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

104393	3
SEC US	E ONLY
Prefix	Serial
DATE RI	ECEIVED
!	

Filing Under (Check box(es) that apply):	Rule 504	☐ Rule 505	⊠ Rule 5	506	Section 4(6)	ULOE
Type of Filing: ☐ New Filing ☐ An	nendment (Final – Sal	e Complete)				
		IDENTIFICATI	ON DATA			
1. Enter the information requested about the i	ssuer	<u></u>				
Name of Issuer (check if this is an ame	endment and name ha	s changed, and ind	icate change.)	Market	Central, Inc.	
Address of Executive Offices	(Number and Str	eet, City, State, Zi	p Code)	, -	one Number (Incl 73-3501	uding Area Code)
650-A Gum Branch Road						
Jacksonville, North Carolina 28540						
Address of Principal Business Operations	(Number and Str	eet, City, State, Zi	p Code)	Telepho	one Number (Incl	uding Area Code)
(if different from Executive Offices)				<u></u>		
Brief Description of Business						
Outsourcing phone call center services						
Type of Business Organization						
corporation	limited partn	ership, already fori	ned	other	r (please specify)) :
business trust	☐ limited partn	ership, to be forme	d			
Actual or Estimated Date of Incorporation or Jurisdiction of Incorporation or Organization:		Month 0 1 9 S. Postal Service at	,	☑ Actual r State CN		



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

	Promoter	f partnership issuers. Beneficial Owner	☐ Executive Officer	Director.	Ganaral and/an
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
Hammer, Glen H.					
Business or Residence Addres	ss (Number and Stree	t, City, State, Zip Code)			
650-A Gum Branch Road Jacksonville, North Carolina	a 28540				
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
Goldstein, William A.					
Business or Residence Addres	ss (Number and Stree	t, City, State, Zip Code)			
650-A Gum Branch Road Jacksonville, North Carolina	a 28540				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
McGovern, James L.	1				
Business or Residence Addres	ss (Number and Stree	t, City, State, Zip Code)			
650-A Gum Branch Road Jacksonville, North Carolina	a 28540				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☑ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
Clark, Clifford A.					
Business or Residence Addres	ss (Number and Stree	t, City, State, Zip Code)			
650-A Gum Branch Road Jacksonville, North Carolina	a 28540				
Jacksonville, North Carolina	a 28540				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Gordy, Thomas A.					
Business or Residence Addres	ss (Number and Stree	t, City, State, Zip Code)			
650-A Gum Branch Road Jacksonville, North Carolina	a 28540				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☑ Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, if	`individual)		-		
Bryant, Doyal					
Business or Residence Addres	ss (Number and Stree	t, City, State, Zip Code)			
650-A Gum Branch Road Jacksonville, North Carolina	a 28540				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				

Lowder, Hoyt					
Business or Residence Addres	ss (Number and Stree	t, City, State, Zip Code)			
650-A Gum Branch Road Jacksonville, North Caroline	a 28540				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Attkisson, Ronald					
Business or Residence Address	ss (Number and Stree	t, City, State, Zip Code)			
650-A Gum Branch Road Jacksonville, North Carolin	a 28540				
	(Lie	e blank cheet, or come and use a	lditional copies of this sheet, as n	ececcary)	
	(US	e brank sheet, or copy and use at	authorial copies of this sheet, as in	cccssaiy)	

B. INFORMATION ABOUT OFFERING

1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	Yes ⊠	No
	Answer also in Appendix, Column 2, if filing under ULOE.		
2.	What is the minimum investment that will be accepted from any individual?	N/A	
3.			
4.	Does the offering permit joint ownership of a single unit?	Yes	No
5.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.		
Full Na	ame (Last name first, if individual)		
Jones,	Byrd & Attkisson, Inc.		
Busine	ess or Residence Address (Number and Street, City, State, Zip Code)		
2839 P	Paces Ferry Road, Suite 320, Atlanta, GA 30339		
Name	of Associated Broker or Dealer		
States	in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	_	All ates
[x AL	.] [AK] [AZ] [AR] [xCA] [CO] [CT] [DE] [DC] [xFL] [xGA] [HI		ID]
[x IL			MO]
[MT			PA]
[RI] [x SC] [SD] [x TN] [x TX] [x UT] [VT] [x VA] [WA] [WV] [WI] [x 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 O	OF PROCEEDS	
۱.	Enter the aggregate offering price of securities included in this offering and the total number already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this		
	box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Shares Already Sold
	Debt	\$0	\$ <u> </u>
	Equity Shares of Series A Convertible Preferred Stock	\$ <u>4,404,709.67</u>	3,305,598
	☐ Common ☑ Preferred		
	Convertible Securities (Including warrants)	\$0	\$0
	Partnership Interests	\$0	\$0
	Other Specify	\$0	\$ <u> </u>
	Total	\$ <u>4,404,709.67</u>	3,305,598
	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 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 Dollar Amount of Purchases
	Accredited Investors	114	\$ <u>4,404,709.67</u>
	Non-accredited Investors.		\$
	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 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	Dollar Amount
	Type of offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
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		\$ 20,000.00
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately) *plus warrants to purchase Common Stock		\$ 400,000.00
	Other Expenses (identify)		\$
	Total		\$ 420,000.00

	C. OFFERING PF	ICE, NUMBER OF INVESTORS, EXPENSES AND	USE OF PROCEI	EDS	
	1 and total expenses furnished in respon-	egate offering price given in response to Part C - Questic se to Part C - Question 4.a. This difference is the "adjuste	:d	<u>\$3,98</u>	34,709.67
5.	for each of the purposes shown. If the and check the box to the left of the es	d gross proceeds to the issuer used or proposed to be use amount for any purpose is not known, furnish an estima timate. The total of the payments listed must equal the orth in response to Part C - Question 4.b above.	te		
			Payments to O Directors & At		ments To Others
	Salaries and fees		🗆		\$
	Purchase of real estate		🗆		\$
	Purchase, rental or leasing and ins	tallation of machinery and equipment	🗆		\$
	Construction or leasing of plant be	uildings and facilities	🗆	🗆	\$
	that may be used in exchange for	including the value of securities involved in this offerir or the assets or securities of another issuer pursuant to	a 🗆		\$
	Repayment of indebtedness		🗆	🗆	\$
	Working capital		🗆	🛛	\$ 3,984,709.6
	Other (specify):		_		
			- 🗆	\Box	S
	Column Totals		-··· <u></u>		\$
		lumn totals added)		¤	\$ 3,984,709.6
	Total Taymonts Elsted (ee	adday			¥ <u>5,50 1,702.0</u>
		D. FEDERAL SIGNATURE			
The	iccuar has duly caused this notice to be signed	by the undersigned duly authorized person. If this notice is filed	under Dule 505, the	following ciana	tura constitutas on
unc		urities and Exchange Commission, upon written request of its st			
Issu	uer (Print or Type)	Signature	te		
	arket Central, Inc.		ay 25 , 2005		
Na	me of Signer (Print or Type)	Title of Signer (Reint or Type)			

Chief Financial Officer

Clifford A. Clark

	E. STATE SIGNATURE			
1. Is any party described in 17 CFR 262 p	resently subject to any of the disqualification	provisions of such rule?	Yes	No ⊠
	See Appendix, Column 5, for state respons	e.		
2. The undersigned issuer hereby und on Form D (17 CFR 239.500) at such times	ertakes to furnish to any state administrator of as required by state law.	of any state in which this noti	ice is file	d, a notice
3. The undersigned issuer hereby und the issuer to offerees.	dertakes to furnish to the state administrators,	, upon written request, inform	nation fu	rnished by
Uniform limited Offering Exemption (ULC	that the issuer is familiar with the condition DE) of the state in which this notice is file of establishing that these conditions have been	d and understands that the		
The issuer has read this notification and known undersigned duly authorized person.	ows the contents to be true and has duly cau	sed this notice to be signed of	on its bel	ialf by the
Issuer (Print or Type) Market Central, Inc.	Signature	Date May 25 , 2005		
Name of Signer (Print or Type)	Title of Signer (Print or Type)			

Chief Financial Officer

Instruction:

Clifford A. Clark

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

1		2	3			4			5
	sell t accr inves S (Part	end to to non- redited stors in tate B-Item	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased n State (Part C-Item 2)			Disqualif on under ULOE (if attach explanatio waive grantec (Part E-I		ler State c (if yes, tach tation of tiver nted) E-Item
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL	х		Series A Convertible Preferred Stock, \$4,000,000.00	6	\$86,106.78				Х
AK									
AZ								1	
AR									
CA			~						
CO									
CT									
DE				1					
DC									
FL	х		Series A Convertible Preferred Stock, \$4,000,000.00	7	\$406,831.62		- Maria		х
GA	х	·	Series A Convertible Preferred Stock, \$4,000,000.00	69	\$2,382,746.68				х
HI		-		1					
ID									
IL									· · · · · · · · · · · · · · · · · · ·
ĪN									
IA									
KS									
KY				† · · · · · · · · · · · · · · · · · · ·					
LA	х		Series A Convertible Preferred Stock, \$4,000,000.00	4	\$28,781.00				х
ME									
MD									
MA									
MI									
MN									
MS	х		Series A Convertible Preferred Stock, \$4,000,000.00	1	\$15,000.00				х
MO									
MT									
NE									

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1		2	3			4		!	5	
	sell t accr inves S (Part	end to to non- redited stors in tate B-Item	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased n State (Part C-Item 2)					Disqualificati on under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
NV	X		Series A Convertible Preferred Stock, \$4,000,000.00	1	\$13,325.00				х	
NH										
NJ										
NM										
NY		i								
NC	х		Series A Convertible Preferred Stock, \$4,000,000.00	7	\$420,655.75				х	
ND								1		
ОН										
OK.										
OR.	 							1		
PA	Х		Series A Convertible Preferred Stock, \$4,000,000.00	1	\$50,000.00				х	
RI										
SC	х		Series A Convertible Preferred Stock, \$4,000,000.00	11	\$306,999.50				х	
SD					Mineral Control of the Control of th					
TN	x		Series A Convertible Preferred Stock, \$4,000,000.00	3	\$70,000.00				х	
TX										
UT	х		Series A Convertible Preferred Stock, \$4,000,000.00	1	\$5,000.00				х	
VT										
VA	Х		Series A Convertible Preferred Stock, \$4,000,000.00	3	\$269,831.25				х	
WA										
WV										
WI										
WY										
PR					_			<u> </u>		

		ATTENTION			
ntentional misstatemer	ts or omissions o	f fact constitute fe	deral criminal vi	olations. (See 18	U.S.C. 1001.)