## FORM D

1413572

**UNITED STATES** SECURITIES AND EXCHANGE COMMISSION · Washington, D.C. 20549

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

**FORM D** 



NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

RECUIN	ED CIL	average bur esponse	den 16.00
SEP 2 4	Plent?	EC USE OF	NLY Serial
18		ATE RECE	VED

		····				
Name of Offering ( check if this is an amend Private offering of Units consisting of 6% Notes a	lment and name has changed, and indicate changed, and indicate changed units representing Class A.H.C. Membership to					
Filing Under (Check box(es) that apply):  Rule						
Type of Filing: ☐ New Filing ☐ Ame	——————————————————————————————————————	Section 4(6) ULOEPROCESSE				
	A. BASIC IDENTIFICATION DATA	CEO O COST				
1. Enter the information requested about the is	suer	SEP & B 2007				
Name of Issuer ( check if this is an amend	lment and name has changed, and indicate chang	ge.) THOMSUN				
Green-Tech Assets, LLC (previously known as T		Telephone Number (including Area Cobe)				
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (including Area Code)				
149 Avenue at the Common, Suite 4, Shrewsbur		(732) 391-4100				
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)	Telephone Number (including Area Code)				
Brief Description of Business						
General Partner and manager of hedge fund						
Type of Business Organization		· · · · · · · · · · · · · · · · · · ·				
☐ corporation	☐ limited partnership, already formed	☑ other (please specify): limited liability				
☐ business trust	☐ limited partnership, to be formed	company				
	Month Ye	ear				
Actual or Estimated Date of Incorporation or Orga	anization:	☐ ☐ Actual ☐ Estimate				
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:						
CN for Canada; FN for other foreign jurisdiction)  D E						
GENERAL INSTRUCTIONS						
Federal:						
l	,	ection 4(8), 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 st	ates will not result in a loss of the federa	l 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.						
Persons who respo	nd to the collection of information conta	ined in this form are not				
	d unless the form displays a current valid					

		A. BASIC IDEN	TIFICATION DATA							
2. Enter the information re	•	<u>-</u>								
<ul> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> </ul>										
issuer;	<ul> <li>Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class equity securities of the issuer;</li> </ul>									
<ul> <li>Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and</li> </ul>										
Each general and managing partner of partnership issuers.										
Check Box(es) that apply	☐ Promoter	☐ Beneficial Owner		□ Director	☐ General and/or Managing Partner					
Full Name (Last name first, Raymond, Joseph J.	if individual)				· · · · · · · · · · · · · · · · · · ·					
Business or Residence Add	ress /Number and	Street City State Zin Code	····							
149 Avenue at the Common			•							
Check Box(es) that apply	Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or					
					Managing Partner					
Full Name (Last name first, Goldstein, Norman	if individual)									
Business or Residence Add	ress (Number and	Street City State Zin Code	· · · · · · · · · · · · · · · · · · ·							
149 Avenue at the Common	•		•							
Check Box(es) that apply	☐ Promoter	☐ Beneficial Owner		Director	☐ General and/or					
					Managing Partner					
Full Name (Last name first,	if individual)		· · · · · · · · · · · · · · · · · · ·	<del></del>						
Maltzman, Michael A.										
Business or Residence Add	ress (Number and	Street, City, State, Zip Code	)							
149 Avenue at the Common	i, Suite 4, Shrewsb	ury, NJ 07702								
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 Add	ress (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 Add	ress (Number and	Street City State 7in Code	<del></del>							
Busiless of Nesidence Add	ress (remoer and	oneer, ony, 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	if individual)									
Business or Residence Add	ress (Number and	Street, City, State, Zin Code	<u> </u>							
	(	5.7551, 5.77, 5.1215, 2.1 <del>2</del> 5556,	,							
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 Add	ress (Number and	Street, City, State, Zin Code		<del></del>						
	- >= 1:		•							

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

B. INFORMATION ABOUT OFFERING														
													Yes	No
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									$\boxtimes$					
Answer also in Appendix, Column 2, if filing under ULOE.														
2.	What is the	minimum i	investment	t that will b	e accepted	d from any	individual	?					\$50,00	0
													Yes	No
			-		-							***************************************	$\boxtimes$	
	similar remu	ineration for person or a ore than fi	or solicitati agent of a ive (5) pers	on of purc broker or a sons to be	haser <del>s</del> in d tealer regi	connection stered with	with sales the SEC	of securit and/or with	ies in the d n a state o	offering. If r states, lis	a person to the name	mmission or to be listed is an e of the broker of rth the	г	
Full I	Name (Last	name first,	if individu	al)								-		
Busir	ess or Resi	dence Add	iress (Nun	nber and S	treet, City	State, Zip	Code)						<del></del>	
Nam	e of Associa	ted Broke	r or Dealer				<u></u>	·		-				<u> </u>
State	s in Which F	Person Lis	ted Has So	olicited Pu	rchasers									<del></del>
(Che	ck "All State	s" or chec	k individua	l States)	•••••	••••••		***********		***********		🗖	All States	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]		
{IL}	[IN]	[AI]	[KS]	[KY]	(LA)	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT]	(NE)	[NV]	(NH)	[NJ]	(MM)	[NY]	(NC)	[ND]	(OH)	(OK)	(OR)	[PA]		
[RI]	[SC]	[SD]	[TN]	[XT]	[UT]	(VII)	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full	lame (Last i	name first,	if individu	al)										
Busir	ess or Resi	dence Add	iress (Nun	nber and S	treet, City	, State, Zip	Code)	<del></del>	<del>-</del>				<del></del>	
Nam	e of Associa	ted Broke	r or Dealer								_			
State	s in Which f	Person Lis	ted Has So	olicited Pu	rchasers						····			
(Che	ck "All State	s" or chec	k individua	l States)			•••••			•••••		🗖	All 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]	[NV]	[NH]	[เก]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]	[SC]	(SD)	(TN)	[TX]	(UT)	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full N	lame (Last i	name first,	if individu	al)										
Busir	ess or Resi	dence Add	tress (Nun	nber and S	treet, City	, State, Zip	Code)			<del></del>		-	<u></u> _	
											_			
Name	e of Associa	ted Brokei	r or Dealer	•										
	s in Which F													·
								All 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]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	(ND)	(OH)	[OK]	[OR]	[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)

\$1,989,800

proceeds to the issuer."

Salaries and fees	5.	Indicate below the amount of the adjusted gross proceeds of the purposes shown. If the amount for any puthe box to the left of the estimate. The total of the pay proceeds to the issuer set forth in response to Part C	urpose is not known, furnish an estimate and check Iments listed must equal the adjusted gross				
Purchase or real estate					Officers. Directors, &		Payments To Others
Purchase, rental or leasing and installation of machinery and equipment		Salaries and fees		🗖	<u>\$</u>		\$
Purchase, rental or leasing and installation of machinery and equipment		Purchase or real estate			\$		\$
Acquisition of other business (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger) \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		Purchase, rental or leasing and installation of machine	ery and equipment	🗖	\$		\$
used in exchange for the assets or securities of another issuer pursuant to a merger)  Repayment of indebtedness  Working capital  Other (specify)  Column Totals  Column Totals  D. FEDERAL SIGNATURE  The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.  Signature  Green-Tech Assets, LLC  Name of Signer (Print or Type)  Title of Signer (Print or Type)  Title of Signer (Print or Type)		Construction or leasing of plan buildings and facilities.		🗆	\$		\$
Working capital		Acquisition of other business (including the value of so used in exchange for the assets or securities of anoth	🗖	\$	⊠	\$1,100,000	
Other (specify)  Column Totals		Repayment of indebtedness	🗆	<u>\$</u>		\$	
Column Totals		Working capital	🗖	<u>\$</u>	$\boxtimes$	\$889,800	
Column Totals		Other (specify)		_			
Column Totals				- 13	\$	П	\$1,100,000
Total Payments Listed (column totals added)							\$1,100,000
The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.  Issuer (Print or Type)  Signature  Date  September 12, 2007  Name of Signer (Print or Type)  Title of Signer (Print or Type)				<u>s</u> 🖂		\$1,989,800	
undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.  Issuer (Print or Type)  Green-Tech Assets, LLC  Name of Signer (Print or Type)  Title of Signer (Print or Type)			D. FEDERAL SIGNATURE				·
Green-Tech Assets, LLC  Name of Signer (Print or Type)  Title of Signer (Print or Type)  September 12, 2007	unde	rtaking by the issuer to furnish to the U.S. Securities and Exch.	ned duly authorized person. If this notice is filed under F ange Commission, upon written request of its staff, the in	ule 50 forma	5, the following signa ion furnished by the i	ture con ssuer to	stitutes an any non-
Name of Signer (Print or Type)  Title of Signer (Print or Type)  September 12, 2007	Issu	er (Print or Type)	Signature On O \ \		Date		
	Gree	en-Tech Assets, LLC	Therese It. 1000	_	September 12, 20	107	
Michael A. Maltzman Senior Vice President, Stratus Services Group, Inc., Manager	Nan	e of Signer (Print or Type)	Title of Signer (Print or Type)				
	Mict	ael A. Maltzman	Senior Vice President, Stratus Services Group, I	nc., N	lanager		

5.

