## 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

OMB APPROVAL					
OMB Number:	3235-0076				
Expires: April 30	), 2008				
Estimated average burden					
hours per respons	1600				

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Name of Offering ( check if this is an amendment and name has changed, and indicate change.)	1091540
Heritage Hedged Equity Fund, L.P.  Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)  Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DATA	25066055
1. Enter the information requested about the issuer	U PROCESSEL
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	DEC 0 7 2005
Heritage Hedged Equity Fund, L.P.  Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including AFHOMISON
6075 Poplar Ave., Ste. 702, Memphis, TN 38119	(901) 682-0883 <b>FINANCIAL</b>
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (frieluding Area Code)
Brief Description of Business  Investing and trading in securities.	Mess 2 7 2005
Type of Business Organization	
	lease specify):
Month Year	
Actual or Estimated Date of Incorporation or Organization: [O.6] [O.6] [O.6] Actual [O.6] Estim Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D of 77d(6).	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering, and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given be 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. 205	549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.	y signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only report thereto, the information requested in Part C, and any material changes from the information previously supplied 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 st ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the S are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for accompany this form. This notice shall be filed in the appropriate states in accordance with state law, this notice and must be completed.	ecurities Administrator in each state where sales the exemption, a fee in the proper amount shall
ATTENTION	
Failure to file notice in the appropriate states will not result in a loss of the federal ex appropriate federal notice will not result in a loss of an available state exemption unlessing of a federal notice.	

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6.BASIC DENTIFICATION DATA	
2. Enter the information requested for the following:	
<ul> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> </ul>	
• 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	ie issuer.
<ul> <li>Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and</li> </ul>	
• Each general and managing partner of partnership issuers,	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
Centennial Partners, LLC	
Full Name (Last name first, if individual)	
6075 Poplar, Ste. 702, Memphis, TN 38119 Business or Residence Address (Number and Street, City, State, Zip Code)	
Business, or Residence Address (realinus and Street, City, State, 2th Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
Full Name (Last name first, if individual)	
6075 Poplar, Ste. 702, Memphis, TN 38119	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
Wade, Joe S. Full Name (Last name first, if individual)	
6075 Poplar Ave., Ste. 702, Memphis, TN 38119	
Business or Residence Address (Number and Street, City, State, Zip Code)	**************************************
Check Box(es) that Apply: Promoter  Beneficial Owner  Executive Officer  Director  General and/or  Managing Partner	
Bruce, Marvin E Full Name (Last name first, if individual)	
3260 Habersham Road, Atlanta, GA 30305	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Managing Partner Executive Officer Director General and/or Managing Partner D. Canale & Co.	
Full Name (Last name first, if individual)	
One Commerce Square, Ste. 2100, Memphis, TN 38103	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	
Alternative Investment Strategies, L.P. Full Name (Last name first, if individual)	
6075 Poplar Ave., Ste. 702, Memphis, TN 38119	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or	
Wilson Capital Partners, LLC	
Full Name (Last name first, if individual)	
8700 Trail Lake Drive West, Suite 300, Memphis, TN 38125	
Business or Residence Address (Number and Street, City, State, Zip Code)	•
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)	

				•	В. 1	NFORMAT	ION ABO	ut offer	RING				
<b></b>	······································			_4.								Yes	No
1.	Has the	e issuer sol	d, or does (	the issuer i	ntend to se	ell, to non-a	accredited	investors	in this offe	ering?	••••••	X	
				Ans	wer also i	n Appendix	, Column	2, if filing	under UL	OE.			
2.	What i	s the minin	num investi	ment that v	vill be acce	epted from	any indiv	idual?	4			\$ <u>1.0</u>	00.000
	t											Yes	No
3.	Does th	ne offering	permit joir	it ownershi	ip of a sing	gle unit?	**********	•••••••		•••••••	••••		
4.	commi If a per or state	ssion or sim son to be lists, list the n	nilar remuno sted is an as ame of the l	eration for s sociated pe proker or d	solicitation erson or ag ealer. If m	i of purchas ent of a broi	ers in con ker or deal e (5) pers	nection wit ler register ons to be li	h sales of s ed with the sted are as:	rectly or incecurities in SEC and/or sociated per	the offering r with a state	;. e	
Ful	Name	(Last name	first, if ind	lividual)			-						
<u>_Tr</u>	ading 9	<u> Services C</u>	Group, Inc	).									
						ity, State, 2	Zip Code)						
_			Ste. 700, roker or De		s, IN 38	1119							
Nan	ile of As	SOCIAICO D	roker of De	aitr									
Stat	es in W	hich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchaser	·s		· · · · · · · · · · · · · · · · · · ·			
	(Check	"All State	s" or check	individual	States)		••••		••••••			A1	Il States
	AL IL MT RI	IN	IA <xnv< td=""><td>XX AR X KS NH XX TN X</td><td>KY NJ</td><td>CO LA NM ; UT</td><td>CT ME (X NY) VT</td><td>XXDE MD NC VA</td><td>DC MA ND XXWA</td><td>XXFL &gt; MI XXOH WV</td><td>(X GA MN X OK WI</td><td></td><td>ID MO XXPA PR</td></xnv<>	XX AR X KS NH XX TN X	KY NJ	CO LA NM ; UT	CT ME (X NY) VT	XXDE MD NC VA	DC MA ND XXWA	XXFL > MI XXOH WV	(X GA MN X OK WI		ID MO XXPA PR
Full	Name (	Last name	first, if ind	ividual)			<del></del>						
			ment Co										
			-			City, State,	•	)					
			<u>Blvd., Su</u> roker or De		<u>Charlott</u>	e, NC 28	3209						
Ivan	16 01 WZ	Socialed B	roker or De	aler									
Stat	es in Wi	nich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchaser	·\$					
	(Check	"All States	s" or check	individual	States)	************		,, <b>,,,,</b> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	**			□ Al	Il 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		XXNC	ND	OH	OK]	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY)	PR
Full	Name (	Last name	first, if ind	ividual)	· · · · · · · · · · · · · · · · · · ·								
					·								
Bus	iness of	Residence	: Address (1	Number an	d Street, C	City, State, I	Zip Code)	•					
Nam	ic of As	sociated Br	oker or De	aler								w	
State	es in Wi	nich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchaser	s				<del></del>	
	(Check	"All States	s" or check	individual	States)	·····	***************************************	,	••••••	••••		☐ Ai	I States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

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

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 and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	5			
	Type of Security	Aggregate Offering Pri		Am	ount Already Sold
	Debt	s N/A		\$	N/A
	Equity			\$	N/A
	Common Preferred			-	
	Convertible Securities (including warrants)	\$ N/A		\$	N/A
	Partnership Interests		00*	\$118	3.433.399.75
	Other (Specify)	-		\$	N/A
	Total		 100*		
	Answer also in Appendix, Column 3, if filing under ULOE.			وراساس	<u>, , , , , , , , , , , , , , , , , , , </u>
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		Do	Aggregate lar Amount
		Investors		_	Purchases
	Accredited Investors				<u>8,433,399</u> .75
	Non-accredited Investors			\$	<u>219,000</u> .00
	Total (for filings under Rule 504 only)	N/A		S	N/A
3.	Answer also in Appendix, Column 4, if filling under ULOE.  If this filling 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		Do	llar Amount S <b>o</b> ld
	Rule 505	N/A		\$	<u>N/A</u>
	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
	Printing and Engraving Costs		$\boxtimes$	\$	5,000
	Legal Fees	******	$\boxtimes$	\$	50,000
	Accounting Fees	••••••	$\boxtimes$	\$	5,000
	Engineering Fees			\$	0
	Sales Commissions (specify finders' fees separately)			\$	0
	Other Expenses (identify)		$\boxtimes$	\$	10,000
	Total		$\square$	\$	70,000

\* The offering evidenced by this Form D does not have a maximum offering amount. The stated amount represents the undersigned's best estimate of an aggregate offering price.

	C. OFFERING PRICE, NUMBE	R OF INVE	STORS, EXPE	ENSES AND USE OF	PROCE	EDS	•	
	b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C — Qu proceeds to the issuer."	sestion 4.a.	This difference	e is the "adjusted gro	ss 		\$ <u>249</u>	,930,000
5.	Indicate below the amount of the adjusted gross proceeach of the purposes shown. If the amount for any peneck the box to the left of the estimate. The total of the proceeds to the issuer set forth in response to Part C	purpose is a e payments.	ot known, fui listed must eq	rnish an estimate ar	ıd			
					O Dire Afi	ments to fficers, ectors, & iliates	1	yments to Others
	Salaries and fees				🔲 💲	0	<b>[]</b> \$_	0
	Purchase of real estate				🛮 💲	0	□ \$_	00
	Purchase, rental or leasing and installation of machinand equipment	nery			🔲 \$	0	\$_	0
	Construction or leasing of plant buildings and facilit	ies			🔲 💲	0	□ <b>\$</b> _	0
	Acquisition of other businesses (including the value offering that may be used in exchange for the assets issuer pursuant to a merger)	or securities	of another		👕 \$	0	\$_	0
	Repayment of indebtedness				. 🔲 S	0	□ <b>s</b> _	0
	Working capital	******			. 🔲 🖫	0	□\$_	0
	Other (specify): 100% of proceeds will be allocated	ated to sec	curities of su	ubadvisors	. 🗆 <b>s</b>	0	<u> </u>	0
	through Centennial Absolute Fund, Ltd., a C	ayman Isla	ands exemp	ted company				
			_		. 🗆 \$	0	<b>∑</b> \$24	49,930,000
	Column Totals	· · · · · · · · · · · · · · · · · · ·		***************************************	🔲 💲	0	<b>∑\$2</b>	49,930,00
	Total Payments Listed (column totals added)	(1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		(4111		☐ \$ <u>24</u>	9,930,0	0 <u>00</u> 0
, · . ·		D. FEDER	AL SIGNAT	URE -			: ; ;	
sign	issuer has duly caused this notice to be signed by the un ature constitutes an undertaking by the issuer to furnis nformation furnished by the issuer to any non-accred	dersigned d	uly authorized . Securities a	d person. If this noti nd Exchange Comm	ce is file ission, u	i under Ru pon writter	e 505, t	he following
Issu	er (Print or Type)	ignature			Date			
Her	itage Hedged Equity Fund, L.P.	1.	1-> 5			11/1	6/0	5
		itle of Sign	er (Print or T	Ms. Tina Ba	dciong			
Bv:	Centennial Partners, LLC, its general	Chief Finar	ncial Officer	of Centennial Pa	rtners,	LLC, its g	eneral	partner

- ATTENTION -

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