FORM D

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

05000484

MANUALLY SIGNED

FORM D

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

SEC	USE ONLY
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Name of Offering (check if this is an amendment and name has changed, and indicate change.) 2004 Private Placement (Placement Agent: Basic Inve	serore Inc.
Filing Under (Check box(ex) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	O O OLOE STREET STREET
A. BASIC IDENTIFICATION DATA	JAN # 3 2005 / -
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	185/49
BlastGard International, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
12900 Automobile Blvd., Suite D, Clearwater, FL 33762	(727) 592–9400
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Designs, develops, markets proprietary blast mitigation m	aterials
Type of Business Organization Corporation	please specify): PROCESSE[
Month Year Actual or Estimated Date of Incorporation or Organization: 06 99 Actual Estivation of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	JAN 07 2005 EIO FINANCIA
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D 17d(6).	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 days after the first sale of securities in the offering and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given by 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. 20	9549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually shotocopies of the manually signed copy or bear typed or printed signatures.	ly signed. Any copies not manually signed must be
information Required: A new filing must contain all information requested. Amendments need only repo hereto, the information requested in Part C, and any material changes from the information previously supplied with the SEC.	
illing Fee: There is no federal filling fee.	
tate: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for subJOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the sere to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for ecompany this form. This notice shall be filed in the appropriate states in accordance with state law, as notice and must be completed.	Securities Administrator in each state where sales in 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

filing of a federal notice.

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 iss 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. 37. Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director: Managing Partner Full Name (Last name first, if individual) Gordon, James F. Business or Residence Address (Number and Street, City, State, Zip Code) 12900 Automobile Blvd., Suite D, Clearwater, FL 33762 Beneficial Owner Check Box(es) that Apply: Promoter Executive Officer General and/or Managing Parmer Full Name (Last name first, if individual) Waddell, John Jr. Business or Residence Address (Number and Street, City, State, Zip Code) 12900 Automobile Blvd., Suite D, Clearwater, FL 33762 X Executive Officer Check Box(es) that Apply: Promoter X Beneficial Owner X Director General and/or Managing Partner Full Name (Lust name first, if individual) Gordon, Michael J. Business or Residence Address (Number and Street, City, State, Zip Code) 12900 Automobile Blvd., Suite D, Clearwater, FL 33762 Beneticial Owner Executive Officer Check Box(es) that Apply: General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Beneticial Owner Executive Officer General and/or Check Box(es) that Apply: Promoter Director Managing Partner Full Name (Last name tirst, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner Executive Officer ii Director General and/or Promoter Managing Parmer Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

Beneficial Owner

Promuter

Business or Residence Address (Number and Street, City, State, Zip Code)

Check Box(es) that Apply.

Fuil Name (Last name first, if individual)

Executive Officer

Director

General and/or

Managing Partner

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2. What i	ic the minim			wer also in vill be accep			•				• • •	<u>'</u> ,
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3. Does t	he offering	permit join	t ownershi	p of a singl	le unit?			************	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	************		No · · ·
commi If a per or state	ission or sim rson to be lis es, list the na	ilar remune ited is an as: ame of the b	ration for s sociated pe croker or de	h person w solicitation erson or age ealer. If mo e informatio	of purchas nt of a brol re than fiv	ers in conne cer or deale e (5) persor	ction with registered is to be liste	sales of sec with the S ed are asso	urities in t EC and/or	he offering. with a state		
	(Last name c Invest											
				Street, Ci	ty, State, 2	Zip Code)						
				ite 306,	-	•	11747					
Name of As	ssociated Bi	oker or De	aler								٠.	•••
States in W	hich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
-				States)			••••••	•••••••••••••••••••••••••••••••••••••••		•••••••	☐ Al	l States
AL IL MT RI	AK IN NE SC	AZ [A] NV SD	AR KS NH TN	KY NJ TX	CO LA NM UT	ME ME WY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR
Full Name	(Last name	tīrst, if ind	ividual)									
Business o	r Residence	Address (?	Number an	d Street, Ci	ity, State,	Zip Code)						
Name of As	ssociated Br	oker or De	aler	<u> </u>								
States in W	hich Person	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						
(Check	"All States	or check	individual	States)	•••••			***************************************			☐ Al	l States
AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	MA MD WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Full Name ((Last name	tirst, if ind	ividual)									
Business of	r Residence	Address (1	Number an	d Street, Ci	ty, State,	Zip Code)						
Name of As	ssociated Br	oker or De	aler						<u> </u>	• .:		
States in W	hich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
(Check	"All States	" or check	individual	States)	•••••••						☐ Al	l States
AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR

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

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 aiready exchanged. Aggregate Amount Airendy. Type of Security Offering Price Sold Equity Common Preferred Convertible Securities (including warrants) Partnership Interests S 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 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 Dollar Amount Investors of Purchases 1 Accredited Investors c1,020,000 Non-accredited Investors 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. Type of Dollar Amount Type of Offering Security Sold Rule 505 Regulation A Rule 504 Total Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts retating 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. 1,000 Transfer Agent's Fees X 2,000 Printing and Engraving Costs Legal Fees 10,000 Accounting Fees $\mathbf{X}\mathbf{X}$ Engineering Fees Sales Commissions (specify finders' fees separately) \$ 132,600 ΣŸ 1,000 Other Expenses (identify)

Total

146,600

	b. Enter the difference between the aggregate offering price given in response to Part C — Question and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted grant proceeds to the issuer."	220		\$4,863,400
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		D	ayments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	_		
	Purchase of real estate	🔲 S		2
	Purchase, rental or leasing and installation of machinery and equipment	c		
	Construction or leasing of plant buildings and facilities	∪°		· U3
	Acquisition of other businesses (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)	_		
	Repayment of indebtedness			
	Working capital	_		
	Other (specify):			
	Column Totals	_		
	Total Payments Listed (column totals added)			,863,400
	Degederate signatures and a	- Jr. 4		
sign	issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this no nature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Cominformation furnished by the issuer to any non-accredited investor pursuant to paragraph $(b)(2)$	missior	i, upon writte	
lssu	er (Print or Type) Signature	Date	dile	
	lastGard International, Inc.		1/4/03)
Nan	ne of Signer (Print or Type) Title of Signer (Print or Type)		/ /	
M	ichael J. Gordon Vice President			

- ATTENTION

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

ı.	Is any party described in 17 C	FR 230.262 presently	subject to any	y of the disqualif	ication	Yes	No
	provisions of such rule?	*	11		•		77
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	<i>:</i>	<i>!</i>	·, ·		•		

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See Appendix, Column 5, for state response.

- 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.
- 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.

Issuer (Print or Type)	Signature Date
BlastGard International, Inc.	1/4/05
Name (Print or Type)	Title (Print or Type)
Michael J. Gordon	Vice President

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.