OMB APPROVAL

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

FORM D

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DATE RE	CEIVED

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

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Private Placements of Common Stock dated February 18, 2005 and February 23, 2005
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE Type of Filing: Amendment
A. BASIC IDENTIFICATION DATA 05046336
1. Enter the information requested about the issuer
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Gulfport Energy Corporation
Address of Executive Offices (Number and Street, City, State, Zip Code) 14313 North May Avenue, Suite 100, Oklahoma City, Oklahoma 73134 Telephone Number (Including Area Code) 405-848-8807
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 Oil and gas exploration and production company
Type of Business Organization
Actual or Estimated Date of Incorporation or Organization: Month Year
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 property 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 complete
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.

 $\bigwedge_{1 \text{ of } 9}$

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% of 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. Characteristic Characte									
Check Box(ex) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner									
Full Name (Last name first, if individual)									
Davidson, Charles E.									
Business or Residence Address (Number and Street, City, State, Zip Code)									
411 West Putnam Avenue, Greenwich, CT 06830									
Check Box(ex) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner									
Full Name (Last name first, if individual)									
Liddell, Mike									
Business or Residence Address (Number and Street, City, State, Zip Code)									
14313 North May Avenue, Suite 100, Oklahoma City, OK 73116									
Check Box(ex) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner									
Full Name (Last name first, if individual)									
Brooks, Robert E.									
Business or Residence Address (Number and Street, City, State, Zip Code)									
601 South Charles Street, Baton Rouge, LA 70802									
Check Box(ex) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner									
Full Name (Last name first, if individual)									
Houston, David									
Business or Residence Address (Number and Street, City, State, Zip Code)									
1120 N.W. 63rd, Suite 360, Oklahoma City, OK 73116									
Check Box(ex) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or									
Managing Partner									
Full Name (Last name first, if individual)									
Liddell, Mickey									
Business or Residence Address (Number and Street, City, State, Zip Code)									
3400 Riverside Drive, Suite 700, Burbank CA 91505									
Check Box(ex) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner									
Full Name (Last name first, if individual)									
Noles, Dan									
Business or Residence Address (Number and Street, City, State, Zip Code)									
2810 Cynthia Circle, Norman, OK 73134									
Check Box(ex) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner									
Full Name (Last name first, if individual)									
Moore, Michael G.									
Business or Residence Address (Number and Street, City, State, Zip Code)									
14313 North May Avenue, Suite 100, Oklahoma City, OK 73134									

Check Box(ex) that Apply:	☐ Promotèr	Beneficial Owner		Director	General and/or Managing Partner	
Full Name (Last name first, i	f individual)					
McNatt, Joel H.						
Business or Residence Addre	ess (Number a	and Street, City, State, Zip	Code)			
14313 North May Aver	nue, Suite 100,	, Oklahoma City, OK	73134			

					В	. INFORM	ATION AB	OUT OFFE	RING					
1.	Has the is	ssuer sold, o	r does the is:	suer intend to	sell, to non	-accredited is	nvestors in th	nis offering?		•••••			Yes	No ⊠
	Answer also in Appendix, Column 2, if filing under ULOE. What is the minimum investment that will be accepted from any individual?											_		
2.	What is th	he minimum	investment	that will be a	accepted from	n any individ	dual?					•••	\$N/A_	
3.	Does the offering permit joint ownership of a single unit?													
4.	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 (Las	st name first	, if individua	al)										
Busi	iness or Re	sidence Add	ress (N	Number and S	Street, City,	State, Zip Co	ode)							
Nam	ne of Assoc	riated Broker	r or Dealer	•		CAPE CONTRACTOR OF THE CONTRAC								
State	es in Which	h Person List	ted Has Soli	cited or Inter	nds to Solicit	Purchasers								
	(Check "A	All States" o	r check indi	vidual States)			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		·····			☐ All State	es
	AL	AK	AZ	AR	CA	СО	СТ	DE	DC	FL	GA	НІ	 ID	
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	МО	
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	ОН	OK	OR	PA	
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR	
Full	Name (Las	st name first	if individu	a1)	_									
1 411	Traine (Eac	st name mst	, ii iiidividdi	 .,										
Busi	iness or Re	sidence Add	ress (N	Number and S	Street, City,	State, Zip Co	ode)							
Nan	ne of Assoc	iated Broker	r or Dealer				<u>.</u>							
									•					
State	es in Which	h Person List	ted Has Soli	cited or Inter	ds to Solici	Purchasers			-	-				
	(Check "A	All States" o	r check indi	vidual States)					***************************************	,,,,,,		All State	es
	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	ОН	OK	OR	PA	
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR	
Full	Name (Las	st name first	, if individua	al)										
Busi	iness or Re	sidence Add	ress (N	Number and S	Street, City,	State, Zip Co	ode)						<u></u>	
Nan	ne of Assoc	ciated Broke	r or Dealer									<u> </u>		
State	es in Whicl	h Person Lis	ted Has Soli	cited or Inter	nds to Solici	t Purchasers	· ·							
	(Check "A	All States" o	r check indi	vidual States)		•••••••••••••	***************************************				•••	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	ОН	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 PRO	CEEDS	
1.	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 \(\square\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	Yes	No ⊠
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$0.00	\$0.00
	Equity	\$14,000,000.00	\$14,000,000.00
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$0.00	\$0.00
	Partnership Interests	\$0.00	\$0.00
	Other (Specify)	\$0.00	\$0.00
	Total	\$14,000,000.00	\$14,000,000.00
	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	Aggregate Dollar Amount of Purchases
	Accredited Investors	5	\$14,000,000
	Non-accredited Investors	N/A	N/A
	Total (for filings under Rule 504 only)	N/A	N/A
	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	N/A	N/A
	Regulation A	N/A	N/A
	Rule 504	N/A	N/A
	Total	N/A	N/A
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 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.		
	Transfer Agent's Fees		\$0.00
	Printing and Engraving Costs		\$0.00
	Legal Fees		\$40,000.00
	Accounting Fees		\$0.00
	Engineering Fees		\$0.00
	Sales Commissions (specify finders' fees separately)		\$0.00
	Other Expenses (identify)		\$0.00
	Total		\$0.00

	C. OFFERING	PRICE, NUMBER (OF INVESTORS, EXPE	NSES AND USE OF	PROCEEDS		
	b. Enter the difference between the aggregatotal expenses furnished in response to Part C to the issuer."			\$13,960,000			
5.	Indicate below the amount of the adjusted grothe purposes shown. If the amount for any puleft of the estimate. The total of the payments forth in response to Part C — Question 4.b al	rpose is not known, fu listed must equal the	mish an estimate and che	ck the box to the			
					Payments to Officers, Directors, & Affiliates		Payments to Others
	Salaries and fees			_			
	Purchase of real estate					_ 🗆	
	Purchase, rental or leasing and installation of	machinery and equipn	nent				
	Construction or leasing of plant buildings and	l facilities				_ 🗆	
	Acquisition of other businesses (including the used in exchange for the assets or securities of					_ 🗆	
	Repayment of indebtedness						
	Working capital	🗖]					
	Other (specify): Redeem outstanding sha corporate purposes, including but not t acquisitions and oil and gas exploration	o limited working co activities	apital, capital expendi	tures,		_ 🗆	\$13,960,000.0
	Column Totals						\$13,960,000.0
Fota	al Payments Listed (column totals added)				🛛	\$13	,960,000.00
			FEDERAL SIGNATUI				
und	issuer has duly caused this notice to be signed ertaking by the issuer to furnish to the U.S. Secredited investor pursuant to paragraph (b)(2) of	curities and Exchange	ly authorized person. If t Commission, upon writte	his notice is filed unden n request of its staff, t	er Rule 505, the fol the information furn	lowing s iished by	signature constitutes the issuer to any n
	er (Print or Type)	Signature		Date	3/4/05		
	Ifnort Energy Cornoration						
Gu	Ifport Energy Corporation ne of Signer (Print or Type)	Title of Signer	(Print or Type)				

- ATTENTION -

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

	E. STATE SIGNATURE								
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.	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.								
Issu	er (Print or Type) Date								
Gu	Ifport Energy Corporation 3/4/05								
Nar	ne of Signer (Print or Type) Title of Signer (Print or Type)								

Chief Executive Officer

Instruction:

Mike Liddell

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.

				APP	ENDIX	- Control of the cont		· · · · · · · · · · · · · · · · · · ·		
1	non-ac investor	to sell to ceredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of security and aggregate offering price Type of investor and offered in state amount purchased in State					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	
AL	Х		\$7,000,000.00	2	2,000,000 shares of Common Stock	. 0	\$0.00		X	
AK		X								
AZ		X								
AR		X								
CA		X								
СО		X								
CT		X								
DE		X								
DC		X			• 10					
FL		X								
GA		X								
HI		X								
ID		X								
IL		X								
IN		X						,		
IA		X								
KS		X								
KY		X			A Company of the Comp					
LA		X								
ME		X								
MD		X								
MA		X					_			
MI		X								
MN		X								
MS		X								
L	<u></u>	L			***			L		

			- Carlotte	APP	ENDIX					
1	2 3					4			5	
	Intend to sell to non-accredited investors in State (Part B-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)					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								
MT		X								
NE		X								
NV		X								
NH		X								
NJ		X								
NM		X								
NY	X		\$7,000,000	3	2,000,000 shares of Common Stock	0	\$0.00	- Annual	X	
NC		X								
ND		X								
ОН		X								
OK		X								
OR		X								
PA		X								
RI		X								
SC		X								
SD		X				-				
TN		X								
TX		X								
UT		X					w.,			
VT		X								
VA		X					, 			

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1	non-ac investo	to sell to eccredited rs in State 3-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)					5 lification ate ULOE, attach ation of granted) -Item 1)
State WA	Yes	No X		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
WV		X							
WI		X							
WV		X					<u> </u>		
PR		X							