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 Number:

Expires:

3235-0076 April 30, 2008

Estimated average burden hours per response..... 1



Name of Offering ( check if this is an	amendment an	d name has cha	anged, and indi	cate change.)		05075263	
Convertible Bridge Notes and Wa			Stock (Round	Two)			
Filing Under (check box(es) that apply)		☐ Rule 505	⊠ Rule 506	☐ Section 4(b)	□ ULOE		
Type of Filing: ☐ New Filing ☒ An							
		SIC IDENT	<b>IFICATION</b>	DATA			
1. Enter the information requested about							
Name of Issuer ( check if this is an ar		name has chang	ged, and indicat	e change.)			
Raptor Networks Technology, In Address of Executive Office		abar and Street	, City, State, Z	in Code)	Talanhana Ni	umber (Including Area Code	<del></del>
1241 E. Dyer Road, Suite 150		a Ana, CA	, City, State, Zi	ip Code)	(949) 623-93		,
Address of Principal Business Operation	ons (Nun	nber and Street	, City, State, Z	ip Code)		umber (Including Area Code	)
(if different from Executive Offices)	(******	7	, - :- ; , - · · · · · · · ·		- *** <b>F</b>		•
Brief Description of Business					·		
-						<b>F</b> = -	
Design, production, sales and service	of high speed s	switching tech	nology applied	l to sophisticated	inter-networki	ing systems OCESSE	D
Type of Business Organization					der Service Se	DEC 2 9 2005	_
☑ corporation	☐ limited partr			other (p	lease specify):		
☐ business trust	☐ limited partr	nership, to be f	ormed			5 THOMSON	
			Month	Year		FINANCIAL	
Actual or Estimated Date of Incorporat	ion or Organiza	tion:	Month [0][1]	Y ear [0][1]	Actual	☐ Estimated	
Jurisdiction of Incorporation or Organiz			r U.S. Postal Se	ervice abbreviation		[C][O]	
				oreign jurisdiction		[-](-)	
GENERAL INSTRUCTION	•						
Federal:							
Who Must File: All issuers making an or 15 U.S.C. 77d(6).	offering of secu	rities in relian	ce on an exemp	tion under Regula	tion D or Section	on 4(6), 17 CFR 230.501 et s	eq.
When to File: A notice must be filed	no later than 16	5 days after the	e first sale of s	ecurities in the off	fering Anotic	e is deemed filed with the U	LS.
Securities and Exchange Commission							
address after the date on which it is due							
Where to File: U.S. Securities and Exc	hange Commiss	sion, 450 Fifth	Street, N.W., V	Vashington, D.C. 2	20549.		
Copies Required: Five (5) copies of th	is notice must b	e filed with the	e SEC one of y	vhich must he mar	mally signed a	Any copies not manually sign	ned
must be photocopies of the manually si					ruanty signed. 1	my copies not mandary sign	ica
			•		•	0.1 ' 1 00 '	
Information Required: A new filing m changes thereto, the information reques the Appendix need not be filed with the	sted in Part C, ar						
Filing Fee: There is no federal filing fe	ee.						
State:							
This notice shall be used to indicate readopted ULOE and that have adopted where sales are to be, or have been made amount shall accompany this form. T	this form. Issue de. If a state rec	ers relying on U quires the payn	JLOE must file nent of a fee as	a separate notice a precondition to	with the Securi	ities Administrator in each st e exemption, a fee in the pro	tate per

## **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 predicated on the filing of a federal notice.

constitutes a part of this notice and must be completed.

## A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

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- 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	☐ Director	☐ General and/or
					Managing Partner
Name (Last name first, if in	dividual)				
Business or Residence Addr	ess (Number and	Street, City, State, Zip Code)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Name (Last name first, if in	dividual)				
Business or Residence Addr	ess (Number and	Street, City, State, Zip Code)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Name (Last name first, if in	dividual)				
Business or Residence Addr	ess (Number and	Street, City, State, Zip Code)		· · · · · · · · · · · · · · · · · · ·	
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Name (Last name first, if in	dividual)				
Business or Residence Addr	ess (Number and	Street, City, State, Zip Code)			· · · · · · · · · · · · · · · · · · ·
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Name (Last name first, if in	dividual)				
Business or Residence Addr	ess (Number and	Street, City, State, Zip Code)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Name (Last name first, if in	dividual)		·····		
Business or Residence Addr	ress (Number and	Street, City, State, Zip Code)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Name (Last name first, if in	dividual)			. •	
Business or Residence Addr	ress (Number and	Street, City, State, Zip Code)			
Check Box(es) that Apply:	□Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Name (Last name first, if in	dividual)			, dillo	
Business or Residence Addr	ress (Number and	Street, City, State, Zip Code)			
	(Use blank	sheet or copy and use additio	nal conject of this sheet as n	ececcary )	

				В.	INFOR	MATIO	N ABOU	T OFFE	RING					
1.	Has the issue	er sold, or	does the i	ssuer inter	nd to sell,	to non-acc	redited in	vestors in	this offeri	ng?				Yes No □ □
	Answe	r also in	Appendi	k, Colum	n 2, if fili	ing under	ULOE.							
2.	What is the	minimum	investmen	t that will	be accept	ed from an	ıy individı	ual?		,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
<b>3</b> . I	Does the off	ering pern	nit joint ov	vnership o	of a single	unit			***************************************					Yes No
:	Enter the in similar remu associated p dealer. If m for that brok	neration ferson or a ore than f	for solicitation gent of a live (5) per	tion of pu broker or	rchasers i dealer reg	n connecti gistered wi	on with sath the SE	ales of sec C and/or	urities in with a stat	the offerir	ng. If a pos, list the	erson to be name of the	e listed is he broker	an or
Full 1	Name (Last 1	name first	, if individ	ual)										
Busir	ness or Resid	lence Add	ress (Num	ber and S	treet, City	, State, Zip	Code)							
	e of Associa	tad Proko	r or Doolo											
INAIII	e of Associa	ied Bloke	of Dealer											
State	s in Which F	erson Lis	ted Has So	licited or	Intends to	Solicit Pu	rchasers							
(	(Check "All	States" or	check inc	lividual St	ates)									☐ All 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]	
Full 1	Name (Last i	name first	, if individ	ual)			<del></del>							
Busir	ness or Resid	lence Add	ress (Num	ber and S	treet, City	, State, Zip	Code	10.10				·		
Name	e of Associa	ted Broke	r or Deale	•				<del></del>				ш.	<del></del> -	
<u> </u>						0.00							· <del></del>	
	s in Which F (Check "All													☐ All 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]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1 -

1.	Enter the aggregate offering price of securities included in this offering and the total amount 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	Amount <u>Already Sold</u>
	Debt	\$N/A	\$N/A
	Equity	\$ N/A	\$N/A
	☐ Common ☐ Preferred		
	Convertible Securities (Convertible Notes and Warrants to Purchase Common Stock)	\$130,000	\$ 130,000
	Partnership Interests	\$N/A	\$ <u>N/A</u>
	Other (Specify)	\$N/A	\$N/A
	Total	\$ 130,000	\$ 130,000
	1041	\$ <u>130.000</u>	<u> </u>
	Answer also in Appendix, Column 3, if the 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 person 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 of Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	6	\$ 130,000
	Non-accredited Investors	N/A	\$N/A
	Total (for filings under Rule 504 only)		\$
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	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	$\boxtimes$	\$
	Accounting Fees	. 🗆	\$
	Engineering Fees		\$
	Sales Commissions	×	\$ 28,491.67
	Other Expenses (specify)		\$
	Total	_ ⊠	\$ 29,491.67
	*		

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

This amount represents Placement Agent Fees and Placement Agent Warrants issued upon conversion of convertible bridge notes.

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C. OFFERING PRICE.	NUMBER OF INVESTORS, EXPENSES AND USI	E OF	PROCEEDS				
b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."							
proposed to be used for each of the pu an estimate and check the box to the l	usted gross proceeds to the issuer used or proposed to be rposes shown. If the amount for any purpose is not known, eft of the estimate. The total of the payments listed must et forth in response to Part C - Question 4.b above.	, furni	sh				
			Payments to Officers Directors & Affiliates		Payments to Others		
Salaries and fees			\$		\$		
Purchase of real estate			\$		\$		
Purchase, rental or leasing and installati	on of machinery and equipment		\$		\$		
Construction or leasing of plant building	gs and facilities		\$		\$		
	ng the value of securities involved in this offering that may securities of another issuer pursuant to a merger)		\$		\$		
Repayment of indebtedness			\$		\$		
Working capital		×	\$ <u>100,508.33</u>		\$		
Other (specify):							
			\$		\$		
			\$		\$		
Total Payments Listed (column totals ac	dded)		×	\$_	100,508.33		
	D EEDEDAL CICNATUDE						
	D. FEDERAL SIGNATURE						
ignature constitutes an undertaking by the	e signed by the undersigned duly authorized person. If this issuer to furnish to the U.S. Securities and Exchange Common-accredited investor pursuant to paragraph (b)(2) of Rule 5	missic					
ssuer (Print or Type)	Signature	ate	ins				
laptor Networks Technology, Inc.		12	, 200	<u>)5</u>			
Name of Signer (Print or Type)	Title of Signer (Print or Type)						
Bob van Leyen	Chief Financial Officer						

# **ATTENTION**

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

	E. STATE SIGNATURE
1.	ls any party described in 17 CFR 230.262(c), (d), (e) or (f) presently subject to any of the disqualification provisions of such rule?
	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	Date
Raptor Networks Technology, Inc.		12/14,2005
Name (Print or Type)	Title (Print or Type)	
Bob van Leyen	Chief Financial 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	to n accre inve in S	nd to ell non- edited stors state et B-	Type of security and aggregate offering price offered in state (Part C-Item 1)	Number of	5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State	Yes	No		Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA									
СО									
СТ									
DE									
DC									
FL						,			
GA									
HI									
ID									
IL									
IN									
IA									
KS									
KY									
LA									
ME									
MD									
MA									
MI					,				
MN									
MS									
МО									
MT									
NE									
NV	<u> </u>								

1	Intersection Section S	2 nd to ell non- edited stors State rt B- m 1)	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		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
NH									
NJ									_
NM									
NY									
NC									
ND									
ОН									
OK									
OR									
PA									
RI									
SC						:			
SD	<u> </u>								
TN	ļ								
TX	<u> </u>								
UT	<u> </u>								
VT									
VA									
WA	ļ			-					
WV	ļ								
WI	ļ								
WY									
PR									