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

OMB APPROVAL						
OMB Num	ber:	323	5-0076			
Expires:	April	30,2	800			
Expires: April 30,2008 Estimated average burden						
hours per r	espon	se	.16.00			

SEC USE ONLY							
Prefix		Serial					
DA [*]	TE RECEIVI	ED					
	1						

Name of Offering (check if this is an amendment and name has changed, and indicate change.) SuperDirectories, Inc. Common Stock	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	ULOE
A. BASIC IDENTIFICATION DATA	MANY AC A CONCE
1. Enter the information requested about the issuer	100 0 8 2005
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) SuperDirectories, Inc.	203/45
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
5337 Route 374, Merrill, NY 12955	518-425-0320
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Same	Telephone Number (Including Area Code)
Brief Description of Business	
Internet Website and Search Engine	PROCESSED
Type of Business Organization Corporation Dimited partnership, already formed Dusiness trust Iimited partnership, to be formed	lease specify): NOV 0 9 2005
Actual or Estimated Date of Incorporation or Organization: Month Year Actual or Estimated Date of Incorporation or Organization: Inc. 99 X 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)	nated FINANCIAL

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.

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.

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 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 X Director General and/or Managing Partner Lalonde, Luke Full Name (Last name first, if individual) 5337 Route 374, Merrill NY 12955 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 General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Beneficial Owner Check Box(es) that Apply: Promoter 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) Beneficial Owner Check Box(es) that Apply: Promoter 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) Director Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer 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)

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345.7				4	В. 1	NFORMAT	ION ABOU	T OFFERI	NG				
1	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									Yes	No		
1.	Answer also in Appendix, Column 2, if filing under ULOE.									L			
2.	What is	the minim	um investn			pted from a		_				s no	minimum
				· · · · · · · · · · · · · · · · · · ·	50	p						Yes	No
3.	Does th	e offering p	permit join	t ownershi	p of a sing	le unit?			• • • • • • • • • • • • • • • • • • • •		•••••		
4.											irectly, any he offering.		
	If a pers	on to be lis	ted is an ass	sociated pe	erson or age	ent of a brok	er or deale	r registered	d with the S	EC and/or	with a state		
						ore than five on for that				ciated pers	ons of such		
Full		Last name											 -
	lone		,	,									
Bus	iness or	Residence.	Address (N	umber and	d Street, C	ity, State, Z	(ip Code)						
Nan	ne of Ass	ociated Br	oker or De	aler									
1 (41)	110 01 7 133	ociated Br	oker or Be	1101									
Stat	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	" or check	individual	States)								States
	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 SCI	NV	NH	NJ	NM	NY	NC	ND	OH	OK DVI	OR WY	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	\overline{WV}	WI	WY	PR
Full	Name (I	Last name 1	first, if indi	vidual)									
Bus	iness or	Residence	Address (N	Jumber an	d Street C	ity, State, 2	Zin Code)						
Dus.	111033 01	Residence	71447033 (1	vannoer an	d bireet, e	nty, state, i	zip code)						
Nan	ne of Ass	ociated Br	oker or De	aler									
Stat	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
											*****	☐ All	States
		(1.17)		T S	<u> </u>	[66]	[GW]	[55]	(5.0)				[15]
	[AL]	AK IN	AZ IA	AR KS	CA KY	CO LA	CT ME	DE MD	DC MA	FL MI	GA) MN	HI MS	ID MO
	MT	NE	NV	NH	NJ	NM.	NY	NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	\overline{WY}	PR
Full	Name (I	Last name	first, if indi	vidual)									
Bus	iness or	Residence	Address (N	Number an	d Street, C	ity, State, 2	Zip Code)						
Nan	ne of Ass	ociated Br	oker or De	aler									
Stat						to Solicit							
	(Check "All States" or check individual States)									States			
	AL	AK	AZ	AR	<u>C</u> A	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

(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 \(\square\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security	Aggre Offering		An	nount Already Sold
	Debt	3		\$	
	Equity Stock			\$_ \$ 5	6,100
	X Common Preferred	, <u> </u>		<u> </u>	<u> </u>
	Convertible Securities (including warrants)	. 0		\$	0
	Partnership Interests			\$	0
	Other (Specify)				0
	Total				
	Answer also in Appendix, Column 3, if filing under ULOE.)		J	
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."	Numl Inves 0	tors	(Aggregate ollar Amount of Purchases
	Accredited Investors			\$_	0
	Non-accredited Investors				6,100
	Total (for filings under Rule 504 only)	25		<u>\$5</u>	6,100
	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. N/A				
		Туре		D	ollar Amount
	Type of Offering	Secur	•	_	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			\$	500
	Printing and Engraving Costs			\$	
	Legal Fees			\$	
	Accounting Fees			\$	
	Engineering Fees			\$	
	Sales Commissions (specify finders' fees separately)			\$	
	Other Expenses (identify)	••••		\$	
	Total			\$_ {	9 .00 500

	COFFERING PRICE NUM	BER OF INVESTORS, EXPENSES AND USE OF PI	ROCEEDS	
EY		ring price given in response to Part C — Question 1 Question 4.a. This difference is the "adjusted gross		0.0 0 55,600
5.	Indicate below the amount of the adjusted gross preach of the purposes shown. If the amount for an check the box to the left of the estimate. The total oproceeds to the issuer set forth in response to Par	ny purpose is not known, furnish an estimate and f the payments listed must equal the adjusted gross		
			Payments to	
			Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees] \$	<u>\$</u>
	Purchase of real estate]\$	\$
	Purchase, rental or leasing and installation of made		- 0	
			-	
		cilities] 2	□ 2
	Acquisition of other businesses (including the value offering that may be used in exchange for the assissuer pursuant to a merger)		7\$	
	Repayment of indebtedness]\$	
	Working capital] \$	\$ <u>55,600</u>
	Other (specify):] \$	\$
] \$	<u>\$</u>
	Column Totals] \$ <u></u>	□ \$ -0:0 0 55,600
	Total Payments Listed (column totals added)			55,600
9.4 19.2 3.5		D. FEDERAL SIGNATURE		
sig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fu- information furnished by the issuer to any non-acc	rnish to the U.S. Securities and Exchange Commiss	ion, upon writter	
Iss	uer (Print or Type)	Signature D	ate	
	SuperDirectories, Inc.	lakara Bange	. 1	W 7, 2005
	me of Signer (Print or Type)	Title of Signer (Print or Type)	1 wiens	or 1, uns
	Charles B. Jarrett, Jr.	Authorized Representative	· • • • • • • • • • • • • • • • • • • •	

- 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	Yes	No
	provisions of such rule?		X

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 filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 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 entitled to the Uniform 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.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature
SuperDirectories, Inc.	Charle Braneiti Proventier Titor
Name (Print or Type)	Title (Print or Type)
Charles B. Jarrett, Jr.	Authorized Representative

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.

			A Comment of the Comm	[±] AP	PENDIX				ration of the
1	Intencto non-a	1 to sell accredited is in State 1-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	f investor and rchased in State C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No	Common Stock	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK			,						
AZ									
AR		200000000000000000000000000000000000000							
CA									
со									
СТ	Х		\$ 500			1	\$ 500		
DE									
DC			, , , , , , , , , , , , , , , , , , , ,						
FL	x		41,500			16	41,500		
GA	x		5,000			1	5,000		
HI									
ID									
IL									
IN									
IA	Administrator se to car Managardo apericipado es est								
KS									
KY									
LA									
ME									
MD		ACCUPATION OF THE PROPERTY OF							
MA									***************************************
MI									
MN									
MS									

APPENDIX

1	2	2	3			4		5	ification
	to non-ac		Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No	Common Stock	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО									
МТ									,
NE									
NV									
NH	x		500			1	500		
NJ									
NM									
NY	х		4,500			2	4,500		
NC			-						
ND						<u> </u>			
ОН			<u></u>		for the same of th				
ОК	X		1,000			1	1,000		
OR									
PA									
RI									
SC	X		600			1	, 600		
SD									
TN	x		500			11	500		
TX UT									
VT							· · · · · · · · · · · · · · · · · · ·		
VA									
WA									
WV									
WI									
77.1	x		2,000			1	2,000	<u> </u>	<u> </u>

APPENDIX											
1		2	3 Type of security			4		1	lification		
	to non-a investor	to sell ccredited s in State -Item 1)	and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				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		
WY											
PR							i				