## FORM D

# 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 APPROVAL					
OMB Number:	3235-0076				
Expires:					
Estimated average burden					
hours per response 16.00					

SEC USE ONLY								
Prefix	Serial							
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DATE RECEIVED								
1	1							

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)	_
Filing Under (Check box(es) that apply):	□ ULOE IVIAII PROCESSING
A. BASIC IDENTIFICATION DATA	MAD
1. Enter the information requested about the issuer	` · · / ∠UUB
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	Washington, Do
BORREGO SOLAR SYSTEMS, INC.	angton, Do
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
1365 N. Johnson Avenue El Cajon, California 92020 (	619) 562-7183
Address of Principal Business Operations (Number and Street City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
same	)
Brief Description of Business	
Brief Description of Business Solar Panel Sales and Installation  APR 0 9 2008 THORSON	
Type of Business Organization  corporation business trust  limited partnership, already formed FINANCIAL ther (plus business trust limited partnership, to be formed	easc 08044248 -
Actual or Estimated Date of Incorporation or Organization: O3 O2 Actual Estimated Date of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)	==

#### **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	INTII	FICATION DATA				
2. Enter the info	rmation re	quested for the fo	llowin	ıg:						
• Each pro	moter of t	he issuer, if the is	suer h	as been organized w	ithin 1	the past five years;				
Each ber	eficial ow	ner having the pov	er to	vote 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
<ul> <li>Each exc</li> </ul>	cutive off	icer and director o	f corp	orate issuers and of	corpo	rate general and mar	aging	partners of	partne	rship issuers; and
• Each ger	neral and n	nanaging partner o	f part	nership issuers.						
Charle Bay(as) that	. A - also	Dromoter		Beneficial Owner	[7]	Executive Officer	[7]	Director		General and/or
Check Box(es) that	і Арріу:	Promoter	П	Beneficial Owner	<b>V</b>	Executive Officer	V	Director		Managing Partner
Full Name (Last na Hall, Aaron	ıme first, i	f individual)								
	nce Addre	ss (Number and	Stree	t, City, State, Zip Co	ode)					<u> </u>
1365 N. Johnso		-								
Check Box(es) that	t Apply:	Promoter		Beneficial Owner	Ø	Executive Officer	Ø	Director		General and/or Managing Partner
Full Name (Last na Hall, Michael	ıme first, i	f individual)								
Business or Reside	nce Addre	ce (Number and	Stree	t, City, State, Zip Co	nde)		_			
1365 N. Johnson					,,,,,					
Check Box(es) that	t Apply:	Promoter		Beneficial Owner	Ø	Executive Officer	Z	Director		General and/or Managing Partner
Full Name (Last na Anderson, Chris	-	f individual)								
Business or Reside	nce Addre	ss (Number and	Strcc	t, City, State, Zip Co	odc)	<del></del> .				
1365 N. Johnson	n Avenue	, El Cajon, Calif	ornia	92020						
Check Box(es) tha	t Apply:	Promoter		Beneficial Owner	V	Executive Officer		Director		General and/or Managing Partner
Full Name (Last na	ame first, i	f individual)				·····				
James, Rickard										
Business or Reside	nce Addre	ss (Number and	Stree	t, City, State, Zip Co	ode)					
1365 N. Johnso	n Avenu	e, El Cajon, Cal	iforni	a 92020						
Check Box(es) tha	t Apply:	Promoter	Ø	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last na Platt/Hall 1997		f individual)								
Business or Reside				t, City, State, Zip Co 92119	ode)	· · · · · · · · · · · · · · · · · · ·				
Check Box(es) tha	t Apply:	Promoter	Ø	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last na	ame first, i	f individual)								
Business or Reside	ence Addre	ess (Number and	Stree	et, City, State, Zip Co	ode)					
Check Box(es) tha	t Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last na	ame first, i	f individual)								
Business or Reside	ence Addre	ess (Number and	Stree	et, City, State, Zip Co	ode)					
		(Use bl	ank sh	eet, or copy and use	addit	ional copies of this s	heet,	as necessar	y)	

				B. I	NFORMATI	ON ABOU	T OFFERI	NG				
1. Has th	e issuer sole	d, or does th	ne issuer ir	itend to se	ll, to non-a	ccredited i	nvestors in	this offeri	ng?		Yes <b>⊠</b>	No □
			Ans	wer also in	Appendix,	Column 2	, if filing u	ınder ULO	E.			
2. What i	s the minim	ium investn	ent that w	ill be acce	pted from a	ny individ	ual?				<b>s</b>	
3. Does t	he offering	nermit ioin	t ownershi	n of a sina	le unit?						Yes	No
												l <u></u> l
commi If a per or state	commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offerin If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a sta or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of suc a broker or dealer, you may set forth the information for that broker or dealer only.									he offering. with a state		
Full Name	(Last name	first, if ind	ividual)									
Business or	Residence	Address (N	Sumber and	l Street, C	ity, State, Z	ip Code)						
Name of A	ssociated B	roker or De	aler									
States in W	hich Persor	Listed Ha	s Solicited	or Intends	to Solicit I	urchasers						
(Check	"All State	s" or check	individual	States)					************************************	***************************************	☐ AI	1 States
AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ĪD
IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT RI	NE SC	ÑV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
	[30]	[30]		<u> </u>	(01)			<u> </u>				
Full Name	(Last name	first, if ind	ividual)									
Business of	r Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)						
Name of A	receipted D	roker or De	aler					<del> </del>				
		n Listed Ha										1.0.
(Checl	c "All State	s" or check	individual	States)	*****			*****		***************************************	∐ AI	l States
AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID STOR
MT	IN NE	IA NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Full Name	(Last name	first, if ind	ividual)		···-			·····				
			· · · · · ·									
Business of	r Residence	e Address (i	Number an	d Street, C	City, State, 2	Zip Code)						
Name of A	ssociated B	roker or De	aler		<del>,</del>					-		
States in W	hich Person	n Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
(Checl	t "All State	s" or check	individual	States)				•••••••			☐ Al	l States
AL	AK	AZ	ĀR	CA	CO	CT	DE	DC	FL	GA	HI	ID
IL N	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	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

# 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 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.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	S	_ <b>s</b>
	Equity	300,000.00	\$_300,000.00
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	5	_ <b>s</b>
	Partnership Interests		
	Other (Specify)		
	Total		
	Answer also in Appendix, Column 3, if filing under ULOE.		<u> </u>
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."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors		
	Non-accredited Investors		
	Total (for filings under Rule 504 only)		\$_300,750.00
	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.		
	Time of Official	Type of Security	Dollar Amount Sold
	Type of Offering  Rule 505	-	
	Regulation A		s
	Rule 504		\$
	·		\$ 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.		<u>,                                    </u>
	Transfer Agent's Fees		] \$
	Printing and Engraving Costs		
	Legal Fees	<u>7</u>	\$ 1,000.00
	Accounting Fees		] \$
	Engineering Fees		
	Sales Commissions (specify finders' fees separately)		] \$
	Other Expenses (identify)	_	] <b>\$</b>
	Total		1,000.00

	C. OFFERING PRICE, NUMI	BER OF INVESTORS, EXPENSES AND USE OF F	KUCEEDS	
	b. Enter the difference between the aggregate offeri and total expenses furnished in response to Part C—o proceeds to the issuer."	•		\$
5.	Indicate below the amount of the adjusted gross pro each of the purposes shown. If the amount for any check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	y purpose is not known, furnish an estimate and the payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		\$ <u></u> 0.00	\$ 0.00
	Purchase of real estate	[	s 0.00	\$_0.00
	Purchase, rental or leasing and installation of macand equipment	hinery [	s0.00	\$ <u></u> \$
	Construction or leasing of plant buildings and faci	llitics	\$ <u>0.00</u>	s_0.00
	Acquisition of other businesses (including the value offering that may be used in exchange for the asset issuer pursuant to a merger)	ts or securities of another	_յ <b>§</b> 0.00	ss
	Repayment of indebtedness		\$ 0.00	S 0.00
	Working capital			\$ 300,750.00
	Other (specify):			
			s	
	Column Totals			
	Total Payments Listed (column totals added)		□ \$ <u>_</u> 3	00,750.00
		D. FEDERAL SIGNATURE		
igi	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-accu	nish to the U.S. Securities and Exchange Commis	sion, upon writte	tle 505, the following on request of its staff
SSI	uer (Print or Type)	Signature//	Date	
	DRREGO SOLAR SYSTEMS, INC.		March 1	7th, 2008
Va	me of Signer (Print or Type)	Title of Signer (Print or Type)		
A	aron Hall	President		

# - ATTENTION -

		E. STATE SIGNATURE			
1.		.262 presently subject to any of the disqualificatio		Yes	No <b>K</b>
		See Appendix, Column 5, for state response.			
2.	The undersigned issuer hereby underta D (17 CFR 239.500) at such times as	kes to furnish to any state administrator of any state required by state law.	in which this notice is f	īled a no	tice on Form
3.	The undersigned issuer hereby undertaissuer to offerees.	akes to furnish to the state administrators, upon w	ritten request, informat	tion furn	ished by the
4.	limited Offering Exemption (ULOE) of	t the issuer is familiar with the conditions that mu of the state in which this notice is filed and understant stablishing that these conditions have been satisfied	ands that the issuer clai		
	uer has read this notification and knows th thorized person.	ne contents to be true and has duly caused this notice	to be signed on its beha	lf by the	undersigned
Issuer (	Print or Type)	Signature	Date		
BORRE	EGO SOLAR SYSTEMS, INC.	(Muar Ball	March	19m,	2008
Name (	Print or Type)	Title (Print or Type)	•		

President

#### Instruction:

Aaron Hall

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.

APPENDIX										
1	Intend to non-a investor	I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	4  Finvestor and rchased in State C-Item 2)		5 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	
AL										
AK										
AZ										
AR										
CA	×		Common Stock	5		6	\$0.00		×	
со	×		Common Stock	1			\$0.00		×	
СТ			<u></u>							
DE										
DC										
FL									<u> </u>	
GA	<u></u>									
HI						ļ				
ID										
IL	×		Common Stock	1			\$0.00		×	
IN										
IA										
KS										
KY										
LA										
ME										
MD										
MA	×		Common Stock			1	\$0.00		×	
MI										
MN										
MS										

#### **APPENDIX** 2 3 l Disqualification Type of security under State ULOE and aggregate (if yes, attach Intend to sell Type of investor and explanation of to non-accredited offering price waiver granted) amount purchased in State investors in State offered in state (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) Number of Number of Accredited Non-Accredited State Yes No Investors Amount **Investors** Amount Yes No MO MT NE NV Common Stock 1 NH × NJ NM NY NC ND ОН ΟK OR PA RI SCSD TN TX UT VT \$0.00 × VA× Common Stock 1 WA WV $\mathbf{W}\mathbf{I}$

	APPENDIX													
1		2	3		4									
	to non-a investor	I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	amount pur		Type of investor and amount purchased in State (Part C-Item 2)			Type of investor and amount purchased in State		Type of investor and amount purchased in State		(if yes, explan waiver	ate ULOE , attach ation of granted) -Item 1)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No					
WY														
PR														

