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

(0500	3400	
	SEC US	E ONLY	\neg
Prefix		Serial	7
	1	l l	- 1

Name of Offering (check if this	s is an amendment and name has	changed, and indicat	te change	e.)		
Ollie Koala's BackYard I, LLC						
Filing Under (Check box(es) that	apply): Rule 504	Rule 505	Rule 5	606	☐ Section 4(6) 🗌 ULOE
Type of Filing: Ne	w Filing 🛛 Amendment					
		NTIFICATION D	<u>ATA</u>			
1. Enter the information request						
Name of the Issuer (ch	eck if this is an amendment a	ınd name has chan	iged, an	d indica	ate change.)	
Ollie Koala's BackYard I, LLC						
Address of Executive Offices	(Number and Street, City,	State, Zip Code)	1	Teleph	one Number (Ir	ncluding Area Code)
P. O. Box 308, Ponte Vedra, Flor	ida 32004				85-9617	
Address of Principal Business O	perations (Number and Stree	t, City, State, Zip (Code)	Teleph	one Number (II	ncluding Area Code)
(if different from Executive Offic		- No. 45. 45. 45. 45. 45. 45. 45. 45. 45. 45				<i></i>
Brief Description of Business		PROCESSE	D)			
Family entertainment center	\\\				RECEIVED	D 168
	/	FEB 03 2005			189	10
					FEB 0 2	2005 >>
Type of Business Organization	<u> </u>	THOMSON			1 20 - 13	
\square corporation	☐ limited partnership, alre	eady FINANCIAL			4	
] other (please s	specify): limite	d liability company
☐ business trust	☐ limited partnership, to b	oe formed			S.C.	
		Month				//
					_	
Actual or Estimated Date of Inco	rporation or Organization:	<u>09</u>		<u>04</u>		☐ Estimated
Jurisdiction of Incorporation or (Organization: (Enter two-lette	er U.S. Postal Serv	vice abbi	reviatio	n for State:	<u>FL</u>
	CN for Canad	la. FN for other for	raian iui	riedictic	m)	

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 predicated on the filing of a federal notice

A. BASIC IDENTIFICATION DATA	
2. 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 equity securities of the issuer;	e of a class of
 Each executive officer and director of corporate issuers and of corporate general and managing partners of issuers; and 	f partnership
• Each general and managing partner of partnership issuers.	
M	General and/or anaging Partner manager of issuer
Full Name (Last name first, if individual) Bruce T. Schilling	
Business or Residence Address (Number and Street, City, State, Zip Code)	
P. O. Box 398, Ponte Vedra Beach, 32004	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director *☐ H	General and/or anaging Partner manager of issuer
Full Name (Last name first, if individual) Kevin W. Price	
Business or Residence Address (Number and Street, City, State, Zip Code)	
P. O. Box 398, Ponte Vedra Beach, 32004	
	General and/or anaging Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
	General and/or anaging 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 Director M	General and/or anaging 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 Director M	General and/or anaging Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
	General and/or anaging Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	

				B. INF	FORMATI	ION ABO	UT OFFE	RING				
				·								Yes No
1. Has the	issuer sol	d, or does	s the issuer	intend to	sell, to no	n-accredit	ed investo	rs in this o	ffering?			
						k, Column			_			
0. 1171							_					.00.700
2. What is t	the minim	ium inve	stment tha	t will be a	iccepted fr	om any ind	lividual?		••••			<u>32,500</u>
3. Does the	offering r	nermit io	int owners	hin of a si	ngle unit?							Yes No □ □
4. Enter the												
			olicitation									
			agent of a b									
			han five (5)	_	to be listed	l are assoc	iated pers	ons of such	ı a broker	or dealer,	you may se	et forth
the infor	mation to	r that br	oker or dea	uer only.								
Full Name ((Last nam	e first, if	individual	1)	:							-
					· ·							
Business or	Residenc	a Addres	s (Number	and Stree	at City St	ate Zin Co	nda)					
Dusiness of	residenc	e Addres	s (rumber	and Street	st, Ofty, St	ate, zip O	oue/					
					· .							<u> </u>
Name of As	sociated E	Broker or	Dealer									
States in Whi	ch Person	Listed has	Solicited or	Intends to	Solicit Puro	chasers		-				
(Check "All				-					• • • • • • • • • • • • • • • • • • • •		🗌 All	
	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL] [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 (L	ast name i	first, if ind	lividual)									
Business or F	Residence A	Address (N	lumber and	Street, City	y, State, Zip	Code)			· · · · · · · · · · · · · · · · · · ·	<u> </u>		
Name of Asso	ociated Bro	ker or De	aler									
rame of risse	ciated Dio	Ker or Dea	aici									
States in Whi					Solicit Pure	chasers					🗀 All	States
(Check "All [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]
_	[NE]] NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI] Full Name (L	[SC]	[SD]	[NT]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
r un rvame (L	ast name i	11136, 11 IIIC	iiviuuai)									•
<u> </u>												
Business or F	Residence A	Address (N	lumber and	Street, City	y, State, Zip	Code)						
Name of Asso	ociated Bro	ker or Dea	aler							 -		
States in Whi	ch Person	Listed has	Solicited or	Intends to	Solicit Pure	chasers						
(Check "All			lividual State	:s)							🗀 All	States
	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL] [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]
												_

(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 already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
	Type of Security	O	Aggregate fering Price	!	Amo	ount Already Sold
	Debt	\$		0	\$	0
	Equity	\$		0	\$	0
	☐ Common ☐ Preferred					
	Convertible Securities (including warrants)	\$		0	\$	0
	Partnership Interests	\$		0	\$	0
	Other (Specify: limited liability company interests)	\$	1,430,00	0	\$	676,000
	Total	\$	1,430,00	0	\$	676,000
	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		Dol	Aggregate llar Amount Purchases
	Accredited Investors		1	3	\$	741,000
	Non-accredited Investors			0	\$	0
	Total (for filings under Rule 504 only)			0	\$	0
	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 offering		Type of Security		Do	llar Amount Sold
	Rule 505		-	0	\$	0
	Regulation A			0	\$	0
	Rule 504			0	\$	0
	Total			0	\$	0
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 issuer. 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			\boxtimes	\$	250.00
	Legal Fees			\boxtimes	\$	5,000.00
	Accounting Fees				\$	
	Engineering Fees				\$	
	Sales Commissions (specify finders' fees separately)				\$	
	Other Expenses (identify)				\$	
	Total				\$	5,250.00

C. OFFERING PRICE,	NUMBER OF INVESTORS, EXPENSES F	and ose of Pro	OCEEDS
Part C - Question 1 and total expens	the aggregate offering price given in response to ses furnished in response to Part C – Question 4.a. s proceeds to the issuer."		\$ 1,424,750.00
proposed to be used for each of the p not known, furnish an estimate and	djusted gross proceeds to the issuer used or purposes shown. If the amount for any purpose in a check the box to the left of the estimate. The ual the adjusted gross proceeds to the issuer set ion 4.b above.		
		Payment to Officers, Directors, & Affiliates	Payments To Others
Salaries and fees		☑ \$ 40,000.00	□ \$
Purchase of real estate	······	□ \$	□ \$
Purchase, rental or leasing an	d installation of machinery and equipment	□ \$	□ \$
Construction or leasing of plan	nt buildings and facilities	□ \$	□ \$
Acquisition of other businesses offering that may be used in exissuer pursuant to a merger)	s (including the value of securities involved in this xchange for the assets or securities of another	s 🗆 \$	□ \$
			□ \$
			☑ \$1,384,750.00
		\$	□ \$
			□ \$
	n totals added)		⊠ \$1384,750.00 424,750.00
	D. FEDERAL SIGNATURE		
505, the following signature constitute	to be signed by the undersigned duly authorized is an undertaking by the issuer to furnish to the Unformation furnished by the issuer to any non-action.	S. Securities and Ex	change Commission,
Ollie Koala's Backyard I, LLC Name of Signer (Print or Type)	Title of Signer (Print or Type)	1/24/05	
Bruce T. Schilling	President		
brace 1. Scriming	Fresident		
	ATTENTION		

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

1.	1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?									
	See Appendix, Column 5,	for state response.								
2.	2. The undersigned issuer hereby undertakes to furnish notice on Form D (17 CFR 239.500) at such times as re-	· ·	f any state in which this i	notice is fil	led, a					
3.	. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.									
4.	4. The undersigned issuer represents that the issuer is fa Uniform limited Offering Exemption (ULOE) of the sta the availability of this exemption has the burden of es	te in which this notice is fil	ed and understands that							
	The issuer has read this notification and knows the conte by the undersigned duly authorized person.	ats to be true and has duly o	aused this notice to be si	gned on its	s behalf					
Is	ssuer (Print or Type) Signature	-0.00	Date							
O	Ollie Koala's Backyard I, LLC	Tic Skille	1/26/05							
N	Name (Print or Type) Title (Print or	Type)								

President

E. STATE SIGNATURE

Instruction:

Bruce T. Schilling

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		2 .	3	. :		4		5	
	~	•	3					Disqualifi	
	to non-ac	to sell ccredited s in State -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)				
State	Yes	No		Number of Accredited Investors	Accredited Non-Accredited				No
AL		X	·	3,30,0000				Yes	
AK		X							
AZ		X							
AR		X							
CA		X							
СО		X	LLC Interest			0 .	n/a		X
CT		X							
DE		X							
DC		X							
FL		X	LLC Interest	10	611,000	0	n/a		X
GA		X							
HI		X							
ID		. X							
<u>IL</u>		X							
IN		X			-				
IA		X	LLC Interest	1	65,000	0	n/a		X
KS		X							
KY		X							
LA		X							
ME		X							
MD		X							
MA		X							
MI		X							
MN		X							-
MS	<u> </u>	X							

APPENDIX

1	Intend to non-a investors	2 I to sell ccredited s in State Item 1)	3 Type of security and aggregate offering price offered in state (Part C-Item 1)		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		X							
МТ		X	LLC Interest	1	65,000	0	n/a		X
NE		X							
NV		X							
NH		X							
NJ		X							
NM		X		:					
NY		X							
NC		X							
ND		X		<u> </u>					
ОН		X							
OK		X							
OR		X							
PA		X							
RI		X							
sc		X							<u></u>
SD		X							
TN		X							
TX		X							
UT		X							
VT		X							
VA		X							
WA		X							
WV		X							
WI		X	LLC Interest			0	n/a		X

APPENDIX

1	2 3				4				
	Intend to sell and aggrato non-accredited investors in State (Part B-Item 1) Type of se and aggrators offering offering in the control of th			·	amount pur	investor and rchased in State C-Item 2)		Disqualificunder State (if yes, at explanaticular waiver graft) (Part E-It	tach ton of anted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY		X		_					
PR		X							