

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

SEC USE ONLY							
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Name of Offering (check if this is an amendment and name has changed, and indicate change.) NEW (ENTURY POWER Corporation) Filing I nder (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DATA	07071599
1. Et ter the information requested about the issuer	
Name c i Issuer (check if this is an amendment and name has changed, and indicate change.)	
NIN CENTURY POWER CORPORATION	
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone I	Number (Including Area Code)
51681 SUMMIT DRIVE Shelby TWP. MI 48316 586-	554-0127
	Number (Including Area Code)
ENTERING INTO BIODIESEI PRODUCTION (Renemble Fuels)	PROCESSEI
Type of Business Organization	
corporation limited partnership, already formed other (please specify):	JUL 19 2007
Month Year Actual (r Estimated Date of Incorporation or Organization: 04 6 7 15 Actual Estimated Jurisdic ion of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:	THOMSON FINANCIAL
CENERAL INSTRUCTIONS CENERAL INSTRUCTIONS	

Who Mu :t 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 Te 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 Exc lange 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 T. File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies I equired: 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 photocol ies 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 fi ed with the SEC.

Filing F.e: There is no federal filing fee.

State:

This not ce 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 apprepriate 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 ID	ENTIFICATION DATA		
2. E	iter the information	equested for the fo	ollowing:			
•	Each promoter of	the issuer, if the is	ssuer has been organized w	rithin the past five years;		
•	Each beneficial or	wner having the pos	wer to vote or dispose, or di	rect the vote or disposition	of, 10% or more o	f a class of equity securities of the issuer.
•	Each executive of	ficer and director	of corporate issuers and of	corporate general and man	naging partners of	partnership issuers; and
•	Each general and	managing partner	of partnership issuers.			
Check	Roy(es) that Apply:	Promoter	Beneficial Owner	Securive Officer	Director	General and/or
		•	A Denomination of	Z Excessive officer	☐ <i>5</i>	Managing Partner
Full N	NDALL (of LENN				
	,	·	Challes T	. Ann 1192	11	
Busine	s or Residence Addr	N 17) (<.	Shelby Tu I Street, City, State, Zip Co	10, 111 403	16	
Dusine	s of Residence Addi	caa (Italiibul alic	otreet, etty, otate, esp et	,40)		
Check	3ox(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or
		,		Ø 2.		Managing Partner
Foll N	LLEN CHR me (Last name first,	if individual)	7.			
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Check	3ox(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or
CHOOK	you(es) that rippiy.					Managing Partner
Cull N	me (Last name first,	if individual)		· · · · · · · · · · · · · · · · · · ·		
run 14.	ine (Last name mst,	II Illuividual)				
Rusine	s or Residence Addr	ess (Number and	Street, City, State, Zip Co	ode)		
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Check	3ox(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or
	() [2]					Managing Partner
Full N	ne (Last name first,	if individual)				
	(==== ::,	,				
Busine	s or Residence Addr	ess (Number and	Street, City, State, Zip Co	ode)		
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Check	Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or
			Ш			Managing Partner
Full Na	ne (Last name first,	if individual)				
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Busine	s or Residence Addre	ess (Number and	Street, City, State, Zip Co	de)		
		•				
Check	Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or
	. ,		<u>.</u>			Managing Partner
Full Na	ne (Last name first,	if individual)				
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Busine	s or Residence Addre	ess (Number and	Street, City, State, Zip Co	de)		
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Check	lox(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or
			ш			Managing Partner
Full Na	ne (Last name first,	if individual)				
Busine	s or Residence Addre	ess (Number and	Street, City, State, Zip Co	de)		
		,				
		(Use bla	nk sheet, or copy and use a	additional copies of this sh	icet, as necessary)	

					В. І	NFORMAT	ION ABOU	T OFFERI	NG	-	_		
1.	Has the	e issuer sol	d, or does t			ell, to non-a						Yes X	No
2.	Wh∴ti	s the minin	num investn					_				s 5.0	00.00
2.	***********	/h.:t is the minimum investment that will be accepted from any individual?										Yes	No
3.			permit join										X
4.	con mi If a per or s ate	ssion or sim son to be lises, list the n	ilar remune sted is an as	ration for s sociated pe proker or de	solicitation erson or age ealer. If me	of purchas ent of a brol ore than fiv	ers in conne ker or deale e (5) person	ection with r registere ns to be list	sales of sed with the S ded are asso	curities in t SEC and/or	irectly, any he offering. with a state sons of such		
Ful	I Name	(Last name	first, if ind	ividual)									
Bus	sines: or	Residence	Address (N	lumber and	d Street, C	ity, State, 2	Zip Code)			_	<u>-</u> -		
Nai	me o: As	ssociated B	roker or De	aler	•						<u> </u>		
Sta			Listed Ha										
	(Cl eck	"All State:	s" or check	individual	l States)							☐ Al	l States
	[AI] [IL] [M]	AK IN NE SC	AZ IA NV SD	KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	MD NC VA	MA ND WA	MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR
Full Naine (Last name first, if individual)													
Bus	Busines: or Residence Address (Number and Street, City, State, Zip Code)												
Nar	me o As	sociated Bi	roker or De	aler									
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	(Cl eck	"All States	or check	individual	States)			*****************		******************		☐ Al	l States
	A] [I] M] R]	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	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	l Na ne (Last name	first, if indi	ividual)			_					•	
Bus	siness of	r Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)						
Nan	ne of As	sociated Br	oker or De	aler						,			
Stat	tes i 1 W	hich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers				<u> </u>		
	(Check	"All States	or check	indiviđual	States)						······································	All	States
	A] II] M [] R]	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	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

	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.	Aggre	rate	Λ-	nount Already
	Type of Security	Offering	_	Au	Sold
	Debt	s <i>ø</i>		\$	_Ø
	Equity	-	•	,	, o
	Common Preferred	,			
	Convertible Securities (including warrants)	\$ <u>(</u>	<u> </u>	\$	_Ø
	Partnership Interests	\$ (<u> カ</u>	\$	_Ø
	Other (Specify)	<u> </u>	T	\$	Ø
	Total	600,0	XXX 🚾	\$_ 	30,000 ²⁰
	Answer also in Appendix, Column 3, if filing under ULOE.	·			,
2.	E iter 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."				Aggregate
		Numb Invest	ors	0	ollar Amount of Purchases
	Accredited Investors	<u>Ø</u>		\$_	_Ø
				\$_	80,000 20
	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 $scilon the$ loss 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 Securi		D	ollar Amount Sold
	Type of Offering		•	•	30IU
	Rule 505				
	Regulation A			\$	
	Rule 504			<u>"</u> —	
	Total			\$	·
1	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	•••••		\$	Ø
	Printing and Engraving Costs	······.		\$	_Ø
	Legal Fees			\$	Ø
	Accounting Fees			\$	<u> Ø</u>
	Engineering Fees			\$	Ø
	Sales Commissions (specify finders' fees separately)			\$	_ø
	Other Expenses (identify)			\$	_Ø
	Total		П	\$	<u>&</u>

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS		
	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 at d total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		<u>\$_6</u>	00,000
	It dicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and cleck the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.			
		Payments to Officers, Directors, & Affiliates	(yments to Others
	S claries and fees	- / 1 _		<i>-</i>
	P irchase of real estate	<u> 180,000°</u>	\$_	ø
	P irchase, rental or leasing and installation of machinery aid equipment]\$ <u>250,000</u>	<u></u> \$_	Ø
	Construction or leasing of plant buildings and facilities]\$Ø	□\$_	Ø
	A equisition of other businesses (including the value of securities involved in this of fering that may be used in exchange for the assets or securities of another is suer pursuant to a merger)	7\$ <u>.</u>	□\$	Ø
	R :payment of indebtedness	\$ 5,000	□\$_	× × × × × × × × × × × × × × × × × × ×
	Working capital			Ø
	Other (specify):	' .		_ø
		,		,
]\$ <u>Ø</u>	□\$_	Ø
	Column Totals		<u>-</u> \$_	<u>Ø</u>
	Total Payments Listed (column totals added)		200 _c (2000 2
:	D FEDERAL SIGNATURE		·	
gn	iss uer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice at re constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commiss of irmation furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of R	sion, upon writter	e 505, tl 1 reques	he following t of its staff,
su	er Print or Type) Signature	ate		
e	W CENTURY POWER CORPORATION (haisTuplus)	7-13-07		
	te of Signer (Print or Type) Title of Signer (Print or Type)			
<u>C1</u>	HISTOPHER T. AlleN CEO/COFOUNDER			· · · · · · · · · · · · · · · · · · ·
	•			

— 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?							
	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.							
	er 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 thorized person.							
Issuer ('rint or Type) Signatuje Date							
	CENTURY POWER CORPORATION (KRUSTAPLE T. 12-13-07							
Name (Print or Type) Title (Print or Type)							
_Cr	IRISTOPHER T. Allen CO FOUNDER/CEO							

Instruction:

Print th: 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 2 3 4 Disqualification under State ULOE Type of security (if yes, attach and aggregate Intend to sell Type of investor and explanation of offering price to non-accredited waiver granted) investors in State amount purchased in State offered in state (Part E-Item 1) (Part C-Item 1) (Part C-Item 2) (Part B-Item 1) Number of Number of Non-Accredited Accredited Yes No Investors Amount Investors Amount Yes No State AL X ΑK AZAR CA CO CTDE DC FL GAHI ID IL IN ΙA KS ΚY LA ME MD MA EQUITY \$600,000 Shares 80,000-Ø 3 Ø ΜI MN MS

APPENDIX 4 3 2 1 Disqualification under State ULOE Type of security (if yes, attach Intend to sell and aggregate explanation of offering price Type of investor and to non-accredited amount purchased in State waiver granted) investors in State offered in state (Part E-Item 1) (Part C-Item 1) (Part C-Item 2) (Part B-Item 1) Number of Number of Non-Accredited Accredited No Yes **Investors** Amount Investors Amount Yes No State MC МΊ NE NVNE NJ NNNY NC ND OHOK OR PA RI SC SDTNΤX UT VT VA WA WV Wl

				APP	ENDIX					
1		2	3		4					
	to non-a	d to sell accredited rs in State 3-Item 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	
WY		X			[[
PR		X								

