

### 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

210-1084	5-10	,
S E COMMISSION 0549	OMB APPROVAL OMB Number: 3235-007 Expires: August 31, 199 Estimated average burden hours per response. 16 A	6 8

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Name of Offering ( check if the	is is an amendment and name has changed, and inc	dicare change.) 16 7/1252
Convertible Note Due	e November 9. 2003	10 14/05
Filing Under (Check box(es) that ap	opiy): 🗆 Rule 504 🔲 Rule 505 🖾 Rule 506	☐ Section 4(6) ☐ ULOE
Type of Filing: S New Filing	☐ Amendment	
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested	about the issuer	Bed Bered
Name of Issuer ( check if this	is an amendment and name has changed, and indica	ate change.)
_FastShip. Inc.		MOA 5 5 5000 ft
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
123 Chestnut Street	Philadelphia, PA 19106	(215) 574-1770
Address of Principal Business Oper (if different from Executive Offices	ations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business		
Commercial*cargo vessel	design and operation. BEST AVAILA	BLE COPY PROCESSED
Type of Business Organization  El corporation	☐ limited partnership, already formed	DEC 2 7 2000
☐ business trust	☐ limited partnership, to be formed	THOMSON
Actual or Estimated Date of Incorp Jurisdiction of Incorporation or Or	month Year  poration or Organization:    O   Q   7	FINANCIAL  Actual   Estimated breviation for State: urisdiction)
GENERAL INSTRUCTIONS		
Federal: Who Must File: All issuers making a et seq. or 15 U.S.C. 77d(6).	n offering of securities in reliance on an exemption un	
the U.S. Securities and Exchange (	ed no later than 15 days after the first sale of securic commission (SEC) on the earlier of the date it is rec tte on which it is due, on the date it was mailed by Unite	ceived by the SEC at the address given below or,
Where to File: U.S. Securities and	Exchange Commission, 450 Fifth Street, N.W., Wa	shington, D.C. 20549.
signed must be photocopies of the	this notice must be filed with the SEC, one of which n manually signed copy or bear typed or printed sign.	alura.
ing, any changes thereto, the inform A and B. Part E and the Appendix		s need only report the name of the issuer and offer- from the information previously supplied in Parts
Filing Fee: There is no federal filing	ig fee.	

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.

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 IDENT	FICATION DATA		.5,
2. Enter the information requested for the following:			
• Each promoter of the issuer, if the issuer has been organized	d within the past five yes	ers;	
<ul> <li>Each beneficial owner having the power to vote or dispose, of securities of the issuer;</li> </ul>	or direct the vote or dispo	osition of, 10%	or more of a class of equi
Each executive officer and director of corporate issuers and officer and director of corporate issuers.	f corporate general and m	anaging partne	rs of partnership issuers; ar
• 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)		················	
Pederson, Einar			
Business or Residence Address (Number and Street, City, State, 2	Zip Code)		
123 Chestnut Street, Suite 204, Philadelphia, PA 191	06		
Check Box(es) that Apply:   Promoter   Beneficial Owner	EX Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)		· · · · · · · · · · · · · · · · · · ·	
Bullard II, Roland K.		•	
Business or Residence Address (Number and Street, City, State,	Zip Code)	<del></del>	
123 Chestnut Street, Suite 204, Philadelphia, PA 19	9106		
Check Box(es) that Apply:   Promoter   Beneficial Owner	Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)			
Chambers, Kathryn Riepe			
Business or Residence Address (Number and Street, City, State, 2	Zip Code)	<del></del>	
123 Chestnut Street, Suite 204, Philadelphia, PA	19106		•
Check Box(es) that Apply:     Promoter   Beneficial Owner	☐ Executive Officer	2 Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)			•
Giles, David L.			•
Business or Residence Address (Number and Street, City, State, 2 123 Chestnut Street, Suite 204, Philadelphia, PA 1910	- · ·		
Check Box(es) that Apply:   Promoter   Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)			
Colgan, Dennis			
Business or Residence Address (Number and Street, City, State, 2	Zip Code)		
123 Chestnut Street, Suite 204, Philadelphia, PA 19	106		
Check Box(es) that Apply: D Promoter D Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)			
Riverfront Development Corporation			
Business or Residence Address (Number and Street, City, State, 2	Zip Code)		
701 North Broadway, Glouchester City, NJ 08030			

☐ General and/or Check Box(es) that Apply: 

| Promoter ☑ Beneficial Owner ☐ Executive Officer ☐ Director Full Name (Last name first, if individual) Dunn, David E.

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

Palton Boggs LLP, 2550 M Street, NW, Washington, DC 20037

Managing Partner

			, e	*****B. 1	VECHMA	TON: AB	OUT OFF	ERING #		<u> </u>			
1. Has 1	he issuer s	old, or do	es the issu	er intend	to sell, to	non-accre	dited invest	tors in this	offering?		•••••	Yes . 🔲	NO II
			An	swer also i	n Appendi	x, Column	2, if Min	ig under U	LOE.				
2. What	is the min	imum inv	estment th	at will be	accepted f	rom any i	ndividual?					. <u>\$10</u> .	000
3. Does	the offerin	ng permit	joint own	ership of a	single uni	t?		•••••	•••••			Yes . 🗵	No
sion o to be list th	the inform or similar re listed is an he name of aler, you n	muneration associated the broke	on for solic d person o r or dealer	itation of or agent of r. If more	purchasers a broker o than five (	in connect or dealer re 5) persons	ion with sa egistered w to be liste	des of securith the SE d are asso	rities in the C and/or v	offering.	lf a person e or states	n	•
Full Name	(Last nam	e first, if	individual	)				-					<del></del>
N/A		•					-						
Business o	r Residence	Address	(Number	and Street	, City, Sta	te, Zip Co	ode)	<del></del> -			<del></del>		
Name of A	Associated	Broker or	Dealer										
States in \	Vhich Perso	on Listed	Has Solici	ited or Int	ends to So	licit Purch	asers						
(Check	"All States	" or chec	k individu	al States)						•••••		C Ali	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID	-
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N/A Business of	r Residenc	e Address	(Number	and Street	City Sta	te. Zin Co	ode)	<del></del>					
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Name of	Associated	Broker or	Dealer										
States in	Which Pers	on Listed	Has Solic	ited or Int	ends to So	licit Purch	asers			· · · · · · · · · · · · · · · · · · ·			
(Check	"All States	s" or chec	k individu	ial States)		· · · · · · · · · · · ·						□ All	State
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N/A													
Business (	or Residence	e Address	(Number	and Stree	t, City, St	ate, Zip C	ode)						
			,		. •							· .	
Name of	Associated	Broker o	r Dealer			•							
	Which Per						hasers			<del></del> _			Cirri
	"All State		•								,,,,,,,	□ Ali	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI] [MS]		
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[RI]	ISC 1	[SD]	ITNI		(UT)	IVT	[AV]	[AW]	[WV]	[WI].	[WY]	[PF	_

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

<ol> <li>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   and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.</li> </ol>		
Type of Security	Aggregate Offering Price	Amount Aiready Sold
Debt	s	\$
Equity		\$
□ Common □ Preferred		
Convertible Securities (including warrants)	<u>100,000</u>	<b>s</b> <sup>100</sup> ,000
Partnership Interests	S	2
Other (Specify)	s	\$
Total		
Answer also in Appendix, Column 3, if filing under ULOE.	V	
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
Accredited Investors		<u>\$_100,000</u>
Non-accredited Investors		<b>S</b>
Total (for filings under Rule 504 only)		S
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	Dollar Amount Sold
Rule 505		\$
Regulation A	. <u> </u>	\$
Rule 504		s
Total		\$
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		<u>\$</u>
Legal Fees		<u>\$ 1,000</u>
Accounting Fees.		<u> </u>
Engineering Fees		\$
Sales Commissions (specify finders' fees separately)		\$
Other Expenses (identify)		\$
Total		s

·\$.	C. OFFERING PRICE, NUMBER	R OF INVESTORS, EXPENSES AND US	E OF PROC	EEDS
tion I and	total expenses furnished in response to	ring price given in response to Part C - Que Part C - Question 4.a. This difference is the		\$99.000
		rocceds to the issuer used or proposed to b		399.000
used for e estimate a	ach of the purposes shown. If the amound check the box to the left of the estimat	nt for any purpose is not known, furnish a e. The total of the payments listed must equi in response to Part C - Question 4.b above	en. al	· · · · .
		•	Payments	
		•	Officers Directors, Affiliate	& Payments To
Calasia	· ·	×15	-	
Salarie	s and less		2	s
Purcha	ise, rental or leasing and installation of	machinery and equipment	S	0 \$
Constr	uction or leasing of plant buildings and	facilities	\$	
offerin	ition of other businesses (including the good that may be used in exchange for the	assets or securities of another		
Repay	ment of indebtedness	D	S	×3 599,000
Worki	ng capital		s	0 \$
Other	(specify):		s	c s
·				
			\$	
Colum	n Totals		<u>s</u>	<b>\$ \$99</b> 000
Total	Payments Listed (column totals added) .		<b>12</b>	<b>s</b> 99,000
		D. FEDERAL SIGNATURE	<del></del>	
The issues has		the undersigned duly authorized person. If	abio madion i	Stad under Dula 606 sha
ollowing sign	ature constitutes an undertaking by the is	the undersigned duty authorized person. It issues to furnish to the U.S. Securities and Euer to any non-accredited investor pursuan	xchange Con	nmission, upon written re-
ssuer (Print o	or Type)	Signature	<u> </u>	Date
FastShip,		Kertin Perse Clile		11/22/00
Name of Sign	er (Print or Type)	Title of Signer (Print or Type)		
Kathryn Ri	epe Chambers	Executive Vice President		

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

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1. Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions of such rule?	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.

Issuer (Print or Type)	Signature	Date
FastShip, Inc.	Horly Prepe Challer	11/22/00
Name (Print or Type)	Title (Print or Type)	
Kathryn Riepe Chambers	Executive 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.

1		2	3			4			
	to non-a	to sell coredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item1)	Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item!)	
Canas	Was	N		Number of Number of Accredited Non-Accredited					
State AL	Yes	No		Investors	Amount	Investors	Amount	Yes	No
AK									
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	to non-a	i to sell accredited is in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item1)	Type of investor and amount purchased in State (Part C-Item 2)				Disqualificati under State UI (if yes, attace explanation waiver grante (Part E-Item	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
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NE									
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NM			٨						
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