FORM D

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

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

1412	169						
OMB API	PROVAL '						
OMB Number:	3235-0076						
Expires:							
Estimated average burden							
hours per respo	onse16.00						

Serial

SEC USE ONLY

DATE RECEIVED

Prefix

UNIFORM LIMITED OFFERING EXEM	PTION L
Name of Offering (check if this is an amendment and name has changed, and indicate change.) 15% Senior Secured Notes due 2009	A DECEIVED THE
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DATA	\ <u>\</u>
Enter the information requested about the issuer	200
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Bong Spirit Company, LLC	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
635 W. Michigan Street, Orlando, Florida 32805	407-843-1505
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (If different from Executive Offices) (S35 W. Michigan Street, Orlando, Florida 32805)	Telephone Number (Including Area Code) 407-843-1505
Brief Description of Business	DDA
Importation and marketing of distilled spirits	PROCESSED
Type of Business Organization ☐ corporation ☐ limited partnership, already formed ☐ business trust ☐ limited partnership, to be formed ☐ LLC	olease specify): THOMSON
Month Year Actual or Estimated Date of Incorporation or Organization: 11 04 Actual Estin Surisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	nated

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 predictated on the filing of a federal notice.

			A. BASIC IDE	ENTH	FICATION DATA				
2. Enter the information re	equested for the fo	llowing	?.						
 Each promoter of 	the issuer, if the is:	suer ha	s been organized w	ithin	the past five years;				
 Each beneficial ow 	ner having the pow	er to vo	ote or dispose, or dir	ect th	e vote or disposition	of, 10	% or more o	f a clas	s of equity securities of the issuer
Each executive of	ficer and director o	f corpo	orate issuers and of	corpo	rate general and mar	naging	partners of	partne	ership issuers; and
Each general and it	managing partner o	f partn	ership issuers.						
Charle Danier Aden Angles	D 2		Daniel Comme	_	E. Office		Diverse		Caranal and H
Check Box(es) that Apply:	Promoter	<u>√</u>	Beneficial Owner	LJ	Executive Officer	U	Director	W	General and/or Managing Partner
Full Name (Last name first, Drummond, James Beac									
Business or Residence Addre 635 W. Michigan Street,				de)		•			
Check Box(es) that Apply:	Promoter	Ø	Beneficial Owner		Executive Officer		Director	Z	General and/or Managing Partner
Full Name (Last name first,	if individual)								
Mayer, Ryan R.									
Business or Residence Addre	ss (Number and	Street,	City, State, Zip Co	de)					
635 W. Michigan Street, (Orlando, Florida	3280	5						
Check Box(es) that Apply:	Promoter		Beneficial Owner	Ø	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, Taeger, Paul H.	if individual)						-		
Business or Residence Addre 635 W. Michigan Street,				de)		•		-	
Check Box(es) that Apply:	Promoter	Z	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, Zell, Charles R.	if individual)						,		
Business or Residence Addre 635 W. Michigan Street,			· ·	de)					
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 Addre	ess (Number and	Street,	City, State, Zip Co	de)					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first,	f individual)								
Business or Residence Addre	ss (Number and	Street,	City, State, Zip Co	de)				· •	
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first,	f individual)								
Business or Residence Addre	ess (Number and	Street,	City, State, Zip Co	de)		•			
	(lise bla	nk sher	et or conv and use	additi	onal conies of this st	neet o	s necessary	`	

	• • • • •				B. 1	NFORMAT	ION ABOU	T OFFERI	NG				
	7.7		. 1 .1			11	114 1 1		al i cc			Yes	No .
١.	Has the	issuer sole	d, or does th										i €
2	Whatia					Appendix		-				r	
2.	what is	the minin	num investm	ient inat w	illi be acce	pied from	any individ	iuai?			***************************************	\$ Yes	NI-
3.			permit join									¥	No
4.	commis If a pers or states	sion or sim on to be lis s, list the na	ilar remune sted is an ass	ration for s sociated pe roker or de	solicitation rson or age ealer. If mo	of purchas ent of a brol ore than fiv	ers in conn cer or deale e (5) persoi	ection with r registered is to be list	sales of sec I with the S ed are asso	curities in t SEC and/or	irectly, any he offering, with a state ons of such		
Ful	ll Name (Last name	first, if indi	ividual)					•				
<u>D.,</u>	ciness or	Dasidanca	Address (N	lumber and	Street C	ity State 7	7in Code)						
			Suite 300	rumber and	J Street, C	ity, State, 2	cip Code)						
_			roker or De	aler				•			·	**•	
Pir	nnacle Fi	nancial Gr	oup, LLC										
Sta	tes in Wh	ich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers				• •		
	(Check	"All State:	s" or check	individual	States)							☐ Al	l States
	AL IL	AK IN	A/L IA	AR KS	CA KY	CO LA	CT ME	DE MD	DC MA	EZ. MI	GA MN	HI MS	ID MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
Ful	Il Name (Last name	first, if indi	ividual)					··· · · · · · · · · · · · · · · · · ·				
<u></u>	cineco or	Dacidence	Address (1	Jumberan	d Street C	Tity State	7in Code)						
Ou.	3111033 01	Residence	. Addiess (i	vanioer an	d Street, C	ny, state,	zip code)						
Na	me of As	sociated B	roker or De	aler									
Sta	tes in Wh	ich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers	·					
	(Check	"All State:	s" or check	individual	States)		• • • • • • • • • • • • • • • • • • • •	************			••••	☐ AI	l States
	AL	AK	ΑZ	AR	CA	CO	CT)	DE	DC)	FL	GA	HI	ID
	ĪL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	<u>OK</u>	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV]	WI	WY	PR
Ful	ll Name (Last name	first, if indi	ividual)									
Bu	siness or	Residence	: Address (1	Number an	d Street, C	City, State,	Zip Code)		···-		.		
Na	me of As	sociated B	roker or De	aler				<u> </u>					
							=						
Sta			Listed Has										
	(Check	"All State:	s" or check	individual	States)			******************				☐ Al	l States
	AL	AK	AZ	AR	[CA]	CO	CT)	DE	DC	FL	GA	Н	1D
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	[K]	NM UT	NÝ VT	NC VA	ND WA	OH WV	OK)	OR WY	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

1.	Enter the aggregate offering price of securities included in this offering and the total amount alread 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		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$ 1,600,000.0	00 \$ 500,000.00
	Equity	·	\$ 0.00
	Common Preferred		0.00
	Convertible Securities (including warrants)		_ \$
	Partnership Interests		<u>\$ 0.00</u>
	Other (Specify)	4 000 000 0	\$ 0.00
	Total	\$_1,600,000.0	00 <u>\$ 500,000.00</u>
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in thi offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicat 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."	e	
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	5	\$ 500,000.00
	Non-accredited Investors	0	\$ 0.00
	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.		
	Tues of Official	Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		_ \$
	Regulation A		_ S
	Rule 504		
	Total		\$_0.00
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 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	[s
	Printing and Engraving Costs	[\$ <u>0.00</u>
	Legal Fees	[5 10,000.00
	Accounting Fees	_	\$ 0.00
	Engineering Fees	-	\$ 0.00
	Sales Commissions (specify finders' fees separately)	•	\$ 200,000.00
	Other Expenses (identify)	_	\$ 10,000.00
	Total	_	\$ 220,000.00 *
	Does not include up to 2% membership interest in issuer, v	•	

issuable to Broker under certain contingencies.

	C. OFFERING PRICE, NUMBER	R OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
	b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C — Que proceeds to the issuer."	estion 4.a. This difference is the "adjusted gross		\$1,380,000.00
	Indicate below the amount of the adjusted gross proceed each of the purposes shown. If the amount for any p check the box to the left of the estimate. The total of the proceeds to the issuer set forth in response to Part C.	ourpose is not known, furnish an estimate and e payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees] \$ <u>19,171.00</u>	2 \$ 71,129.00
	Purchase of real estate	[s0.00	\$_0.00
	Purchase, rental or leasing and installation of machin and equipment		\$_0.00	□ \$_0.00
	Construction or leasing of plant buildings and faciliti	ies[\$ <u></u>	s 0.00
	Acquisition of other businesses (including the value offering that may be used in exchange for the assets of issuer pursuant to a merger)	or securities of another	¬\$_0.00	\$ 0.00
	Repayment of indebtedness	[\$_0.00	☑ \$ 183,470.00
	Working capital	[\$_0.00	\$ 196,430.00
	Other (specify): Product Costs	[\$_0.00	\$ 680,000.00
	Vendor Payables, Legal Fees, Consulting Fees		\$	∑ \$ 229,800.00
	Column Totals		7 <u>\$ 19,171.00</u>	✓ \$ 1,360,829.0
	Total Payments Listed (column totals added)		⊘ \$ <u>1,3</u>	00.000,088
_		D. FEDERAL SIGNATURE		
ig	e issuer has duly caused this notice to be signed by the unnature constitutes an undertaking by the issuer to furnis information furnished by the issuer to any non-accred	h to the U.S. Securities and Exchange Commis	sion, upon writte	
SS	uer (Print or Type)	ignature	Date	
Вс	ong Spirit Company, LLC	HATURA ROUGHER	September 13, 2	007
Ja	me of Signer (Print or Type)	itle of Signer (firint or Type)		
aı	ıl H. Taeger D	irector of Operalions)		
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ATTENTION -

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

		E. STA	TE SIGNATURE				
1.	Is any party described in 17 CFR provisions of such rule?					Yes	No ⊠
		See Appendix, C	olumn 5, for state	response.			
2.	The undersigned issuer hereby unD (17 CFR 239.500) at such time	-		of any state in which th	is notice is fi	iled a no	tice on Form
3.	The undersigned issuer hereby un issuer to offerees.	ndertakes to furnish to th	e state administrat	ors, upon written requ	est, informat	ion furn	ished by the
4.	The undersigned issuer represent limited Offering Exemption (ULC of this exemption has the burden	DE) of the state in which t	his notice is filed:	and understands that th			
	uer has read this notification and kno nhorized person.	ows the contents to be true	and has duly cause	d this notice to be signe	d on its beha	lf by the	undersigned
Issuer (Print or Type)	Signature	100 VI 101 (0)	Date		<u>-</u>	.,
Bong S	pirit Company, LLC		Harry last	✓ Sept	ember 13, 2	2007	
Name (Print or Type)	Title (Print	or Type)				
Paul H	l. Taeger	Director of	Operations				

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.

4 2 3 1 Disqualification Type of security under State ULOE (if yes, attach and aggregate Intend to sell offering price Type of investor and explanation of to non-accredited amount purchased in State waiver granted) offered in state investors in State (Part C-Item 2) (Part E-Item 1) (Part C-Item 1) (Part B-Item 1) Number of Number of Non-Accredited Accredited Investors **Investors** Amount Yes No No Amount Yes State ALΑK AZDebt \$1.6M 1 \$50,000.00 X X AR $\mathsf{C}\mathsf{A}$ CO CT DE DC \$200,000.00 X 3 X Debt \$1.6M FL GAHI ΙD IL IN IA KS ΚY LA ME MD MA MI MN MS

APPENDIX

APPENDIX

1	to non-ac investors	to sell	3 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)			5 Disqualifica under State U (if yes, atta- explanation waiver gran (Part E-Item	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО									
МТ									
NE									
NV									
NH									
NJ									
NM									
NY								,	
NC				,			·		
ND									
ОН)						
ОК							<u>-</u> -		
OR									
PA							. 		
RI									
SC									
SD									
TN								<u> </u>	
TX	 	×	Debt \$1.6M		\$250,000.0	0			×
UT									
VT									
VA	 								
WA									
WV					-			 	
WI									

				APP	ENDIX			. · · · <u> · · · · · · · · · · · · · </u>	
1		2	3		4				
	to non-a investor	to sell accredited is in State i-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)				tate ULOE, attach pation of granted) L-Item 1)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY									
PR									

