FORM D

UNITED STATES

RECEIVED Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION D,

OMB APPROVAL
OMB Number: 3235-0076
Expires: April 30, 2008
Estimated average burden

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Sale of Membership Interests of The Roda Group Investment Fund XVII, L.L.C.	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Type of Filing: New Filing Amendment	Section 4(6) ULOE
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) THE RODA GROUP INVESTMENT FUND XVII, L.L.C.	
Address of Executive Offices (Number and Street, City, State, Zip Code) 918 Parker Street, Suite A14, Berkeley, CA 94710-2526	Telephone Number (Including Area Code) 510-649-1900
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Same	Telephone Number (Including Area Code) same PROCESSED
Brief Description of Business Venture Capital Investment	JAN 0 5 2006
Type of Business Organization Corporation Ilmited partnership, already formed business trust limited partnership, to be formed other	THOMSON E FINANCIAL (please specify):
Actual or Estimated Date of Incorporation or Organization: Month Year 1 1 0 5	Actual Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service Abbreviation for State CN for Canada; FN for other foreign jurisdiction)	ate:

/% SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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 predicated on the filing of a federal notice.

Potential persons who are to 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 IDI	ENTI	FICATION 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: •			Beneficial Owner		Executive Officer		Director	\boxtimes	General and/or Managing Partner
Full Name (Last name first, if	individual)								
Miller, Daniel H.									
Business or Residence Addre			• • •						
918 Parker Street, Suite A1		10-25						571	
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director	⊠	General and/or Managing Partner
Full Name (Last name first, it Strauch, Roger A.	findividual)								
Business or Residence Addre	ss (Number and Stree	et. City	. State. Zip Code)						
918 Parker Street, Suite Al	· ·	-	•						
Check Box(es) that Apply:	Promoter	\boxtimes	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, it	f individual)			·····					
Straus Family Trust									
Business or Residence Addre c/o Merfin, LLC, 1460 Mar	•	-	•						
Check Box(es) that Apply:	Promoter	\boxtimes	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, it	f individual)								.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Peter N. Yianilos									
Business or Residence Addre 215 Arreton Road, Princeto	•	et, City	, State, Zip Code)		٠		٠		
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, it	f individual)			٧.					munuging 1 articl
Business or Residence Addre	ss (Number and Stree	et, 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, i	f individual)		e e de maria de la composição de la comp						
Business or Residence Addre	ss (Number and Stree	et, 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, i	f individual)								
Business or Residence Addre	ss (Number and Stree	et, City	y, State, Zip Code)						
	(Use blan	k sheet	, or copy and use add	litiona	al copies of this shee	t, as n	ecessary)		
	*								

					В.	INFOR	MATION A	BOUT OF	FERING				
	Answer also in Appendix, Column 2, if filing under ULOE.								Yes	No ⊠			
2.	What is the minimum investment that will be accepted from any individual?								\$ Yes	N/A No			
	Does the offering permit joint ownership of a single unit?								\boxtimes				
	remuner person o	ration for sol or agent of a e (5) persons	n requested for icitation of pobroker or deals to be listed a	urchasers in o ler registered	connection w I with the SE	ith sales of se C and/or with	curities in the	e offering. If ates, list the n	f a person to b name of the bi	e listed is an oker or deal	associated er. If more		
			st, if individu	ıal)								,	
Busin	ess or R	esidence Ac	idress (Numb	per and Street	t, City, State	, Zip Code)							
Name	of Asso	ociated Brok	er or Dealer			47.41. L.							
States	s in Whi	ch Person L	isted Has Sol	icited or Inte	nds to Solic	it Purchasers			··-·				
(C	heck "A	ll States" or	check indivi	duals States)								□ A1	1 States
[4	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]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[1	D [1]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
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[]		ast name fir	st, if individu	ıal)									
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Full 1 Busir	Name (L	esidence Ac	idress (Numb		t, City, State	, Zip Code)							
Full 1 Busir	Name (L	esidence Ac			t, City, State	, Zip Code)							
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Full N Busir Name	Name (L ness or R e of Asso s in Whi	esidence Ad ociated Brok ch Person L	ddress (Numb	per and Street	ends to Solic	it Purchasers						A	Il States
Full I Busir Name States	Name (L ness or R e of Asso s in Whi	esidence Ad ociated Brok ch Person L	ddress (Numb	per and Street	ends to Solic	it Purchasers		[DE]	[DC]	[FL]	[GA]	☐ Al	Il States
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Busir Name States (C	ness or R e of Asso s in Whithheck "A AL]	ch Person L Il States" or [AK] [IN]	ddress (Numberer or Dealer isted Has Sol check individual) [AZ]	per and Street licited or Inte duals States) [AR] [KS]	[CA]	[CO]	[CT] [ME]	[DE] [MD]	[DC] [[MA]	[FL]	[GA] [MN]	[HI] [MS]	[ID] [MO]
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Busir Name States (CC [[Full] Busir Name (CC [[[CC [[CC [[CC [Name (L ness or R e of Asso s in Whi heck "A AL] MT] RI] Name (L ness or R e of Asso s in Whi heck "A	ch Person L [NE] [SC] ast name fir desidence Acceptated Broken ch Person L States" or	ddress (Number or Dealer isted Has Sol (AZ) [IA] [NV] [SD] st, if individuates (Number or Dealer isted Has Sol check indivi	icited or Interduals States) [AR] [KS] [NH] [TN] per and Stree	[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]
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	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 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.	Aggregate	Amount Almondu
	Type of Security Debt	Offering Price	Amount Already Sold \$
	Equity		\$
	Common Preferred	Ψ	J
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests		 \$
	Other (Specify Membership Interests)		\$ 2,000,000
	Total		\$ 2,000,000
	Answer also in Appendix, Column 3, if filing under ULOE.	2,000,000	2,000,000
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."		
		Number Investors	Aggregate Dollar Amount of Purchase
	Accredited investors	2	\$_2,000,000
	Non-accredited Investors	0	\$0
	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 Offering	Type of Security	Dollar Amount Sold
	Rule 505	•	\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
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 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		\$ 10,500
	Accounting Fees	_	\$ <u>10,300</u> \$
	Engineering Fees	_	\$ \$
		_	
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total	\boxtimes	\$10,500

_	C. OFFERING P	RICE, NUMBER OF INVESTORS, EXPENSES AND	USE OF PROCEEDS	
	total expenses furnished in response to Part C	offering price given in response to Part C - Question 1 and - Question 4.a. This difference is the "adjusted gross	i .	\$ <u>1,989,500</u>
5.	Indicate below the amount of the adjusted gros the purposes shown. If the amount for any pur- left of the estimate. The total of the payments forth in response to Part C - Question 4.b about	the		
			Payments to Officers, Directors & Affiliates	Payments To Others
	Salaries and fees		. 🛛 S <u>300,000</u>	s
	Purchase of real estate		. 🗆 \$	S
	Purchase, rental or leasing and installation of	machinery and equipment	. D \$	S
	Construction or leasing of plant buildings and	facilities	. 🗆 s	\$
	Acquisition of other businesses (including the used in exchange for the assets or securities of	e value of securities involved in this offering that may be f another issuer pursuant to a merger)	. 🗆 \$	□ s
	Repayment of indebtedness		. 🗆 \$	\$
	Working capital		. 🗆 \$ _	∑ \$ 1,689,500
	Other (specify):		. 🔲 \$	S
	Column Totals		. 🗵 \$ 300,000	∑ \$ 1,689,500
	Total Payments Listed (column totals ac	ided)	. 🛭 \$ <u>1,98</u>	39,500
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·		D. FEDERAL SIGNATURE		
une		the undersigned duly authorized person. If this notice is filed us and Exchange Commission, upon written request of its staff le 502.		
	uer (Print or Type)	Signature)ate	
	Roda Group Investment Fund XVII, L.L.C. me of Signer (Print or Type)	Title of Signer (Print or Type)	December 16, 2005	
	niel H. Miller	Managing Member		
			•	
		•		
		·		
		ATTENTION		
	Intentional Misstatements or	Omissions of Fact Constitute Federal Criminal Violati	ons. (See 18. U.S.C. 100	01.)