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 APPROVAL				
OMB Number:	3235-0076			
Expires:				
Estimated average	burden			
hours per respense				

SEC USE ONLY				
Prefix		Serial		
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DA	TE RECEIV	ED		

Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
BRIGHTON VILLAGE LANDBANK, LLC MEMBERSHIP INTERE	STS PROCESSED
Filing Under (Check box(es) that apply): Rule 504 Rule 505 X Rule 506 Section 4(6)	ULOE
Type of Filing: New Filing Amendment	_ AUG 2 2 2005
A. BASIC IDENTIFICATION DATA	TAMORE'S DOL
Enter the information requested about the issuer	THOMSON FINANCIAL
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
BRIGHTON VILLAGE LANDBANK, LLC	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
126 N. Jefferson - #201, Milwaukee WI 53202	(414) 293-2623
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)	
Dist Description of Dusiness	Alife 7 7 2000
Brief Description of Business	2005
Acquisition of real estate	12 2 2 10 M
Type of Business Organization	SECTION OF THE PROPERTY OF THE
	lease specify): Artizona limited
business trust limited partnership, to be formed	l jability company
Month Year	
Actual or Estimated Date of Incorporation or Organization: 015 Q Actual Estim	
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:	
CN for Canada; FN for other foreign jurisdiction)	$\mathbb{A}[\mathbb{Z}]$

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 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 predictated on the filing of a federal notice.

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.
St. D. C. Drawin Office Director Direct
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or VIRCHOW KRAUSE CAPITAL, LLC, a Wisconsin limited liability company
Full Name (Last name first, if individual)
Ten Terrace Court, Madison, Wisconsin 53718
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Mesoring Posters
PETTIBONE GROUP LLC, a Wisconsin limited liability company Managing Partner
Full Name (Last name first, if individual)
126 N. Jefferson Street - Suite 201, Milwaukee, Wisconsin 53202
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
FIRST TRUST PORTFOLIOS, L.P., an Illinois limited partnership
Full Name (Last name first, if individual)
1001 Warrenville Road, Lisle, Illinois 60532
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)
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)
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)
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)
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)
/

					В. П	NFORMAT	ION ABOU	T OFFERI	NG				
1	Has the i	ssuer sold	or does th	e issuer ir	itend to se	ll, to non-a	ccredited i	nvestors in	this offeri	ng?		Yes	No
1.	1143 1110 1	ssuci solu	, or does a			Appendix						L_1	ED.
2.	What is t	the minim	um investm	ent that w	ill be acce	pted from a	any individ	ual?	••••••			\$ <u>50</u> ,	.000
•	D d	. ec. utu = =		arra arahi	n of a cina	de unit?	(hush	and/wi	ife on	157)		Yes	No ren
						vho has bee							
	commiss	ion or simi	lar remune	ration for s	olicitation	of purchase ent of a brok	ers in conne	ction with	sales of sec	urities in t	he offering.		
	or states,	list the na	me of the b	roker or de	aler. If mo	ore than five	e (5) persor	is to be list	ed are asso				
					: informati	ion for that	broker or	dealer only	′. 				
			first, if indi FITZPA										
						ity, State, Z					······································		
					ison,	Wisco	nsin	53718	· · · · · · · · · · · · · · · · · · ·				
			oker or Dea JSE CA		, LLC								
State	s in Whi	ch Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check "	All States	" or check	individual	States)		**************	***************************************	••••••			☐ Al	l States
	AL	AK	<u> </u>	BR	DA	[58]	CT	DE	De	X	SA	HI	ID
	X	X	K	KS	KY	E	ME	₩	MA	DK	MA	MS	MO
	MT RI	SC	NV SD	NH TN	区区	X X	NY VT	NC TX	ND WA		OK XXI	OR WX	[BA]
	Full Name (Last name first, if individual) DAN DI SALLE, SR.												
Business or Residence Address (Number and Street, City, State, Zip Code) 1909 River Road, Maumee, Ohio 43537													
Nam Di	e of Asso Sall	ociated Br	oker or Dea	es &	Mortg	age Co	., an	Ohio	corpo	ratio	n		
Di Salle Securities & Mortgage Co., an Ohio corporation States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
	(Check "	All States	" or check	individual	States)				***************************************	•••••	••••••	☐ AI	1 States
	AL	AK		AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
		[N]		KS NH	KY NJ	LA	ME NY	MD	MA ND	MI	MN	MS OR	MO PA
	MT RI	NE SC	NV SD	TN	TX	NM UT	VT	NC VA	WA	WV WV	OK WI	WY	PR
Full	Name (L		irst, if indi	vidual)	·			- 			· · · · · · · · · · · · · · · · · · ·		
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	(Check "	All States	" or check	individual	States)		•••••••	••••••	****,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	**********	*****	☐ AI	1 States
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	MT	IN NE	NV	KS NH	KY NJ	DM NM	ME NY	MD NC	MA ND	MI	MN OK	MS OR	MO BAC
	RI	SC		TN		UT	VT	VA)	WA			$\overline{\mathbf{WY}}$	PR

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

	this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt		
	Equity		\$
	Common Preferred		
	Convertible Securities (including warrants)		\$
	Partnership Interests		
	Other (Specify Membership interests	20,000,000	0 _{\$} 20,000,000
	Total	0.00	\$ 0 :00
	Answer also in Appendix, Column 3, if filing under ULOE.	20,000,000	0 20,000,000
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."		A
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	178	\$ 20,000,000
	Non-accredited Investors		so
	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		\$_0.00
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 insurer. 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		\$ 36,093
	Printing and Engraving Costs		\$
	Legal Fees		\$ 11,407
	Accounting Fees		s 10,000
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		<u>\$ 1,600,000</u>
	Other Expenses (identify) Market Study		\$ 8,500
	Total		\$\frac{0.00}{1,660,000}

č. Offering Price, number of investors; expenses and use o	FPROCEEDS	
b. Enter the difference between the aggregate offering price given in response to Part C — Question and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted groproceeds to the issuer."	oss	\$ 18,340,000
Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used each of the purposes shown. If the amount for any purpose is not known, furnish an estimate a check the box to the left of the estimate. The total of the payments listed must equal the adjusted groproceeds to the issuer set forth in response to Part C — Question 4.b above.	nd	10,540,000
	Payments to	
	Officers, Directors, & Affiliates	Payments to Others
Salaries and fees	🗆 \$	
Purchase of real estate	🔲 \$	□\$ <u>18,340,0</u> 0
Purchase, rental or leasing and installation of machinery and equipment		
Construction or leasing of plant buildings and facilities	🗌 \$	
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another		
issuer pursuant to a merger)	_	
Repayment of indebtedness	_	
Working capital	_	
Other (specify):		-
	- 🛘 \$	□\$ <u></u>
Column Totals	s 0.00	. [\$ -0.00
Total Payments Listed (column totals added)	□ \$ <u></u>	60 18,340,00
D. FEDERAL SIGNATURE	5 (1) \$ 1	

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Issuer (Print or Type)

BRIGHTON VILLAGE LANDBANK, LLC

Signature

Date

Name of Signer (Print or Type)

PATRICK A. LESAGE

Title of Signer (Print or Type) Manager of PETTIBONE GROUP LLC, who is the Manager of BRIGHTON VILLAGE LANDBANK, LLC

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	e de la companya de	STATE SIGNATURE				
1.	Is any party described in 17 CFR 230.262 presently provisions of such rule?					
	See Appen	ix, Column 5, for state response.				
2.	The undersigned issuer hereby undertakes to furnish D (17 CFR 239.500) at such times as required by st	o any state administrator of any state in which this notice is filed a notice on Form ate law.				
3.	The undersigned issuer hereby undertakes to furnishissuer to offerees.	to the state administrators, upon written request, information furnished by the				
4.	4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Unifor limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.					
	suer has read this notification and knows the contents to buthorized person.	e true and has duly caused this notice to be signed on its behalf by the undersigned				
	(Print or Type) Sign: GHTON VILLAGE LANDBANK, LLC	Date 7-29-05				
Name	(Print or Type) Title Who	(Print or Type) Manager of PETTIBONE GROUP LLC, is the Manager of BRIGHTON VILLAGE DBANK, LLC				

PATRICK A. LESAGE

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