1363349

FORM D

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

PROCESSED

AUG 1 0 2007

THOMSON

FORM D

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

	SEC USE	ONLY	
Prefix		Scrial	
	DATE R	ECEIVED	

FINANCIAL		TION 4(6), AND/OR TED OFFERING EXEMPTION	DATE	RECEIVED
Name of Offering (check if the Private Placement of Limited Partnersh		ne has changed, and indicate change.) tage Offshore Fund, L.P.	A PRINCIPAL PRIN	
Filing Under (Check box(es) that apply): 🗌 Rule 504 🔲 Rule :	505 🗵 Rule 506 🔲 Section 4(6)	ULOE	CONTRACT OF STREET
Type of Filing: New Filing	⊠ Amendment		AUG .	A LE
		BASIC IDENTIFICATION DATA		Q 2007
1. Enter the information requested about			- <u>[</u>	
Name of Issuer		e has changed, and indicate change.)	[c] 186	550
Address of Executive Offices c/o Meritage Capital, L.P., 114 We		1300, Austin, Texas 78701		ng Area Code) 2) 637-9700
Address of Principal Business Operatio (if different from Executive Offices)	ns (No. and Street, City,	State, Zip Code) Telephone Number	er (Including Area Code)	
Brief Description of Business Investment Partnership				
Type of Business Organization	_			
corporation	\boxtimes	limited partnership, already formed		other (please specify):
business trust		limited partnership, to be formed		
Actual or Estimated Date of Incorporation or Organ	_	Month 0 2 J.S. Postal Service abbreviation for State: FN	Year) 5 ⊠ Actuai	☐ Estimated
various of moorporation of organ		FN for other foreign jurisdiction)		
GENERAL INSTRUCTIONS	• • • • • • • • • • • • • • • • • • • •	· · · · · · · · · · · · · · · · · · ·		
Federal: Who Must File: All issuers making an offering of sec	curities 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 received by the SEC at the address given below or, it	15 days after the first sale of securif f received at that address after the day	ties in the offering. A notice is deemed filed with the U.S. So te on which it is due, on the date it was mailed by United State	ecurities and Exchange Commission (SE is registered or certified mail to that addr	(C) on the earlier of the date it is ess.
Where To File: U.S. Securities and Exchange Comm				
signatures.		h must be manually signed. Any copies not manually signed a		
Information Required: A new filing must contain a changes from the information previously supplied in	Il information requested. Amendm Parts A and B. Part E and the Appe	ents need only report the name of the issuer and offering, an endix need not be filed with the SEC.	y changes thereto, the information requ	ested in Part C, and any material
Filing Fee: There is no federal filing fee				

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file

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.

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.

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 control number.

SEC 1972 (2-97)



A. BASIC IDENT	IFICATION DATA		
2. Enter the information requested for the following:			
Each promoter of the issuer, if the issuer has been organized within the Each beneficial owner having the power to vote or dispose, or direct issuer; Each executive officer and director of corporate issuers and of corpor	the vote or disposition of, 10% or		
Each general and managing partner of partnership issuers.	□ F	☐ Director	☑ General and/or
Check Box(es) that Apply: Promoter Beneficial Owner	☐ Executive Officer	□ Director	Managing Partner
Full Name (Last name first, if individual) Meritage Capital, L.P., General Partner			
Business or Residence Address (Number and Street, City, State, Zip Code 114 West Seventh Street, Suite 1300, Austin, Texas 78701)		
Check Box(es) that Apply: Promoter Beneficial Owner	☐ Executive Officer	Director	☑ General and/or Managing Partner
Full Name (Last name first, if individual) MFI Capital, LLC, General Partner of the General Partner			
Business or Residence Address (Number and Street, City, State, Zip Code 248 Addie Roy Rd, Suite C200, Austin, Texas 78746)		
Check Box(es) that Apply: Promoter Beneficial Owner	☐Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) St. James's Park Holding, LLC, General Partner of the General Partner			
Business or Residence Address (Number and Street, City, State, Zip Code 3801 N. Capital of Tx Hwy., E240, #62, Austin, Texas 78746)		
Check Box(es) that Apply: Promoter Beneficial Owner	⊠Executive Officer	☐ Director	☑General and/or Managing Partner
Full Name (Last name first, if individual) Meredith, Thomas J., Chief Executive Officer of MFI Capital, LLC			
Business or Residence Address (Number and Street, City, State, Zip Code 114 West Seventh Street, Suite 1300, Austin, Texas 78701)		
Check Box(es) that Apply: Promoter Beneficial Owner	⊠Executive Officer	☐ Director	☑General and/or Managing Partner
Full Name (Last name first, if individual) Smith, Alex C., Manager of St. James's Park Holding, LLC			-
Business or Residence Address (Number and Street, City, State, Zip Code 114 West Seventh Street, Suite 1300, Austin, Texas 78701)		
Check Box(es) that Apply:	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)			
Business or Residence Address (Number and Street, City, State, Zip Code)		A. 10 PM
Check Box(es) that Apply: Promoter Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)			
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
Full Name (Last name first, if individual)			
Business or Residence Address (Number and Street, City, State, Zip Code	*)		

Has the issuer sold or does the issuer intend to sell, to non-according investors in this offering?						B	INFC)RMA	ΓΙΟΝ A	NBOUT	OFF	RING			
3. Does the offering permit joint ownership of a single unit: 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar renumeration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed as a associated person or agent of a broken or dealer registered with the SEC andor with a state or states, list the name of the broker or dealer or registered with the SEC andor 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 or or chall from the broker or dealer or 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 or the property of the information for that broker or dealer or the property of the information for that broker or dealer or the property of the information for that broker or dealer or the property of the information for that broker or dealer or the property of the information for that broker or dealer or the property of the information for that broker or dealer. Full Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check 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 "All States" or check individual States). [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [MS] [MD] [MA] [MI] [MN] [MN] [MN] [MN] [MN] [MN] [MN] [MN	1. Has	the issuer	sold or c	loes the Answ	issuer ir er also i	ntend to n Appen	sell, to r	non-accr lumn 2,	edited ir if filing	vestors under U	in this c LOE.	ffering?			
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 as 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. (Fmore than five (6) persons to be listed are associated persons or agent of a broker or dealer for that broker or dealer only. Full Name (Last name 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 "All States" or check individual States). [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [ID] [ID] [IN] [IN] [IN] [IN] [IN] [IN] [IN] [IN	2. Wha	What is the minimum investment that will be accepted from any individual?												\$ <u>660.0</u>	000.00
4. Enter the information requested for each person who has been or will be paid or given, directly or indifferely, 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. Bits the name of the broker or dealer. If more than five (3) 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 (Last name 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 "All States" or check individual 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] [NI] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR] Full Name (Last name 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 "All States" or check individual 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] [IN] [NE] [NV] [NH] [NI] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR] Full Name (Last name 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 "All States" or check individual States). [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IN] [IN] [IN] [IN] [IN] [I	3. Does	3. Does the offering permit joint ownership of a single unit:													
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States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Business	or Reside	nce Add	ress (Nu	mber an	d Street	, City, S	tate, Zip	Code)		<u>.</u> .		- +		
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States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Business	or Reside	nce Add	ress (Nu	mber ar	nd Street	, City, S	State, Zij	p Code)					<u>-, -</u>	
Check "All States" or check individual States	Name of	Associate	d Broke	r or Dea	ler						·	-			. ·
[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] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR] Full Name (Last name 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 "All States" or check individual States)												-	<u></u>		All States
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Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Full Nan	ne (Last na	ıme first	, if indiv	ridual)						_	_			· **
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Business	or Reside	nce Add	lress (N	ımber aı	nd Stree	t, City, S	State, Zi	p Code)						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(Check "All States" or check individual 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] [OH] [OK] [OR] [PA]	Name of	Associate	d Broke	r or Dea	ler										<u></u>
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(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 m and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
	Type of Security		Aggreg	ate	Am	ount Already
	Type of became		ffering l			Sold
	Debt	\$	0		\$	0
	Equity	\$	0		\$	0
		Ψ			Ψ	
	☐ Common ☐ Preferred				•	
	Convertible Securities (including warrants)	\$	0		\$	0
	Partnership Interests	\$ <u>32</u>	,309,53	7.21		309,537.21
	Other (Specify)	\$	0		. \$	0
	Total	\$ <u>32</u>	<u>,309,53</u>	7.21	\$ <u>32</u>	309,537.21
	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 the answer is "none" or "zero."					
			Number Investor		Do	Aggregate Illar Amount f Purchases
	Accredited Investors		5			309,537.21
	Non-accredited Investors		0		\$ <u></u>	0
			N/A		\$ \$	N/A
	Total (for filings under Rule 504 only)		IN/A		₽	IV/A
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.		Time	, f	De	Has Amount
	Type of offering		Type of Securi		DC	ollar 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 secuthis offering. Exclude amounts relating solely to organization expenses of the issuer. The informable given as subject to future contingencies. If the amount of an expenditure is not known, furnish estimate and check the box to the left of the estimate.	ation n				
	Transfer Agent's Fees	*******			\$	0
	Printing and Engraving Costs	•••••			\$	0
	Legal Fees				\$	0
	Accounting Fees.				\$	0
	Engineering Fees.				<u>\$</u>	0
					· · · · ·	0
	Sales Commissions (specify finder's fees separately)				*—	
	Other Expenses (identify)				ŷ	0
	Total	••••••			a	0

	C. OFFERING PRICE, NU	JMBER OF INVESTORS, EXPENSES AN	D USE	OF PR	OCEEDS	6
	and total expenses furnished in response to P.	e offering price given in response to Part C-Questio art C-Question 4.a. This difference is the "adjusted	gross			\$ <u>32,309,537.21</u>
5.	each of the purposes shown. If the amount for	oss proceeds to the issuer used or proposed to be us or any purpose is not known, furnish an estimate and total of the payments listed must equal the adjusted Part C-Question 4.b. above.	d			
				O: Dire	ments to fficers, ectors, & filiates	Payments To Others
	Salaries and fees			\$		\$
	Purchase of real estate			\$		\$
	Purchase, rental or leasing and installar	ion of machinery and equipment		\$		\$
	Construction or leasing of plant building	gs and facilities		\$		\$
	Acquisition of other businesses (included may be used in exchange for the assets	ing the value of securities involved in this offering or securities of another issuer pursuant to a merger	that)□	\$		\$
	Repayment of indebtedness			\$		\$
	Working capital			\$		\$
	Other (specify) (investments)			\$	<u> </u>	\$ <u>32,309,537.21</u>
	Column Totals			\$	×	\$ <u>32,309,537.21</u>
	Total Payments Listed (column totals a	added)			\$ <u>32,3</u>	09,537.21
		D. FEDERAL SIGNATURE			<u></u>	
sign	ture constitutes an undertaking by the issuer to	by the undersigned duly authorized person. If this of furnish to the U.S. Securities and Exchange Commedited investor pursuant to paragraph (b) (2) of Rule	nission, 1	filed un upon wr	der Rule 50 itten reques	05, the following st of its staff, the
Iss	uer (Print or Type)	alice Site	Date		.,	
	ignia Vintage Offshore Fund, L.P.	·	August 6	, 2007		
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)				
Al	ex C. Smith	Manager of St. James's Park Holding LLC, General Partner	al Partne	r of Mei	itage Capit	al, L.P., General

ATTENTION

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

		E. STATE SIGNATURE					
1.		resently subject to any of the disqualification prov		Yes □	No ⊠		
	See Appendi	x, Column 5, for state response.					
2.	The undersigned issuer hereby undertakes to (17 CFR 239.500) at such times as required	o furnish to any state administrator of any state in by state law.	which this notice is	filed, a notice	on Form D		
3.	The undersigned issuer hereby undertakes to offerees.	o furnish to the state administrators, upon written	request, information	furnished by t	he issuer to		
4.	The undersigned issuer represents that the is Offering Exemption (ULOE) of the state in exemption has the burden of establishing th	ssuer is familiar with the conditions that must be s which this notice is filed and understands that the at these conditions have been satisfied.	satisfied to be entitled issuer claiming the	d to the Unifor availability of	m Limited this		
	e issuer has read this notification and knows t dersigned duly authorized person.	he contents to be true and has duly caused this no	tice to be signed on i	ts behalf by th	e		
Iss	uer (Print or Type)	Signature	Date				
Ins	Insignia Vintage Offshore Fund, L.P. August 6, 2007						
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)					
Al	Manager of St. James's Park Holding LLC, General Partner of Meritage Capital, L.P., General Partner						

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.

APPENDIX

1		2	3	—	4	- 0		5			
	accredited St (Pa	sell to non- investors in tate rt B- m 1)	Type of security and aggregate offering price offered in state (Part C- Item 1)	Туре с	Type of investor and amount purchased in State (Part C-Item 2)						
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	-			
AL											
AK											
AZ											

CA		No	Limited Partnership Interests \$1,892,911.00	1	\$1,892,911.00	0	\$0	No			
со											
CT											
DE											
DC											
FL											
GA											
ні											
ID											
IL											
IN											
IA											
KS											
KY											
LA											
ME											
MD											
MA				· · · · · · · · · · · · · · · · · · ·							
MI						<u> </u>					

APPENDIX

1		2	3	<u> </u>	4			5			
	accredited Si (Pa	sell to non- investors in tate art B- m 1)	Type of security and aggregate offering price offered in state (Part C- Item 1)	Туре о	Type of investor and amount purchased in State (Part C-Item 2)						
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount				
MN	165	140	Interests	mvestors	711101111						
MS					<u> </u>						
MO					· · · · · · · · · · · · · · · · · · ·						
MT		<u> </u>									
NE											
NV											
NH											
NJ											
NM											
NY											
NC											
ND											
ОН											
ок											
OR			Y instand			ļ <u> </u>					
PA		No	Limited Partnership Interests \$2,000,000.00	1	\$2,000,000.00	0	\$0	No			
RI						<u> </u>					
SC											
SD											
TN	<u> </u>	ļ		ļ							
TX		No	Limited Partnership Interests \$28,416,626.21	3	\$28,416,626.21	0	\$0	No			
UT								<u> </u>			

APPENDIX

1		2	3		4					
	accredited S (Pa	sell to non- investors in tate art B- m 1)	Type of security and aggregate offering price offered in state (Part C- Item 1)	Туре с	Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount			
VT										
VA										
WA										
wv										
WI										
WY										
PR										

END