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

1436	•
OMB APP	
OMB Number:	3235-0076
Expires:	
Estimated avera	ige burden
hours per respoi	nse16.00

SEC US	SEC USE ONLY Prefix Serial									
Prefix	Serial									
DATE R	ECEIVED									
1	1									

	nd name has changed, and indicate change.)	
Red Canvas Film Production, LLC  Filing Under (Check box(es) that apply): Rule 504  Type of Filing: New Filing Amendment	Rule 505 Rule 506 Section 4(6)	ULOE Mail Processing  Section
	A. BASIC IDENTIFICATION DATA	40n
1. Enter the information requested about the issuer		11 N 0 1 2008
Name of Issuer ( check if this is an amendment and Red Canvas Film Production, LLC	name has changed, and indicate change.)	Washington, DC
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Inditing Area Code)
2303 West Avenue O-4, Palmdale, CA 93551		661-947-8020
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street City, State Zin Code)	Telephone Number (Including Area Code)
Brief Description of Business	APR 0 9 2008	R
Financing the production of a feature film.	MIN 0 3 2000	
	THOMSON_	A THE REAL PROPERTY OF THE PRO
	tnership, already formed FINANCIAL r () tnership, to be formed Manager-	olease specify): Managed LLC 08044309
Actual or Estimated Date of Incorporation or Organization  Jurisdiction of Incorporation or Organization: (Enter two CN for O		
Federal: Who Must File: All issuers making an offering of securities 77d(6).	s in reliance on an exemption under Regulation D	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 da and Exchange Commission (SEC) on the earlier of the dat which it is due, on the date it was mailed by United State	e it is received by the SEC at the address given t	
Where To File: U.S. Securities and Exchange Commission	on, 450 Fifth Street, N.W., Washington, D.C. 20	549.
Copies Required: Five (5) copies of this notice must be f photocopies of the manually signed copy or bear typed or		ly signed. Any copies not manually signed must be
Information Required: A new filing must contain all info thereto, the information requested in Part C, and any mater 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 Unit ULOE and that have adopted this form. Issuers relying are to be, or have been made. If a state requires the paraccompany this form. This notice shall be filed in the at this notice and must be completed.	on ULOE must file a separate notice with the yment of a fee as a precondition to the claim for	Securities Administrator in each state where sales or the exemption, a fee in the proper amount shall

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

tiling of a federal notice.

#### A. BASIC IDENTIFICATION DATA 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. Beneficial Owner Director General and/or Check Box(es) that Apply: Promoter Executive Officer Managing Partner Full Name (Last name first, if individual) Chamitoff, Ken Business or Residence Address (Number and Street, City, State, Zip Code) 2303 West Avenue O-4, Palmdale, CA 93551 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Photo Kicks Business or Residence Address (Number and Street, City, State, Zip Code) 2303 West Avenue O-4, Palmdale, CA 93551 Promoter Check Box(es) that Apply: ☐ Beneficial Owner ☐ Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner Executive Officer General and/or Promoter ☐ Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Executive Officer Promoter Beneficial Owner General and/or Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(cs) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

					B. 13	NFORMATI	ON ABOU	T OFFERI	NG			•	
,		iaanaa aala	i, or does th		stand to so	11	aaraditad i		this offeri	n n 2	-	Yes	No
1.	rias inc	issuer soic	i, or does to			•				_	*******	Ħ	
2.	Answer also in Appendix, Column 2, if filing under ULOE.  What is the minimum investment that will be accepted from any individual?								\$ 200	0,000.00			
					55 4555	p	,					Yes	No
3.			permit joint		_							Ħ	
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. 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 state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
Ful N/	-	Last name	first, if indi	ividual)									-
		Residence	Address (N	umber and	l Street. C	ity. State. Z	in Code)						
N/A			. 144.455 (1.	uncer unc	- S <b></b> , O	,, 0.0.0, 2	inp Code,						
		ociated Br	oker or Dea	aler	, <u></u>								
N/A		ich Person	Listed Has	Solicited	or Intende	to Saligit I	Purchaeare						
Sta			" or check									□ Al	l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	[ID]
			ĪĀ	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
Ful N/.	•	Last name	first, if indi	ividual)									
Bus N/		Residence	Address (N	Number an	d Street, C	lity, State, 2	Zip Code)			.,			
Nai N/		ociated Br	oker or De	aler									
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	s" or check	individual	States)		***************************************			***************************************	***************************************	☐ Al	1 States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ĪD
		IN]	IA DOZ	KS	KY	LA	ME	MD	MA ND	MI OH	MN OK	MS OR	MO PA
	MT RI	NE SC	NV SD	NH TN	TX	NM UT	NY VT	NC VA	WA	WV	WI	WY	PR
	l Name (l		first, if indi										
N/A		Dagidagaa	Address (?	<b></b>	d Stuart C	State State	7in Cada)						
N/		Residence	. Address (1	vuilloer all	iu Sileei, C	my, state, i	zip Code)						
Nai N/		ociated Br	oker or De	aler					•	<u>, .</u>			
		ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
			s" or check						***************************************			□ Al	l States
	AL.	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	Œ
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	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

••	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.	:	Amount Already
	Type of Security	Offering Price	Sold
	Debt	\$	s
	Equity	s	s
	Common Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Other (Specify LLC Units	\$_1,800,000.00	\$_1,420,000.00
	Total	\$_1,800,000.00	\$ 1,420,000.00
	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 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."	Number Investors	Aggregate Dollar Amount of Purchases § 995,000.00
	Accredited Investors		<u> </u>
	Non-accredited Investors		§ 425,000.00
	Total (for filings under Rule 504 only)		\$
3.	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 Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		<u>\$_0.00</u>
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		\$
	Printing and Engraving Costs		<b>s</b>
	Legal Fees		\$
	Accounting Fees		\$
	Engineering Fees	_	s
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify) Syndication and Organizational		\$ 36,000.00
	Total	_	s 36,000.00

	b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C — Que proceeds to the issuer."	uestion 4.a. This difference is the "adjusted gross		1,764,000.00
5.	Indicate below the amount of the adjusted gross proceeds of the purposes shown. If the amount for any check the box to the left of the estimate. The total of the proceeds to the issuer set forth in response to Part C	purpose is not known, furnish an estimate and he payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		\$ 15,000.00	S 754,000.00
	Purchase of real estate		] \$	<u> </u>
	Purchase, rental or leasing and installation of machi	inery	] \$	\$
	Construction or leasing of plant buildings and facili	ities	] \$	
	Acquisition of other businesses (including the value offering that may be used in exchange for the assets issuer pursuant to a merger)	s or securities of another	]\$	
	Repayment of indebtedness		]\$	<u></u> \$
	Working capital			
	Other (specify): Total Production Period and Pos	t Production	]\$	\$_701,891.00
	Other		]\$	\$ <u>293,109.00</u>
	Column Totals		\$_15,000.00	
	Total Payments Listed (column totals added)			764,000.00
		D. FEDERAL SIGNATURE		
sig	e issuer has duly caused this notice to be signed by the u nature constitutes an undertaking by the issuer to furn information furnished by the issuer to any non-accre	ish to the U.S. Securities and Exchange Commiss	sion, upon writte	le 505, the following in request of its staff,
Iss	uer (Print or Type)	Signature /	Date	1.0
R	ed Canvas Film Production, LLC	Flynth Mantito	3/26	108
Na	me of Signer (Print or Type) Kenneth Chamber	Title of Signer (Print or Type)  Manager of L	LC	

- 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 provisions of such rule?	Yes	No 🐼		
	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.

The issuer 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 duly authorized person.

	1	
Issuer (Print or Type)	Signature //	Date
Red Canvas Film Production, LLC	Lonneth Chamber	3/26/08
Name (Print or Type)	Title (Print or Type)	
Kenneth Chamitett	Manager of	LLC

#### 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.

				AP	PENDIX				
1	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		4  Type of investor and amount purchased in State (Part C-Item 2)				ification ate ULOE attach ation of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL								<u> </u>	
AK									
AZ	<del></del>								
AR									
CA	ц		LLC Units	28	\$995,000.00	35	\$425,000.00		×
СО									
СТ									
DE									
DC									
FL								<u> </u>	
GA	1								
ні									 
ID									
IL									
IN									
IA									
KS			- -						
KY	:		-						
LA	1								
ME									
MD		 							
МА	Ĭ								
MI	,								!
MN			-						
MS		-					-		-  r

				APP	ENDIX				
1	Intend to non-a	2 to sell accredited in State	Type of security and aggregate offering price offered in state (Pan C-Item 1)	4  Type of investor and  amount purchased in State  (Part 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
МО	ĸ	· • ·	LLC Units	28	\$995,000.00	35	\$425,000.00		Ħ
МТ	 	J							
NE			=						
NV	н		LLC Units	28	\$995,000.00	35	\$425,000.00		×
NH		 		·			1		
NJ		1							
NM	K		LLC Units #1, 800,000	28	\$995,000.0	35	\$425,000.00		×
NY									
NC									
ND									
ОН				<u> </u>					
ОК			· · · · · · · · · · · · · · · · · · ·						
OR									
PA		1							
RI									
SC									
SD									
TN								]	
TX	н		LLC Units	28	\$995,000.0	35	\$425,000.00		×
UT		-	_						
VT									
VA									
WA									
wv									
WI									

•	<b>*</b>	

				APPI	ENDIX				
1	2 Intend to sell to non-accredited		Type of security and aggregate offering price		Type of	4		under St (if yes	lification ate ULOE , attach ation of
	investor	s in State	offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY									
PR	<u> </u>								

END