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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

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OMB Number: 3235-0076

Expires: May 31, 2005 Estimated average burden hours per response.....16.00

SEC USE	ONLY
Prefix	Serial
DATE RE	CEIVED
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UNIFURIYI LIN	THED OFFERING EXEMI	PHON
Name of Offering (check if this is an amendment and nat		
THOMAS VILLAGE DEVELOPMENT CO., LL	C, MEMBERSHIP INTERESTS	
Filing Under (Check box(es) that apply):	Rule 505 Rule 506 Section 4(6)	□ ULOE
A. B	ASIC IDENTIFICATION DATA	SEP 1 2 2005 >>
1. Enter the information requested about the issuer		E. Carlon
Name of Issuer (check if this is an amendment and name	has changed, and indicate change.)	185/4
THOMAS VILLAGE DEVELOPMENT CO., LL		
Address of Executive Offices (N	umber and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
2408 N. Miller Road, Saginaw, MI	48609	(989) 798-3262
Address of Principal Business Operations (if different from Executive Offices)	Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business Real estate development		V PRUCESSED SEP 1 5 2005
Type of Business Organization		1 000
corporation limited partnersh limited partnersh	ip, already formed X other (p ip, to be formed limi	lease specify)]HOMSON ted liabif#WANCIAIready formed
Actual or Estimated Date of Incorporation or Organization: [I] Jurisdiction of Incorporation or Organization: (Enter two-letter	onth Year 15 0 5 X Actual Esting to State	
GENERAL INSTRUCTIONS		
Federal: Who Must File: All issuers making an offering of securities in rel 77d(6).	iance on an exemption under Regulation D c	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	er 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.

> 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.

A. BASIC IDENTIFICATION DATA 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. General and/or Check Box(es) that Apply: x Promoter | Beneficial Owner | Executive Officer ☐ Director X Managing Partner Full Name (Last name first, if individual) Paul J. Lopez Business or Residence Address (Number and Street, City, State, Zip Code) 2408 N. Miller Road, Saginaw, MI 48609 Check Box(es) that Apply: Promoter | Beneficial Owner | Executive Officer Director General and/or X Managing Partner Full Name (Last name first, if individual) Robert Koehn II Business or Residence Address (Number and Street, City, State, Zip Code) 26512 Kathy Street, Roseville, MI 48066 Beneficial Owner Executive Officer Director Promoter 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: Beneficial Owner Executive Officer Promoter 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 General and/or Director 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: Beneficial Owner Executive Officer Director Promoter 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)

				792 A	; B. 11	NFORMAT	ION ABOU	T.OFFERI	NG. III				
	Llog tha	ignuar gala				II to usu s		:_	ali in afficia			Yes	No
1.	nas me	155001 5010	l, or does th			Appendix				_	***************************************	x	П
2.	What is	the minim	um investm					_				\$ 50,	000
						•						Yes	No
3.	Does th	e offering	permit joint	t ownershi	p of a sing	le unit?		***************************************	•••••				X
4.	commis If a pers or states	sion or sim on to be lis s, list the na	ilar remune ted is an ass	ration for s sociated pe roker or de	colicitation rson or age caler. If me	of purchase ent of a brok ore than five	ers in conne ter or deale e (5) persor	ection with r registered as to be list	sales of sec I with the S ed are asso	curities in t EC and/or	irectly, any he offering. with a state ons of such		
Ful	l Name (Last name	first, if indi	vidual)					.,				
Bus	siness or	Residence	Address (N	umber and	d Street, C	ity, State, Z	Lip Code)						
Nar	ne of Ass	sociated Br	oker or Dea	aler									
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	" or check	individual	States)	*************			**************			☐ Ai	l States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR
Ful	l Name (Last name	first, if indi	ividual)	· · · · · · · · · · · · · · · · · · ·								
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Bu	siness or	Residence	: Address (1	vumber an	a Street, C	ity, State, i	Zip Code)						
Nai	me of As	sociated Bi	oker or Dea	aler							· · · · · · · · · · · · · · · · · · ·		
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	s" or check	individual	States)	***************************************		******	*************	***************************************		☐ Al	1 States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR
Ful	l Name (Last name	first, if indi	ividual)				**					
Bu	siness or	Residence	: Address (î	Number an	d Street, C	City, State,	Zip Code)						
Na	me of As	sociated Bi	oker or De	aler			70-2						
Sta	tes in Wi	nich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State:	s" or check	individual	States)			**************	************	,		☐ Al	l States
	AL IL MT	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA 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 the 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 Pri		Amo	ount Already Sold
	Debt	}		\$	-0-
	Equity				-0-
	☐ Common ☐ Preferred			-	
	Convertible Securities (including warrants)	·		\$	-0-
	Partnership Interests			\$	-0-
	Other (Specify membership interests	600,			
	Total				
	Answer also in Appendix, Column 3, if filing under ULOE.	,		Ψ	307000
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		Do	Aggregate llar Amount Purchases
	Accredited Investors	-0-		\$	-0-
	Non-accredited Investors	11		\$	50,000
	Total (for filings under Rule 504 only)	-		\$	50,000
	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 Security		Do	ollar Amount Sold
	Rule 505		_	\$	-0-
	Regulation A			\$	-0-
	Rule 504			\$	-0-
	Total			\$	-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 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	••••		\$	-0-
	Printing and Engraving Costs	•••		\$	-0-
	Legal Fees		x	\$	5,000
	Accounting Fees	,		\$	-0-
	Engineering Fees			\$	-0-
	Sales Commissions (specify finders' fees separately)			\$	-0-
	Other Expenses (identify)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		\$	-0-
	Total		$\overline{\mathbf{x}}$	\$	5,000

	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."	Question 4.a. This difference is the "adjusted gr	oss	\$ 595,000
5.	Indicate below the amount of the adjusted gross preeach of the purposes shown. If the amount for ar check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	ny purpose is not known, furnish an estimate a f the payments listed must equal the adjusted gr	and	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		🔲 \$	
	Purchase of real estate		🗆 \$	<u> </u>
	Purchase, rental or leasing and installation of made and equipment			_ 🗆 \$
	Construction or leasing of plant buildings and fac			
	Acquisition of other businesses (including the val offering that may be used in exchange for the asso issuer pursuant to a merger)	lue of securities involved in this ets or securities of another	_	_
	Repayment of indebtedness			
	Working capital		_	
	Other (specify):			
			🔲 \$	
	Column Totals		[\$106,000	<u>\$489,000</u>
			П 65°	595,000
	Total Payments Listed (column totals added)	***************************************	U 3 <u></u>	
		Ex Degrates of Stonature (#412)		
sign		undersigned duly authorized person. If this no	tice is filed under Ri mission, upon writte	ule 505, the following
sigr the	issuer has duly caused this notice to be signed by the ature constitutes an undertaking by the issuer to fur	undersigned duly authorized person. If this no	tice is filed under Ri mission, upon writte	ule 505, the following
sign the Issu	issuer has duly caused this notice to be signed by the ature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-accordance.	undersigned duly authorized person. If this no raish to the U.S. Securities and Exchange Com redited investor pursuant to paragraph (b)(2) of Signature	tice is filed under Ri mission, upon writt of Rule 502.	ule 505, the following
sigr the Issu	issuer has duly caused this notice to be signed by the ature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-accorder (Print or Type)	undersigned duly authorized person. If this no mish to the U.S. Securities and Exchange Comredited investor pursuant to paragraph (b)(2)	tice is filed under Remission, upon written frule 502.	ule 505, the following

- ATTENTION -

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