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 140 9811

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|------------|-----|-----|------|
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OMB Number: 3235-0076 Expires: March 30, 2008 Estimated average burden hours per form.....1

| SEC USE ONLY | | | | | | | |
|---------------|--------|--|--|--|--|--|--|
| Prefix | Serial | | | | | | |
| | | | | | | | |
| DATE RECEIVED | | | | | | | |
| | | | | | | | |

| Name of Offering (check if this is an a | amendment and name has changed, a | nd indicate change.) | | | |
|-------------------------------------------|--------------------------------------|------------------------|---------------------|---------------------|---------------------------------------|
| Series A Preferred Stock Financing | | | | _ | |
| Filing Under (Check box(es) that apply): | ☐ Rule 504 | Rule 505 | ■ Rule 506 | Section 4 | (6) AEC UÇĞE |
| Type of Filing: | × | New Filing | | ☐ Amendment | 1591 |
| | A. BASIC ID | ENTIFICATION DA | TA | \\ <u>}</u> ~\(\) | /G / 图 |
| 1. Enter the information requested abo | ut the issuer | | | \\\c. | · · · · · · · · · · · · · · · · · · · |
| Name of Issuer (☐ check if this is an am | endment and name has changed, and | indicate change.) | | 101 | |
| Future Point Systems, Inc. | | | | 16. | 180 |
| Address of Executive Offices | (Number and Street, | City, State, Zip Code) | Telephone Num | ber (Including Area | Code) Styling |
| 1825 S. Grant Street, Suite 850, San Mate | eo, CA 94402 | | 650-931-8660 | \ | |
| Address of Principal Business Operations | (Number and Street, City, State, Zip | Code) | Telephone Num | ber (Including Area | Code) |
| (if different from Executive Offices) | | | | | |
| Brief Description of Business | | | UESSED | 12- | |
| Software Development | | 0040 | | | |
| Type of Business Organization | | AU5 | [₩] 6 2007 | | |
| ■ corporation | ☐ limited partnership, already for | med TILO | 0.000 | ☐ other (please s | pecify): |
| □ business trust | ☐ limited partnership, to be forme | ed Fina | | | |
| | - | Month S | car | | |
| Actual or Estimated Date of Incorporatio | n or Organization: |)2 2 | 006 | [M. A. akara] | □ Estimated |
| Jurisdiction of Incorporation or Organiza | tion: (Enter two-letter U.S. Postal | Service abbreviation f | or State | ■ Actual | ☐ Estimated |
| | CN for Canada; FN for other | | | | DE |

GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an emption 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 immination 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 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 IDENTIFICATION DATA

- 2. 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 | ☑ Director | General and/or Managing Partner |
|---------------------------------|------------------------------------------------------------|--------------------------------|---------------------------------------|------------|---------------------------------|
| | t name first, if individual) | · | | | · |
| Fitzgerald, Kev | | | | | |
| | idence Address (Number and treet, Suite 850, San Mateo, C | | | | |
| Check | Promoter | A 94402 Beneficial Owner | Executive Officer | ☑ Director | ☐ General and/or |
| Box(es) that | - Promoter | E Belleficial Owlie | Executive Officer | E Director | Managing Partner |
| Apply: | | | | | |
| | t name first, if individual) | | | | |
| Lyons, Michael | idence Address (Number and | Street City State Zin Code) | · · · · · · · · · · · · · · · · · · · | | |
| | treet, Suite 850, San Mateo, C | | | | |
| Check Boxes | Promoter | ☐ Beneficial Owner | ☐ Executive Officer | ☑ Director | ☐ General and/or |
| that Apply: | · | | | | Managing Partner |
| | t name first, if individual) | | | | |
| MacLean, Audr | | | | | |
| | idence Address (Number and Street, Suite 850, San Mateo, C | | | | |
| Check Boxes | Promoter | ⊠ Beneficial Owner | ☐ Executive Officer | Director | ☐ General and/or |
| that Apply: | □ Promoter | E Belleficial Owner | Executive Officer | □ Director | Managing Partner |
| Full Name (Las | t name first, if individual) | | | | |
| | idence Address (Number and | Street, City, State, Zip Code) | | | |
| 915 Burnett, #3 | , San Francisco, CA 94131 | | | | |
| Check Boxes that Apply: | ☐ Promoter | ☐ Beneficial Owner | Executive Officer | ☐ Director | General and/or Managing Partner |
| D'Antilio, Paul | t name first, if individual) | | | | |
| 1825 S. Grant S | idence Address (Number and Street, Suite 850, San Matco, C | | | | |
| Check Boxes that Apply: | ☐ Promoter | ☐ Beneficial Owner | ☐ Executive Officer | ☐ Director | General and/or Managing Partner |
| Full Name (Las | t name first, if individual) | | | | |
| Duginass P | idanus Adduage (Nissakas sa 4 | Street City State 21: C-1-1 | | | |
| Business or Res | idence Address (Number and | Succi, City, State, Zip Code) | | | |
| Check Boxes that Apply: | Promoter | ☐ Beneficial Owner | ☐ Executive Officer | ☐ Director | General and/or Managing Partner |
| Full Name (Las | t name first, if individual) | | | | |
| Business or Res | idence 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 (Las | t name first, if individual) | | · · · · · · · · · · · · · · · · · · · | | |
| Business or Res | sidence Address (Number and | Street, City, State, Zip Code) | | · | |

| | | | | | В. | INFORM | ATION ABO | OUT OFFE | RING | | | , | |
|---------|----------------------------|----------------------------|-----------------|------------------------------|--------------------------------|----------------------------|--------------------------------|-----------------------------------------|----------------|-----------------------------------------|--------------|--------------|---------------------------------------------------------|
| 1. | Has the iss | suer sold, or | does the issu | er intend to | | | | | under ULOI | | | Yes No |) <u>X</u> |
| 2. | What is th | e minimum | investment th | nat will be a | ecepted from | m any indiv | idual? | | | | | \$ N/A_ | |
| 3. | Does the c | offering perr | mit joint own | ership of a si | ingle unit? | | | | | *************************************** | | Yes X N | |
| 4. | solicitation registered | n of purcha with the SE | sers in conne | ction with s a state or s | sales of sec tates, list th | urities in the name of the | ie offering. he broker or i | If a person | to be listed i | s an associate | ed person or | agent of a b | emuneration for proker or dealer ersons of such a |
| N/A | \ | | | | | | | | | | | | |
| Full | l Name (Las | t name first | , if individual |) | <u> </u> | | | | - | | | | |
| | | | _ | | | | | | | | | | |
| Bus | iness or Re | sidence Add | Iress (Number | and Street, | City, State, | Zip Code) | | | | | | | |
| Nar | ne of Assoc | iated Broke | r or Dealer | | | | | | | | | | |
| Stat | les in Which | Person Lis | ted Has Solic | ited or Inter | ds to Solic | it Purchaser | | | | | | | |
| | | | | | | | | | | | | | All States |
| ĮAI. | -i | [AK] | [AZ] | [AR] | [CA] | [CO] | [CT] | [DE] | [DC] | [FL] | [GA] | [HI] | JIDJ |
| IL |] | IINI | [IA] | [KS] | [KY] | [LA] | [ME] | [MD] | [MA] | [MI] | [MN] | [MS] | [MO] |
| [M | i) | [NE] | [NV] | [NH] | [NJ] | [NM] | [NY] | [NC] | [ND] | [OH] | [OK] | [OR] | [PA] |
| ĮR1 | l | [SC] | [SD] | ןמון | ĮΤΧΙ | ĮUTĮ | [VT] | [VA] | [VA] | [WV] | ĮWIJ | [WY] | [PR] |
| Ful | l Name (Las | st name first | , if individual |) | | | | • | | *., | | • | |
| | | | | | | | | | | | | | |
| Bus | siness or Re | sidence Ado | dress (Numbe | r and Street, | City, State | , Zip Code) | | | | | | | |
| Nar | ne of Assoc | iated Broke | r or Dealer | | | | | | | | | | |
| Sta | tes in Whicl | h Person Lis | sted Has Solic | ited or Inter | nds to Solic | it Purchaser | S | | | | | | |
| (Ch | ieck "All St | ates" or che | ck individual | States) | | | ***************** | | | | | | All States |
| ĮΑΙ | 4 | [AK] | [AZ] | [AR] | [CA] | [CO] | [CT] | [DE] | [DC] | [FL] | [GA] | HII | [ID] |
| [11.] | 1 | [IN] | [1A] | [KS] | [KY] | [LA] | [ME] | [MD] | [MA] | [MI] | [MN] | [MS] | MOI |
| ĮΜ | τį | [NE] | [NV] | [NH] | ונאן | [NM] | [NY] | [NC] | [ND] | [OH] | [OK] | [OR] | [PA] |
| [RI | | [SC] | [SD] | ľINJ | [TX] | [UT] | ĮVTĮ | [VA] | [VA] | ĮWVJ | ĮWI) | [WY] | [PR] |
| Ful | l Name (La: | st name first | t, if individua | 1) | | | | | | | | | |
| Bus | siness or Re | sidence Ado | dress (Numbe | r and Street. | City, State | , Zip Code) | | | | | | | |
| Na | me of Assoc | ciated Broke | er or Dealer | | <u> </u> | | | | | | | | |
| Sta | tes in Whic | h Person Lis | sted Has Solic | cited or Inter | nds to Solic | it Purclusers | S | | | | | | |
| | | | ck individual | | | | | *************************************** | | | | | All States |
| ĮΑΙ | | [AK] | [AZ] | [AR] | [CA] | [CO] | [CT] | [DE] | [DC] | [FL] | [GA] | ІНІ | (ID) |
| ilL | | ואון | ĮΙΑΙ | [KS] | [KY] | [LA] | IMEI | [MD] | [MA] | [MI] | [MN] | [MS] | [MO] |
| ĮΜ | | [NE] | [NV] | [NH] | ןנאן | [NM] | [NY] | [NC] | [ND] | [OH] | [OK] | [OR] | [PA] |
| IRI | | ISCl | ISDI | [TN] | [TX] | IUTI | [VT] | [VA] | [VA] | [WV] | ĮWIJ | [WY] | [PR] |

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS 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 🗆 and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Amount Already Aggregate Type of Security Sold Offering Price Debt 3,911,618.30 \$ 6,349,850.10 Equity Preferred Common Convertible Securities (including warrants)..... Partnership Interests.... Other (Specify _____) Total 6,349,850.10 3,911,618.30 Answer also in Appendix, Column 3, if filing under ULOE. 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 purchases o

| 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." | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------|
| Partition of the state of the s | Number | Aggregate |
| | Investors | Dollar Amount |
| | | of Purchases |
| Accredited Investors | 29 | \$3,911,618.30 |
| Non-accredited Investors | 0 | \$0 |
| Total (for filings under Rule 504 only) | | \$ |
| Answer also in Appendix, Column 4, if filing under ULOE. | | |
| 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 |
| | Security | Sold |
| Type of Offering | | |
| Rule 505 | 0 | \$0 |
| Regulation A | 0 | \$0 |
| Rule 504 | 0 | \$0 |
| Total | 0 | \$0 |
| 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 | | \$0 |
| Printing and Engraving Costs | | \$0 |
| Legal Fees | X | \$20,000 |
| Accounting Fees | | \$0 |
| Engineering Fees | | \$0 |
| Sales Commissions (specify finders' fees separately) | | \$0 |
| Other Expenses (Identify) Blue Sky Filing Fees | × | \$ 1,050 |

21,050

X

Total.....

| C OFFERING PRICE NU | MBER OF INVESTORS, EXPENSES AND USE OF PR | OCEEDS |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------|
| b. Enter the difference between the aggregate offering pri | ce given in response to Part C - Question 1 and total expens the "adjusted gross proceeds to the issue" | ses furnished |
| If the amount for any purpose is not known, furnish an e- payments listed must equal the adjusted gross proceeds to | the issuer set forth in response to Part C- Question 4.b above Payment : . Directors, | total of the total of the to Officers, Payment To & Affiliates Others |
| Salaries and fees. | | |
| Purchase of real estate | | |
| Purchase, rental or leasing and installation of machinery and equal to the second seco | uipment \$ | s |
| Construction or leasing of plant buildings and facilities | s | |
| Acquisition of other businesses (including the value of securities in exchange for the assets or securities of another issuer pursuan Repayment of indebtedness. | it to a merger) | |
| | | |
| Working capital | | \$ 3,890,568.30 |
| Other (specify): | □S | |
| | | s |
| Column Totals | | |
| Total Payments Listed (column totals added) | | x \$ 3,890,568.30 |
| | | |
| | | |
| | D. FEDERAL SIGNATURE | |
| The issuer had duly caused this notice to be signed by the under an undertaking by the issuer to furnish to the U.S. Securities an non-accredited investor pursuant to paragraph (b)(2) of Rule 50 | d Exchange Commission, upon written request of its staff, t | |
| Issuer (Print or Type) | Signature | Date |
| Future Point Systems, Inc. | (In | August 10, 2007 |
| Name of Signer (Print or Type) | Title of Signer (Print or Type) | |
| Timothy Moore | Secretary | |

ATTENTION

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

| | | | | APPENDIX | | | _ | . , | |
|-------|--------------------|------------------------------------------------------|--------------------------------------------------------------------------------------------|--------------------------------------|----------------------------------------------------------------|----------------------------------------------|--------|-----|-------|
| 1 | | 2 | 3 | | 4 | | | | 5 |
| | to non- investo | id to sell accredited rs in State B-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 | 1) No |
| AL | | | | | | | | | |
| AK | | | | | | | | | |
| AZ | | | | - | | | | | |
| AR | | | | | | | | | |
| CA | | Х | Series A Preferred Stock | 7 | \$523,469.10 | 0 | \$0.00 | | X |
| CO | | | | | | | | | |
| CT | | | | | | | | | |
| DE | | | | | | | | | |
| DC | | | | | | | | | |
| FL | | | | | | | | | |
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| MA | | | | | | | | | |
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| MN | | | | | | | | | |
| MS | | | | | | | | | |
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| | • • | | | APPENDIX | • | · | | | | |
|-------|--------------------|-----------------------------------------------------|--------------------------------------------------------------------------------------------|----------------------------------------|--------------------------------------------------------------------------------------------------------------|----------------------------------------------|----------|-----|----|--|
| 1 | | 2 3 4 | | | | | | 5 | | |
| | to non- investo | d to sell accredited rs in State 3-Item 1) | Type of security and aggregate offering price offered in state (Part C-Item 1) | | Disqualification 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 | |
| MT | | | | | | | | | | |
| NE | 1 | | | | | | | | | |
| NV | | | | | | | | | | |
| NH | | | | | | | | | | |
| N,J | | | | | | | | | | |
| NM | | | | | | - | | | | |
| NY | | | | | | | | | | |
| NC | | | | | | | | | | |
| ND | | | | | | <u> </u> | | | | |
| OH | | Х | Series A Preferred Stock | 1 | \$49,999.62 | 0 | \$0.00 | | X | |
| ОК | | | Stock | | <u> </u> | | | | | |
| OR | | | | ······································ | <u> </u> | | | | | |
| PA | | | | | | | | | | |
| RI | | | | | | | <u> </u> | | | |
| ŠC | | | | | | | | | | |
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| TN | | | | | | | | | | |
| TX | | | | | | | | | | |
| UT | | | | | | | | | | |
| VT | | | | = = | | | | | | |
| VA | | Х | Series A Preferred Stock | 2 | \$599,999.40 | 0 | \$0.00 | | X | |
| ŴΑ | | X | Series A Preferred Stock | 3 | \$458,020.86 | 0 | \$0.00 | | Х | |
| WV | | | | | | | | | | |
| WI | | | | | | | | | | |
| WY | | | | | | HVI | | 1 | | |
| PR | - | | | | | -/1 11 | | | | |

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.