

1498861

FORM D

Notice of Exempt Offering of Securities

U.S. Securities and Exchange Commission

Washington, DC 20549

(See instructions beginning on page 5)

OMB APPROVAL

OMB Number: 3235-0076

Expires: September 30, 2008

Estimated average burden hours per response: 4.00

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

Item 1. Issuer's Identity

Name of Issuer
Lanai Sustainability Research, LLC

Jurisdiction of Incorporation/Organization
Hawaii

Year of Incorporation/Organization (Select one)

Over Five Years Ago Within Last Five Years (specify year) 2006 Yet to Be Formed

Previous Name(s) None PROCESSED OCT 30 2008 THOMSON REUTERS

Entity Type (Select one) Corporation Limited Partnership Limited Liability Company General Partnership Business Trust Other (Specify)

(If more than one issuer is filing this notice, check this box and identify additional issuer(s) by attaching Items 1 and 2 Continuation Page(s).)

Item 2. Principal Place of Business and Contact Information

Street Address 1: 100 Kahelu Avenue, 2nd Floor; Street Address 2; City: Mililani; State/Province/Country: Hawaii; ZIP/Postal Code: 96789; Phone No.: (808) 548-4890

Item 3. Related Persons

Last Name: Murdock; First Name: David; Middle Name: H

Street Address 1: 100 Kahelu Avenue, 2nd Floor; Street Address 2; City: Mililani; State/Province/Country: Hawaii; ZIP/Postal Code: 96789

Relationship(s): Executive Officer Director Promoter

Clarification of Response (if Necessary)

(Identify additional related persons by checking this box and attaching Item 3 Continuation Page(s).)

Item 4. Industry Group (Select one)

- Agriculture, Banking and Financial Services, Business Services, Energy, Health Care, Manufacturing, Real Estate, Construction, REITS & Finance, Residential, Other Real Estate, Retailing, Restaurants, Technology, Computers, Telecommunications, Other Technology, Tra, Other

SFO Mail Processing Section OCT 23 2008 Washington, DC



**Item 5. Issuer Size (Select one)**

Revenue Range (for issuer not specifying "hedge" or "other investment" fund in Item 4 above)

- No Revenues
- \$1 - \$1,000,000
- \$1,000,001 - \$5,000,000
- \$5,000,001 - \$25,000,000
- \$25,000,001 - \$100,000,000
- Over \$100,000,000
- Decline to Disclose
- Not Applicable

OR

Aggregate Net Asset Value Range (for issuer specifying "hedge" or "other investment" fund in Item 4 above)

- No Aggregate Net Asset Value
- \$1 - \$5,000,000
- \$5,000,001 - \$25,000,000
- \$25,000,001 - \$50,000,000
- \$50,000,001 - \$100,000,000
- Over \$100,000,000
- Decline to Disclose
- Not Applicable

**Item 6. Federal Exemptions and Exclusions Claimed (Select all that apply)**

- Rule 504(b)(1) (not (i), (ii) or (iii))
- Rule 504(b)(1)(i)
- Rule 504(b)(1)(ii)
- Rule 504(b)(1)(iii)
- Rule 505
- Rule 506
- Securities Act Section 4(6)

Investment Company Act Section 3(c)

- Section 3(c)(1)
- Section 3(c)(2)
- Section 3(c)(3)
- Section 3(c)(4)
- Section 3(c)(5)
- Section 3(c)(6)
- Section 3(c)(7)

- Section 3(c)(9)
- Section 3(c)(10)
- Section 3(c)(11)
- Section 3(c)(12)
- Section 3(c)(13)
- Section 3(c)(14)

**Item 7. Type of Filing**

- New Notice **OR**  Amendment

Date of First Sale in this Offering:  **OR**  First Sale Yet to Occur

**Item 8. Duration of Offering**

Does the issuer intend this offering to last more than one year?  Yes  No

**Item 9. Type(s) of Securities Offered (Select all that apply)**

- Equity
- Debt
- Option, Warrant or Other Right to Acquire Another Security
- Security to be Acquired Upon Exercise of Option, Warrant or Other Right to Acquire Security
- Pooled Investment Fund Interests
- Tenant-in-Common Securities
- Mineral Property Securities
- Other (Describe)

**Item 10. Business Combination Transaction**

Is this offering being made in connection with a business combination transaction, such as a merger, acquisition or exchange offer?  Yes  No

Clarification of Response (if Necessary)

Item 11. Minimum Investment

Minimum investment accepted from any outside investor \$ 12,500

Item 12. Sales Compensation

Recipient: Brandt Blanken, Recipient CRD Number: 2245313, (Associated) Broker or Dealer: None, (Associated) Broker or Dealer CRD Number: 101180

Street Address 1: 6700 Fallbrook Avenue, Suite 111, City: West Hills, State/Province/Country: CA, ZIP/Postal Code: 91307

Street Address 2: [Empty], States of Solicitation: All States, CA, FL, GA, HI, MD, WA

- States of Solicitation: All States, 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, 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

(Identify additional person(s) being paid compensation by checking this box [ ] and attaching Item 12 Continuation Page(s).)

Item 13. Offering and Sales Amounts

(a) Total Offering Amount \$ 16,450,678 OR [ ] Indefinite
(b) Total Amount Sold \$ 11,517,839
(c) Total Remaining to be Sold \$ 4,932,839 OR [ ] Indefinite

Clarification of Response (if Necessary)

Item 14. Investors

Check this box [ ] if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the number of such non-accredited investors who already have invested in the offering:

Enter the total number of investors who already have invested in the offering: 16

Item 15. Sales Commissions and Finders' Fees Expenses

Provide separately the amounts of sales commissions and finders' fees expenses, if any. If an amount is not known, provide an estimate and check the box next to the amount.

Sales Commissions \$ 330,000.00 [X] Estimate

Finders' Fees \$ [ ] [ ] Estimate

Clarification of Response (if Necessary)

**Item 16. Use of Proceeds**

Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.

\$ 0.00

Estimate

Clarification of Response (if Necessary)

[Empty box for clarification of response]

**Signature and Submission**

Please verify the information you have entered and review the Terms of Submission below before signing and submitting this notice.

**Terms of Submission.** In Submitting this notice, each identified issuer is:

Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, in accordance with applicable law, the information furnished to offerees.\*

Irrevocably appointing each of the Secretary of the SEC and the Securities Administrator or other legally designated officer of the State in which the issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against the issuer in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes; or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.

Certifying that, if the issuer is claiming a Rule 505 exemption, the issuer is not disqualified from relying on Rule 505 for one of the reasons stated in Rule 505(b)(2)(iii).

\* This undertaking does not affect any limits Section 102(a) of the National Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require information. As a result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D, States cannot routinely require offering materials under this undertaking or otherwise and can require offering materials only to the extent NSMIA permits them to do so under NSMIA's preservation of their anti-fraud authority.

Each identified issuer has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person. (Check this box  and attach Signature Continuation Pages for signatures of issuers identified in Item 1 above but not represented by signer below.)

Issuer(s)

Lanai Sustainability Research, LLC

Name of Signer

Castle & Cooke Solar Management, LLC

Signature

[Handwritten signature]

Title

Vice President and Secretary

Number of continuation pages attached:

9

Date

10/15/2008

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 number.

Items 1 and 2 Continuation Page

Item 1 and 2. Issuer's Identity and Contact Information (Continued)

Name of Issuer  
  
 Jurisdiction of Incorporation/Organization  
  
 Year of Incorporation/Organization (Select one)  
 Over Five Years Ago  Within Last Five Years (specify year)   Yet to Be Formed

Previous Name(s)  None

Entity Type (Select one)  
 Corporation  
 Limited Partnership  
 Limited Liability Company  
 General Partnership  
 Business Trust  
 Other (Specify)

At your option, supply separate contact information for this issuer:

Street Address 1  Street Address 2

City  State/Province/Country  ZIP/Postal Code  Phone No.

Name of Issuer   
 Jurisdiction of Incorporation/Organization   
 Year of Incorporation/Organization (Select one)  
 Over Five Years Ago  Within Last Five Years (specify year)   Yet to Be Formed

Previous Name(s)  None

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Previous Name(s)  None

Entity Type (Select one)  
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 Limited Partnership  
 Limited Liability Company  
 General Partnership  
 Business Trust  
 Other (Specify)

At your option, supply separate contact information for this issuer:

Street Address 1  Street Address 2

City  State/Province/Country  ZIP/Postal Code  Phone No.

(Copy and use additional copies of this page as necessary.)

Item 3 Continuation Page

Item 3. Related Persons (Continued)

Last Name: Saunders, First Name: Harry, Middle Name: A.  
Street Address 1: 100 Kahelu Avenue, 2nd Floor, Street Address 2:  
City: Mililani, State/Province/Country: Hawaii, ZIP/Postal Code: 96789  
Relationship(s):  Executive Officer,  Director,  Promoter  
Clarification of Response (if Necessary):

Last Name: Roohan, First Name: Edward, Middle Name: C.  
Street Address 1: 100 Kahelu Avenue, 2nd Floor, Street Address 2:  
City: Mililani, State/Province/Country: Hawaii, ZIP/Postal Code: 96789  
Relationship(s):  Executive Officer,  Director,  Promoter  
Clarification of Response (if Necessary):

Last Name: Barrett, First Name: William, Middle Name: B.  
Street Address 1: 100 Kahelu Avenue, 2nd Floor, Street Address 2:  
City: Mililani, State/Province/Country: Hawaii, ZIP/Postal Code: 96789  
Relationship(s):  Executive Officer,  Director,  Promoter  
Clarification of Response (if Necessary):

Last Name: Uchiyama, First Name: John, Middle Name:  
Street Address 1: 100 Kahelu Avenue, 2nd Floor, Street Address 2:  
City: Mililani, State/Province/Country: Hawaii, ZIP/Postal Code: 96789  
Relationship(s):  Executive Officer,  Director,  Promoter  
Clarification of Response (if Necessary):

(Copy and use additional copies of this page as necessary.)

Item 3 Continuation Page

Item 3. Related Persons (Continued)

Last Name	First Name	Middle Name
Kline	Rick	H.
Street Address 1	Street Address 2	
100 Kahelu Avenue, 2nd Floor		
City	State/Province/Country	ZIP/Postal Code
Mililani	Hawaii	96789
Relationship(s):	<input checked="" type="checkbox"/> Executive Officer <input type="checkbox"/> Director <input type="checkbox"/> Promoter	
Clarification of Response (if Necessary)		

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Last Name	First Name	Middle Name
Millner	Henry	N.
Street Address 1	Street Address 2	
100 Kahelu Avenue, 2nd Floor		
City	State/Province/Country	ZIP/Postal Code
Mililani	Hawaii	96789
Relationship(s):	<input checked="" type="checkbox"/> Executive Officer <input type="checkbox"/> Director <input type="checkbox"/> Promoter	
Clarification of Response (if Necessary)		

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Last Name	First Name	Middle Name
Oasay	Rosalinda	V.
Street Address 1	Street Address 2	
100 Kahelu Avenue, 2nd Floor		
City	State/Province/Country	ZIP/Postal Code
Mililani	Hawaii	96789
Relationship(s):	<input checked="" type="checkbox"/> Executive Officer <input type="checkbox"/> Director <input type="checkbox"/> Promoter	
Clarification of Response (if Necessary)		

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Last Name	First Name	Middle Name
Garnett	Mary	J.
Street Address 1	Street Address 2	
100 Kahelu Avenue, 2nd Floor		
City	State/Province/Country	ZIP/Postal Code
Mililani	Hawaii	9678
Relationship(s):	<input checked="" type="checkbox"/> Executive Officer <input type="checkbox"/> Director <input type="checkbox"/> Promoter	
Clarification of Response (if Necessary)		

(Copy and use additional copies of this page as necessary.)

Item 3 Continuation Page

Item 3. Related Persons (Continued)

Last Name	First Name	Middle Name
Young	Philip	M.
Street Address 1	Street Address 2	
100 Kahelu Avenue, 2nd Floor		
City	State/Province/Country	ZIP/Postal Code
Mililani	Hawaii	96789
Relationship(s):	<input checked="" type="checkbox"/> Executive Officer <input type="checkbox"/> Director <input type="checkbox"/> Promoter	
Clarification of Response (if Necessary)		

Last Name	First Name	Middle Name
Mirikitani	Richard	K.
Street Address 1	Street Address 2	
100 Kahelu Avenue, 2nd Floor		
City	State/Province/Country	ZIP/Postal Code
Mililani	Hawaii	96789
Relationship(s):	<input checked="" type="checkbox"/> Executive Officer <input type="checkbox"/> Director <input type="checkbox"/> Promoter	
Clarification of Response (if Necessary)		

Last Name	First Name	Middle Name
Yokoyama	Gary	
Street Address 1	Street Address 2	
100 Kahelu Avenue, 2nd Floor		
City	State/Province/Country	ZIP/Postal Code
Mililani	Hawaii	96789
Relationship(s):	<input checked="" type="checkbox"/> Executive Officer <input type="checkbox"/> Director <input type="checkbox"/> Promoter	
Clarification of Response (if Necessary)		

Last Name	First Name	Middle Name
Anzai	Richard	
Street Address 1	Street Address 2	
100 Kahelu Avenue, 2nd Floor		
City	State/Province/Country	ZIP/Postal Code
Mililani	Hawaii	96789
Relationship(s):	<input checked="" type="checkbox"/> Executive Officer <input type="checkbox"/> Director <input type="checkbox"/> Promoter	
Clarification of Response (if Necessary)		

**Signature Continuation Page**

**Signature and Submission**

The undersigned is the duly authorized representative of the issuer(s), identified in the field beside the individual's name below.

Issuer

Lanai Sustainability Research Investors, LLC

Name of Signer

Castle & Cooke Solar Management, LLC

Signature



Title

Vice President and Secretary

Date

10/15/2008

Issuer

Name of Signer

Signature

Title

Date

Issuer

Name of Signer

Signature

Title

Date

Issuer

Name of Signer

Signature

Title

Date