FORM D

MANUALLY

EXECUTED

## U.S. SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D

04/043

OMB APPROVAL

OMB NUMBER: 3235-0076 Expires: April 30, 2008 Estimated average burden hours per response . . 16.00

## SEC USE ONLY

Prefix

DATE RECEIVED

| Serial

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.)									
WIMBLEDON FUND L.P. — ABSOLUTE RETURN FUND SERIES									
Filing Under (Check box(cs) that apply):	Rule 504 Rule 505	Rule 506 Section 4(6	) UPDE						
Type of Filing: New Filing	Type of Filing: New Filing Amendment Rule 303 Rule 306 Section 4(0)								
	A. BASIC IDENTI	FICATION DATA							
1. Enter the information requested about the issu	uer		1. JUL 10 2002						
Name of Issuer ( check if this is an amendme	ent and name has changed, and indicate	change.)							
WIMBLEDON FUND L.P. — ABSO	OLUTE RETURN FUND SEI	RIES	186 (101)						
Address of Executive Offices		(Number and Street, City, State,							
c/o Weston Capital Asset Management LLC, 26	64 Riverside Avenue, Westport CT 068		(Including Area Code) (203) 227-5533						
Address of Principal Business Operations (if different from Executive Offices)	PROCESSED 4	(Number and Street, City, State,	Zip Code) Telephone Number (Including Area Code)						
(if different from Excentive Offices)	" HOOFOOFD -		(mendanig rica code)						
	11 11 2 E 2007		( )						
Brief Description of Business	30L & 3 200/								
	7 THOMSON								
Securities Investment	FINANCIAL	07072620							
Type of Business Organization		<u>_</u>							
corporation	limited partnership, already formed	other (please specify):							
business trust	limited partnership, to be formed								
	Month Year								
Actual or Estimated Date of Incorporation or Organization: [0 4] [0 7] Actual Estimated									
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:  (D][E]  CN for Canada; FN for other foreign jurisdiction)									
CENERAL INSTRUCTIONS									

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

Filing Fee: There is no federal filing 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.

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.

		A. BASIC IDEN	TIFICATION 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 benef	icial owner having th	e power to vote or dispose, or di	rect the vote or disposition of, 1	0% or more of a class of e	equity securities of the issuer;				
	_	tor of corporate issuers and of co							
		•	riporate general and managing p	artifiers of partifership issu	icis, and				
• Each general and managing partner of partnership issuers.									
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General Partner				
Full Name (Last name first, if	individual)								
Weston Capital Asset Manage									
Business or Residence Addres	s (Number and Stree	et, City, State, Zip Code)							
264 Riverside Avenue, Westpo	ort, CT 06880								
Check Box(es) that Apply:	Promoter	Beneficial Owner	Chief Executive Officer of General Pa	Director artner of General Pa	Managing Member				
Full Name (Last name first, if	individual)				····				
Hallac, Albert				<u> </u>					
Business or Residence Address	s (Number and Stree	et, City, State, Zip Code)		,	•				
c/o Weston Capital Asset Man	agement LLC, 264 R	iverside Avenue, Westport, CT	06880						
Check Box(es) that Apply;	Promoter	Beneficial Owner	Principal	Director	General and/or Managing Partner				
Full Name (Last name first, if	individual)	<del></del>							
Alper, Eric									
Business or Residence Address	s (Number and Stree	et, City, State, Zip Code)							
c/o Weston Capital Asset Man	agement LLC, 264 R	iverside Avenue, Westport, CT	06880						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Principal	Director	General and/or Managing Partner				
Full Name (Last name first, if	individual)	<u></u>		·					
Business or Residence Address	s (Number and Stree	et, City, State, Zip Code)							
Check Box(es) that Apply:	Promoter	Beneficial Owner	Principal	Director	General and/or Managing Partner				
Full Name (Last name first, if	individual)								
Business or Residence Address	s (Number and Stree	et, City, State, Zip Code)							
Check Box(es) that Apply:	Promoter	Beneficial Owner	Principal	Director	General and/or Managing Partner				
Business or Residence Address	s (Number and Stree	et, City, State, Zip Code)			<u></u>				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Principal	Director	General and/or				
Full Name (Last name first, if	individual)				Managing Partner				
Business or Residence Address (Number and Street, City, State, Zip Code)									

					B. II	NFORM	ATION	ABOUT	OFFER	UNG				
1.	Has the	issuer sold	, or does the	issuer inte	end to sell, t	o non-accre	dited inves	stors in this	offering?	******				Yes No ⊠
	Answer also in Appendix, Column 2, if filing under ULOE.													
2.	What is the minimum investment that will be accepted from any individual?								*\$ <u>250,000</u>					
	*Minim	um may be	waived by	the Genera	l Partner in	its discretio	on							
3.	Done the	attarina n	ermit joint o	menarchin.	ot's single :	mit?								Yes No
4.			on requested											
	solicitati	on of pure	hasers in coi	nnection w	ith sales of	securities in	n the offeri	ng. If a per:	son to be lis	sted is an as	sociated pe	rson or age	nt of a brok	er or
Full Nam	persons	of such a b	roker or dea											None
	(2001110		,											
Business	or Resider	ice Addres	s (Number a	ind Street,	City, State,	Zip Code)								
Mame of	Accoriates	l Broker or	Dealer											
(varice of	71350C141CC	i Diokei oi	Dealer											
States in	Which Per	son Listed	Has Solicite	ed or Intend	ds to Solicit	Purchasers	i							
(Check	"All States	or check	individual S	States)	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	All States
	[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[M] [M] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]	
Coll Man	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
ruii Nam	e (Last nai	me urst, it	individual)											
Business	or Resider	nce Addres	s (Number a	ind Street,	City, State,	Zip Code)								
		113 1	15. 1									<u> </u>		
Name of	Associated	l Broker or	Dealer											
States in	Which Per	son Listed	Has Solicite	d or Intend	ds to Solicit	Purchasers				· · · ·				
(Check			individual S											All States
	[AL] [IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	(FL) [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]	
	[MT] [RI]	[NE] [SC]	[NV] [SD]	[NII] [NT]	[NJ} [TX]	[NM] {UT)	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]	
Full Nam	e (Last nai	me first, if	individual)											
Business or Residence Address (Number and Street, City, State, Zip Code)														
Name of Associated Broker or Dealer														
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers														
(Check	(Check "All States" or check individual States)								All States					
	[AL] [IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[III] [MS]	[ID] [MO]	
	[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	(NM) [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]	

TN] [TX] [UT] [VT] [VA] [WA] [WV] [W (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	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	<del></del> ,	
	exchange offering, check this box and indicate in the columns below the amounts of		
	the securities offered for exchange and already exchanged		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$_	\$
	Equity	\$	\$
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Limited Partnership Interests*	\$ <u>250,000,000</u>	\$ <u>16,000,000</u>
	Total*	\$ <u>250,000,000</u>	\$ <u>16,000,000</u>
	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	investors 4	\$16,000,000
	Non-accredited Investors		\$ NA
	Total (for filings under Rule 504 only)	N/A	\$ <u>IVA</u>
	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	Security	\$
	Regulation A		\$
	Rule 504		\$
	Total	<del></del>	\$
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.		<u> </u>
	Transfer Agent's Fees		\$ 0
	Printing and Engraving Costs		\$ 0
	Legal Fees		\$_30,000
	Accounting Fees.		\$ 0
	Engineering Fees		\$ 0
	Sales Commissions (specify finders' fees separately)		\$ 0
	Other Expenses (identify) Miscellaneous (blue, sky fees, duplicating, courier, etc.)		\$ 10,000
	Total		\$ <u>10,000</u> \$ 40,000
	1 Otal		Φ <u>+υ,υυυ</u>

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

<sup>\*</sup> This is a continuous offering. Therefore, the aggregate offering price could be greater than or less than this amount.

	C. OFFERING PRICE, NUMBE	R OF INVESTORS, EXPENSES AND USE O	F PROCEEDS	
5.	is the "adjusted gross proceeds to the issuer.". Indicate below the amount of the adjusted grobe used for each of the purposes shown. If the an estimate and check the box to the left of the	sponse to Part C - Question 4.a. This difference ass proceeds to the issuer used or proposed to a amount for any purpose is not known, furnish		*\$ <u>249,960,000</u>
			Payments to Officers, Directors, & Affiliates	Payments To Others
	Salaries and fees		□ \$	□ \$
	Purchase of real estate		□ \$	□ \$
		machinery and equipment	<b>\$</b>	□ \$
	Construction or leasing of plant buildings and	facilities	□ \$	□ \$
	Repayment of indebtedness	securities of another issuer pursuant to a	□ \$ □ \$ □ \$	□ \$ □ \$ □ \$
		uer's Confidential Private Placement	□ \$	\$249,960,000     \$249,960,000
	Total Payments Listed (column totals added).			49,960,000
		D. FEDERAL SIGNATURE		
following	ng signature constitutes an undertaking by the	y the undersigned duly authorized person. If the issuer to furnish to the U.S. Securities and Euer to any non-accredited investor pursuant to page	Exchange Commi	ssion, upon written
Issuer (Pr	nt or Type)	Signature	Date	·
	LEDON FUND L.P. — ABSOLUTE RN FUND SERIES	Ein alper	Ju	<u>  17,</u> 2007
Name of S	Signer (Print or Type)	Title of Signer (Print or Type)		
Eric Alp	per	Chief Financial Officer of Weston Capital Ass of issuer	et Management L	LC, general partner

\* See asterisked comment on p.4.

END

ATTENTION

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