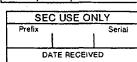
FORM D

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

FORM D

OMB Number: Expires: Estimated average burden hours per response. 16.00



3235-0076

April 30, 2008



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

05069403	UNIFORM LIMITED OFFERING EXEMP	PTION
	f this is an amendment and name has changed, and indicate change.)	
	red Stock and Underlying Common Stock	
Filing Under (Check box(es) that Type of Filing: New Filin	apply): Rule 504 Rule 505 R Rule 506 Section 4(6) Rule 506 Amendment	ULOE SECTION RECEIVED
	A. BASIC IDENTIFICATION DATA	0CT 1 2005
. Enter the information reques	sted about the issuer	4
Name of Issuer (check if the Compressus Inc.	is is an amendment and name has changed, and indicate change.)	185 55
Address of Executive Offices 101 Constitution Avenue, N	(Number and Street, City, State, Zip Code) I.W., Suite 800, Washington, D.C. 20001	Telephone Number (Including Area Code) (202) 742-4307
Address of Principal Business Op (if different from Executive Office	erations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business		
Imaging and Communication	ons Technology	
Type of Business Organization corporation business trust	limited partnership, already formed other (p	lease specify): PROCESSE
Actual or Estimated Date of Inco Jurisdiction of Incorporation or C	Month Year rporation or Organization: [8] [1][1] Drganization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	DE THOMSON
GENERAL INSTRUCTIONS		" "IVANCIAI
Federal: <i>Who Must File:</i> All issuers makin 77d(6).	g an offering of securities in reliance on an exemption under Regulation D o	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
and Exchange Commission (SEC	filed no later than 15 days after the first sale of securities in the offering) on the earlier of the date it is received by the SEC at the address given be s mailed by United States registered or certified mail to that address.	
Where To File: U.S. Securities a	and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20	549.
	s of this notice must be filed with the SEC, one of which must be manuall ed copy or bear typed or printed signatures.	y signed. Any copies not manually signed must be
	ling must contain all information requested. Amendments need only report in Part C, and any material changes from the information previously supp	
Filing Fee: There is no federal i	filing fee.	·
ULOE and that have adopted that are to be, or have been made. I	cate reliance on the Uniform Limited Offering Exemption (ULOE) for sais form. Issuers relying on ULOE must file a separate notice with the sais far state requires the payment of a fee as a precondition to the claim for ice shall be filed in the appropriate states in accordance with state law.	Securities Administrator in each state where sales or the exemption, a fee in the proper amount shall
	ATTENTION	
	ne appropriate states will not result in a loss of the federal e e will not result in a loss of an available state exemption unle	

SEC 1972 (5-05)

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. Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) Campbell, Thomas D. Business or Residence Address (Number and Street, City, State, Zip Code) 101 Constitution Avenue, N.W., Suite 800, Washington, D.C. 20001 Check Box(es) that Apply: Beneficial Owner General and/or Promoter Executive Officer Director Managing Partner Full Name (Last name first, if individual) Falk, John M. Business or Residence Address (Number and Street, City, State, Zip Code) 3267 P. Street, N.W., Washington, D.C. 20007 Check Box(es) that Apply: Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Martinez, Reynaldo L. Business or Residence Address (Number and Street, City, State, Zip Code) 101 Constitution Avenue, N.W., Suite 800, Washington, D.C. 20001 Beneficial Owner Check Box(cs) that Apply: Promoter Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Macfarlane, John B. Business or Residence Address (Number and Street, City, State, Zip Code) 101 Constitution Avenue, N.W., Suite 800, Washington, D.C. 20001 Check Box(es) that Apply: Beneficial Owner | Executive Officer Promoter Director General and/or Managing Partner Full Name (Last name first, if individual) Gasztonyi, Laszlo Business or Residence Address (Number and Street, City, State, Zip Code) 101 Constitution Avenue, N.W., Suite 800, Washington, D.C. 20001 Promoter Check Box(es) that Apply: Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Addington, Stephen Business or Residence Address (Number and Street, City, State, Zip Code) 2057 W. Hearthstone, Ashland, Kentucky 41102 Beneficial Owner x Executive Officer Check Box(es) that Apply: Promoter Director General and/or Managing Partner Full Name (Last name first, if individual) Clements, Robert J. Business or Residence Address (Number and Street, City, State, Zip Code) 101 Constitution Avenue, N.W., Suite 800, Washington, D.C. 20001 (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

			PASEOPLE ACTION DATE &		
2. Enter the information re	•	-			
Each promoter of	the issuer, if the is	suer has been organized v	vithin the past five years;		
 Each beneficial ow 	vner having the pow	er to vote or dispose, or di	irect the vote or disposition	of, 10% or more of	a class of equity securities of the issuer
 Each executive of 	ficer and director o	f corporate issuers and of	corporate general and mar	naging partners of	partnership issuers; and
 Each general and i 	managing partner o	of partnership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Perry, Stephen S.					
Business or Residence Addre	•	, ,,	The second second		
101 Constitution Avenue	e, N.W., Suite 8	00, Washington, D.C	2. 20001		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	if individual)				
Chacon, Michael					
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	ode)		
101 Constitution Avenue	e, N.W., Suite 8	00, Washington, D.C	C. 20001		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	if individual)				
Addington, Larry					
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	ode)		
2744 J. Lynn Lane, Catle	ettsburg, Kentue	cky 41129			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	Code)		
Check Box(cs) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or
			•		Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss. (Number and	Street, City, State, Zip C	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)			•	
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	Code)		
	(Use blan	nk sheet, or copy and use	additional copies of this	sheet, as necessary	·)

					B. IN	FORMATI	ON ABOUT	OFFERIN	G				
1.	Has the	issuer sold	or does th	e issuer in	tend to sel	l. to non-ac	credited in	vestors in	this offerir	107		Yes	No x
••	. 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.							ш					
2.	What is	the minim	um investm	ent that wi	ll be accep	ted from a	ny individu	ial?	***************************************			\$ No n	nin.
2	Dogo the	offering :	ermit joint	ovmerchir	of a cinal	e unit?						Yes	No
3. 4.			ion request		-							×	L
	commiss If a perso or states	sion or simi on to be lis , list the na	lar remuner ted is an ass me of the br you may se	ation for so ociated per roker or de	olicitation son or age aler. If mo	of purchase nt of a broke re than five	rs in conne er or dealer (5) person	ction with s registered s to be liste	sales of sec with the Sl d are assoc	urities in th EC and/or v	e offering. with a state		
Fu	ll Name (I	ast name	first, if indi	vidual)	,								
Bu	siness or l	Residence	Address (N	umber and	Street, Ci	ty, State, Z	ip Code)						
_		1.15											
Na	ime of Ass	ociated Br	oker or Dea	ller						*			
Sta	ates in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit I	urchasers						
	(Check	"All States	or check	individual	States)		••••••					All	States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL MT	IN NE	IA NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
	II Name C	l act name	first, if indi	vidnal)									
	in ivanie (.	Lust numic	11136, 11 11101	, , , , , , , , , , , , , , , , , , ,		-							:
В	isiness or	Residence	: Address (N	Number and	d Street, C	ity, State, 2	Zip Code)						
N	ame of As	sociated Br	oker or Dea	aler				 					
-	1 1 177	: 1. D	Listed Has	0-11-14-4	T. 4 J.	A- C-15-34	D						
51			s" or check									. [] Al	1 States
	AL IL	IN	AZ IA	AR KS	CA KY	CO LA	CT ME	DE MD	DC MA	FL MI	GA MN	HI MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK.	OR	PA
	RI	SC	SD	TN	TX	UT	VT	YA	WA	wv	WI	WY	PR
Fi	ull Name (Last name	first, if ind	ividual)									
В	usiness o	r Residence	e Address (?	Number an	d Street, C	City, State.	Zip Code)						
Business or Residence Address (Number and Street, City, State, Zip Code)													
N	ame of As	sociated B	roker or De	aler									
S	tates in W	hich Person	n Listed Ha	s Solicited	or Intend	s to Solicit	Purchasers					 ,	
(Check "All States" or check individual States)							. 🔲 A	ll States					
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ĪD
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	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.			
	an eady exchanged.	Aggregate		Amount Already
	Type of Security	Offering Price		Sold
	Debt	\$	_	\$
	Equity	\$_11,250,000*	_ :	\$_4,002,635
	Common Preferred			
	Convertible Securities (including warrants)	\$	_	\$
	Partnership Interests	\$		\$
	Other (Specify)	\$	_	\$
	Total	\$ 11,250,000*	_	\$_4,002,635
2.	Answer also in Appendix, Column 3, if filing under UI.OE. *See Annex C-1 attached hereto and by this reference made a part hereof. 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		_	\$ <u>4,002,635</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 securitie sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to th 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 th securities in this offering. Exclude amounts relating solely to organization expenses of the insure. The information may be given as subject to future contingencies. If the amount of an expenditure not known, furnish an estimate and check the box to the left of the estimate.	г.		
	Transfer Agent's Fees			\$
	Printing and Engraving Costs			\$
	Legal Fees		×	\$ 125,000
	Accounting Fees			\$
	Engineering Fees			\$
	Sales Commissions (specify finders' fees separately)			\$
	Other Expenses (identify)			\$
	Total			s 125,000

G. OFFERING PRICE, NUMBER OF INVESTORS, EXPENS	ES AND USE OF PROCEEDS	
b. Enter the difference between the aggregate offering price given in response to Par and total expenses furnished in response to Part C — Question 4.a. This difference is a proceeds to the issuer."	the "adjusted gross	\$_11,125,000 *
Indicate below the amount of the adjusted gross proceed to the issuer used or propose each of the purposes shown. If the amount for any purpose is not known, furnis check the box to the left of the estimate. The total of the payments listed must equal proceeds to the issuer set forth in response to Part C — Question 4.b above.	h an estimate and	
	Payments to	
	Officers, Directors, & Affiliates	Payments to Others
Salaries and fees	x \$ 300,000	_ [] \$
Purchase of real estate		
Purchase, rental or leasing and installation of machinery and equipment		
Construction or leasing of plant buildings and facilities		s
Acquisition of other businesses (including the value of securities involved in thi offering that may be used in exchange for the assets or securities of another		
issuer pursuant to a merger)		
Repayment of indebtedness		
Other (specify):		
		□\$
Column Totals		
Total Payments Listed (column totals added)	F	11,125,000*
D. FEDERAL SIGNATUR	E	

the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)

Date

Compressus Inc.

Name of Signer (Print or Type)

John B. Macfarlane

Signature

1010/05

Title of Signer (Print or Type)

Chief Executive Officer

- ATTENTION -

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

	E. STATE SIGNATURE					
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No *			
	See Appendix, Column 5, for state response.					
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is a D (17 CFR 239.500) at such times as required by state law.	iled a no	tice on Form			
3.	3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.					
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be en limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claim of this exemption has the burden of establishing that these conditions have been satisfied.					
	uer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its beha athorized person.	df by the	undersigned			
Issuer ((Print or Type) Signature 1 1 Date					
Compr	essus Inc. 10/60/05					
Name (Print or Type) Title (Print or Type)					
John I	3. Macfarlane Chief Executive Officer					

Instruction:

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.

APPENDIX 1 2 3 4 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach to non-accredited offering price Type of investor and explanation of amount purchased in State investors in State offered in state waiver granted) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Accredited Non-Accredited No Investors Investors Yes Amount Yes No State Amount ALAK ΑZ AR X CA See Annex S-1 Annex S-1 X CO See Annex S-1 Annex S-1 CT X See Annex S-1 Annex S-1 DE X See Annex S-1 Annex S-1 DC X See Annex S-1 Annex S-1 FL GΑ Ш \mathbb{D} IL X See Annex S-1 Annex S-1 IN X See Annex S-1 Annex S-1 IA KS X KY See Annex S-1 Annex S-1 LA ME MD MA М MN MS

APPENDIX 3 4 1 2 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach offering price Type of investor and to non-accredited explanation of offered in state amount purchased in State waiver granted) investors in State (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Accredited Non-Accredited State Yes No Investors Amount Investors Yes No Amount X Annex S-1 MO See Annex S-1 MT NE X NVSee Annex S-1 Annex S-1 NH NJ X See Annex S-1 Annex S-1 NM X See Annex S-1 Annex S-1 NY X NC See Annex S-1 Annex S-1 ND X See Annex S-1 Annex S-1 OH OK OR PA RI SC SD TN TX UT VT X ٧A See Annex S-1 Annex S-1 WA X wv See Annex S-1 Annex S-1 WI

		DX.

1	to non-a	to sell ccredited s in State	Type of security and aggregate offering price offered in state	Type of investor and amount purchased in State			Disqualification under State ULOE (if yes, attach explanation of waiver granted)		
	(Part B	-ltem 1)	(Part C-Item 1)		(Part C-Item 2)			(Part E-	Item 1)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY									
PR									

Annex C.1.

This Form D relates to the sale and issuance of the Issuer's Series C Convertible Preferred Stock (the "Series C Stock") and the issuance of Common Stock upon conversion of the Series C Stock. There is no separate consideration for the conversion of the Series C Stock into Common Stock. Of the securities offered, shares of Series C Preferred Stock with an aggregate offering price of \$4,002,635 have been sold. It is contemplated that additional shares of Series C Stock will be sold at one or more subsequent closings. The amount reported under "aggregate offering price" represents the aggregate offering price of the Series C Stock. The "Adjusted Gross Proceeds" in Section C.4.b and "Total Payments" in Section C.5 assume that all the securities offered are sold.

Annex S.1.

In view of the space limitation in the State Appendix, the following information is provided on this Annex S.1.

State:	Type of Security and Aggregate Offering Price Offered in State:	Amount Purchased by Accredited Investors in State:	Number of Accredited Investors in State
California	Series C Convertible Preferred Stock and Underlying Common Stock \$11,250,000	\$220,000	. 1
Colorado	Series C Convertible Preferred Stock and Underlying Common Stock \$11,250,000	\$9,000	1
District of Columbia	Series C Convertible Preferred Stock and Underlying Common Stock \$11,250,000	\$379,998	4
Delaware	Series C Convertible Preferred Stock and Underlying Common Stock \$11,250,000	\$69,999	3
Florida	Series C Convertible Preferred Stock and Underlying Common Stock \$11,250,000	\$45,000	2
Illinois	Series C Convertible Preferred Stock and Underlying Common Stock \$11,250,000	\$35,100	4

State:	Type of Security and Aggregate Offering Price Offered in State:	Amount Purchased by Accredited Investors in State:	Number of Accredited Investors in State
Indiana	Series C Convertible Preferred Stock and Underlying Common Stock \$11,250,000	\$60,000	1
Kentucky	Series C Convertible Preferred Stock and Underlying Common Stock \$11,250,000	\$1,755,000	2
Missouri	Series C Convertible Preferred Stock and Underlying Common Stock \$11,250,000	\$50,500	2
North Carolina	Series C Convertible Preferred Stock and Underlying Common Stock \$11,250,000	\$25,500	. 1
New Jersey	Series C Convertible Preferred Stock and Underlying Common Stock \$11,250,000	\$10,000	1
Nevada	Series C Convertible Preferred Stock and Underlying Common Stock \$11,250,000	\$75,000	7
New York	Series C Convertible Preferred Stock and Underlying Common Stock \$11,250,000	\$225,000	1

Ohio	Series C Convertible Preferred Stock and Underlying Common Stock \$11,250,000	\$85,833	2
Virginia	Series C Convertible Preferred Stock and Underlying Common Stock \$11,250,000	\$746,004	14
West Virginia	Series C Convertible Preferred Stock and Underlying Common Stock \$11,250,000	\$168,200	5

LA 377962 v1