FORM 4	
Check this box if no	

longer subject to Section 16. Form 4 or

Form 5 obligations may continue. See

Instruction 1(b).

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

N	OMB APPROVAL								
	OMB	3235							
	Number:	0287							
	Expires: Noven	nber 30 2011							
	Estimated avera								
	burden hours pe	er							
	response	0.5							

(9-02)

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Respon	nses)									
1. Name and Address of Reporting Person * 2. Issuer Name and Ticker or Trading   Langford Gary Richard Symbol   Nexxus Lighting, Inc. [NEXS]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) (1 NEXXUS LIGHT FLOYD SMITH	(Month/Day	3. Date of Earliest Transaction (Month/Day/Year) 12/21/2009					Officer (give title Other (specify below) below) Chief Financial Officer			
(S CHARLOTTE, N (City) (	4. If Amenda Filed(Month/I	Day/Year)				-	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any	cution Date, if Transaction Code		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	6. 7. Nature Ownership of Indirec Form: Beneficia Direct (D) Ownersh or Indirect (Instr. 4)	
Common Stock	12/21/2009		Code P	v	Amount	(A) or (D) A	Price \$3	Transaction(s) (Instr. 3 and 4) 1,000	(I) (Instr. 4)	(insu: 4)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

#### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	( <i>e.g.</i> , puts, calls, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.	5.			6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transaction	n N	umber	nber and Expiration Date		Amount of D		Derivative	Derivative	Ownership	of Indirect	
Security	or Exercise	(Month/Day/Year)	any	Code	of		(Month/Day/Year)		Underlying Se		Security	Securities	Form of	Beneficial	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	D	erivati	ive		Securities		(Instr. 5)	Beneficially	Derivative	Ownership	
	Derivative				Se	ecuriti	es			(Inst	r. 3 and		Owned	Security:	(Instr. 4)
	Security				A	cquire	d			4)			Following	Direct (D)	
					(A	A) or							Reported	or Indirect	
						ispose	ed						Transaction(s)	< / </td <td></td>	
						(D)							(Instr. 4)	(Instr. 4)	
						nstr. 3	-								
					4,	and 5	i)								
											Amount				
								Date	Expiration		or				
								Exercisable	Expiration Date	Title	Number				
								Excicisable	Date		of				
				Code V	()	A) (I	D)				Shares				

## **Reporting Owners**

Denerting Owner Name / Address	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
Langford Gary Richard NEXXUS LIGHTING, INC. 124 FLOYD SMITH DRIVE, SUITE 300 CHARLOTTE, NC 28262			Chief Financial Officer						

## **Signatures**

/s/ Gary Langford	12/22/2009
**Signature of Reporting Person	Date

# **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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