

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

Table with OMB Approval information: OMB Number 3235-0076, Expires May 31, 2005, Estimated average burden hours per response 16.00

Table with SEC USE ONLY information: Prefix, Serial, DATE RECEIVED

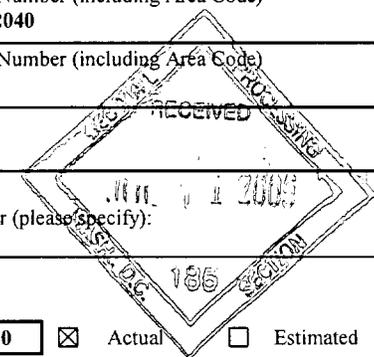
Name of Offering (check if this is an amendment and name has changed, and indicate change.)
Cybera, Inc. 8% Series B Redeemable Preferred Stock and Common Stock Warrants
Filing Under (Check box(es) that apply): Rule 504, Rule 505, Rule 506
Type of Filing: New Filing, Amendment



A. BASIC IDENTIFICATION DATA

1. Enter the information requested about the issuer
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)
Cybera, Inc.
Address of Executive Offices (Number and Street, City, State, Zip Code)
624 Grassmere Park Drive, Suite 28, Nashville, Tennessee 37211
Telephone Number (including Area Code)
(615) 301-2040
Address of Principal Business Operations (Number and Street, City, State, Zip Code)
(if different from Executive Offices) Same
Telephone Number (including Area Code)
Same
Brief Description of Business
Provider of "virtual" IT infrastructure for business network solutions.
Type of Business Organization
corporation, limited partnership, already formed, limited partnership, to be formed, other (please specify)

PROCESSED
JUL 1 2005
FINANCIAL



Actual or Estimated Date of Incorporation or Organization: 0 8 / 0 0
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State;
CN for Canada; FN for other foreign jurisdiction) D E

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.
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.
Information Required: A new filing must contain all information requested.
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.

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.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Handwritten signature

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**A. BASIC IDENTIFICATION DATA**

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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 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.

Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner

Full Name (Last name first, if individual)

**Cole, Jr., Novice & Julia**

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

**3717 Brighton Road, Nashville, Tennessee 37215**

Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner

Full Name (Last name first, if individual)

**Duffey, W. Clifton**

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

**624 Grassmere Park Drive, Suite 28, Nashville, Tennessee 37211**

Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner

Full Name (Last name first, if individual)

**Good, Jeffrey S.**

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

**307 Applecross Drive, Franklin, Tennessee 37064**

Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner

Full Name (Last name first, if individual)

**Keeble, Patrick E.**

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

**624 Grassmere Park Drive, Suite 28, Nashville, Tennessee 37211**

Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner

Full Name (Last name first, if individual)

**Keeble, Jr., Sydney F.**

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

**505 Park Center Drive, Nashville, Tennessee 37205**

Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner

Full Name (Last name first, if individual)

**Keeble, Sheila**

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

**505 Park Center Drive, Nashville, Tennessee 37205**

Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner

Full Name (Last name first, if individual)

**Olive, Jr., George A.**

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

**2088 Castleway Drive, Atlanta, Georgia 30345**

**A. BASIC IDENTIFICATION DATA**

Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner

Full Name (Last name first, if individual)

**Robinson, Ronald J.**

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

**c/o 624 Grassmere Park Drive, Suite 28, Nashville, Tennessee 37211**

Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner

Full Name (Last name first, if individual)

**Spear, Thomas B.**

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

**1306 Knox Valley Drive, Brentwood, Tennessee 37027**

Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner

Full Name (Last name first, if individual)

**Towanda Limited Partnership**

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

**c/o Michael Viren, 3550 Buschwood Park Drive, Suite 320, Tampa, Florida 33618**

Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner

Full Name (Last name first, if individual)

**Viren, Michael A.**

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

**3550 Buschwood Park Drive, Suite 320, Tampa, Florida 33618**

Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner

Full Name (Last name first, if individual)

**Elizabeth B. Cocke Trust**

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

**1512 Windstone Drive, Vienna, Virginia 22182-1537**

**B. INFORMATION ABOUT OFFERING**

1. Has the issuer sold or does the issuer intend to sell, to non-accredited investors in this offering? Yes  No   
 Answer also in Appendix, Column 2, if filing under ULOE.

2. What is the minimum investment that will be accepted from any individual? \$ N/A

3. Does the offering permit joint ownership of a single unit? Yes  No

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.

Full Name (Last name first, if individual)  
N/A

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

Name of Associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  
 (Check "All States" or check individual States)  All States  
 [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]  
 [IL] [IN] [IA] [KS] [KY] [LA] [MA] [MD] [ME] [MI] [MN] [MS] [MO]  
 [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA]  
 [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]

Full Name (Last name first, if individual)

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

Name of Associated Broker or Dealer

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  
 (Check "All States" or check individual States)  All States  
 [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]  
 [IL] [IN] [IA] [KS] [KY] [LA] [MA] [MD] [ME] [MI] [MN] [MS] [MO]  
 [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA]  
 [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]

**C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS**

b. Enter the difference between the aggregate offering price given in response to Part C-Question 1 and total expenses furnished in response to Part C-Question 4.a. This difference is the "adjusted gross proceeds to the issuer." .....

\$ 4,985,000

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C-Question 4.b. above.

	Payments to Officers, Directors, & Affiliates	Payments to Others
Salaries and fees.....	\$ _____ <input type="checkbox"/>	\$ _____
Purchase of real estate.....	\$ _____ <input type="checkbox"/>	\$ _____
Purchase, rental or leasing and installation of machinery and equipment.....	\$ _____ <input type="checkbox"/>	\$ _____
Construction or leasing of plant buildings and facilities.....	\$ _____ <input type="checkbox"/>	\$ _____
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).....	\$ _____ <input type="checkbox"/>	\$ _____
Repayment of indebtedness.....	\$ _____ <input type="checkbox"/>	\$ _____
Working capital.....	\$ _____ <input checked="" type="checkbox"/>	\$ <u>\$4,985,000</u>
Other (Specify).....	\$ _____ <input type="checkbox"/>	\$ _____
Column Totals .....	\$ _____ <input type="checkbox"/>	\$ _____
Total Payments Listed (column totals added) .....	<input checked="" type="checkbox"/> \$ <u>\$4,985,000</u>	

**D. FEDERAL SIGNATURE**

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type) <b>Cybera, Inc.</b>	Signature 	Date 
Name of Signer (Print or Type) <b>Patrick E. Keeble</b>	Title of Signer (Print or Type) <b>Chief Financial Officer</b>	

**ATTENTION**

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