [P]	_
Full Na	ame (Las	t name	e first, if i	ndividua	al)		***************************************	······································			transmission transmission	~-	
Busine	ss or Re	sidenc	e Addre	ss (Num	ber and	Street, 0	City, Stat	e, Zip Co	ode)			en.	
Name	of Assoc	iated E	Broker or	Dealer									

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

(Check	c"All	States"	or chec	k indivi	dual Sta	ates)	• • • • • • • • • • • • • • • • • • • •			[	] All St	ates
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	(DE)	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[TM]	[NE]	[NV]	[NH]	[UN]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN].	[XT]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Na	me (La	st name	first, if i	ndividua	1)				***************************************		······································	•
Busine	ss or R	esidenc	e Addre:	ss (Num	ber and	Street, 0	City, Stat	e, Zip Co	ode)			
Name	of Asso	ciated E	roker or	Dealer								
States	in Whic	h Perso	n Listed	Has So	licited or	Intends	to Solic	it Purcha	sers			
(Check	c"All	States"	or chec	k indivi	dual Sta	ates)				[	] All St	ates
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[MM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(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 columns below the amounts of the securities offered for exchange and already exchanged.

Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	\$	\$
Equity	\$	\$
[ ] Common [ ] Preferred		
Convertible Securities (including warrants)	\$	\$
Partnership Interests	\$	\$
Other - Specify Tenant in Common Interests	\$600,000	\$600,000
Total	\$600 <u>,000</u>	\$ 600,000
Answer also in Appendix, Column 3, if filing under ULOE.		

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 <u>Rule 504</u>, 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."

Accredited Investors	Number Investors	Aggregate Dollar Amount of Purchases \$_600,000
Non-accredited Investors	None	\$ 0
Total (for filings under Rule 504 only)		\$
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 all securities sold by the issuer, to date, in offerings of the types inditivelye (12) months prior to the first sale of securities in this offering. Clasecurities by type listed in Part C-Question 1.	cated, the	
N/A		
	Type of Security	Dollar Amount Sold
Rule 505		\$
Regulation A		\$
Rule 504		\$
Total		\$
and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be go as subject to future contingencies. If the amount of an expenditure is no known, furnish an estimate and check the box to the left of the estimate Transfer Agent's Fees  Printing and Engraving Costs.  Legal Fees  Accounting Fees  Engineering Fees  Sales Commissions (specify finders' fees separately)  Other Expenses (identify) _filing	iven it . [ ] . [X] . [X] . [X] . [X]	\$\$ \$_11,000 \$_\$_\$ \$_\$_\$ \$_550 \$_11,550
D. Enter the difference between the aggregate offering price given in respect C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issue 5. Indicate below the amount of the adjusted gross proceeds to the issue used for each of the purposes shown. If the amount for any purpose an estimate and check the box to the left of the estimate. The total of the equal the adjusted gross proceeds to the issuer set forth in response to above.	er." er used or proposed is not known, furnist e payments listed m	n ust   \$588.450

		fficers,	
			Payments To Others
Salaries and fees	[]	\$	[]\$
Purchase of real estate			[x ] \$467,950
Purchase, rental or leasing and installation of macl and equipment		\$	[]\$
Construction or leasing of plant buildings and facili	ties []	\$	[]\$
Acquisition of other businesses (including the value securities involved in this offering that may be use exchange for the assets or securities of another is pursuant to a merger)	d in suer []	\$	[]\$
Repayment of indebtedness		\$	[]\$
Working capital	[]	\$	[x ] \$74,400
Other (specify):_Loan Fees, transaction expenses	[]	\$	[x ] \$46,100
		\$	[]\$
Column Totals		\$	[X] \$588 450
D. FEDERAL SIGNA	ATIDE		
•	TIURE		
The issuer has duly caused this notice to be signed by this notice is filed under Rule 505, the following signature to furnish to the U.S. Securities and Exchange Commissinformation furnished by the issuer to any non-accredite Rule 502.  Issuer (Print or Type)	e constitutes an und sion, upon written re	lertaking by the quest of its sta	e issuer ff, the
B	M Pa	)//	4-17-0
Pinnalce Growth Management, LLC  Name of Signer (Print or Type)	Affluce - Ha Title of Signer (Print	ehios	1/70
Name of Signer (Fillit of Type)	Title of Signer (Film	(or rype)	
Alan L. Dahms	Member		
ATTENION			
ATTENTION	ituto foderal erii-	an vialatia -	1500.19
ntentional misstatements or omissions of fact const U.S.C. 1001.)		iai violations.	(366.10