FORM D

# UNITED STATES

SECURITIES AND EXCHANGE COMMISSION

SEC Mail Processing Section

Washington, D.C. 20549

FORM D

1256004

OMB NUMBER: 3235-0076 EXPIRES: APRIL 30, 2008 ESTIMATED AVERAGE BURDEN HOURS PER RESPONSE......16

OMB APPROVAL

APR 07 ZUU

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

	SEC USE ONLY
	PREFIXSERIAL
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	DATE RECEIVED
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Weshington, DC Name of Offering ( che if this is an amendment and name has changed, and indicate change.) An offering of limited partnership interests ULOE Rule 505 Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Section 4(6) Type of Filing: ☐ New Filing A. BASIC IDENTIFICATION DATA Enter the information requested about the issuer ( check if this is an amendment and name has changed, and indicate change.) Name of Issuer Osprey High Yield Opportunity Fund, L.P. Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) 600 5th Avenue South, Suite 210, Naples, FL 34102 239-263-6877 Telephone Number (Including Area Code) Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Brief Description of Business: PROCESSED investment company Type of Business Organization ☐ other (please specify): limited liability company 1 4 2008 corporation ☐ limited partnership, already formed business trust limited partnership, to be formed THOMSON Month Year FINANCI Actual or Estimated Date of Incorporation or Organization: 0 6 0 1 3 Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:

### 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).

CN for Canada; FN for other foreign jurisdiction)

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.

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.



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<del>2</del> .	A. BASIC IDENTIFICATION DATA  Enter the information requested for the following:								
	Each promoter of the issuer, if the issuer has been organized within the past five years;								
	•	ner having the po	<del>-</del>			or more of a class of equity			
	• Each executive offi and	cer and director	of corporate issuers and o	of corporate general and i	managing partr	ers of partnership issuers;			
	<ul> <li>Each general and m</li> </ul>	nanaging partner	of partnership issuers.						
	neck Box(es) that Apply:		☐ Beneficial Owner	☐ Executive Officer	Director	□ General and/or      ■ Managing Partner			
	ill Name (Last name first, Osprey Asset Manage	ment, LLC							
Βι	isiness or Residence Addr 600 5 <sup>th</sup> Avenue South,	ess (Number and Suite 210, Napl	d Street, City, State, Zip es, FL 34102	Code)					
Cl	neck Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or  Managing Partner			
Fu	ill Name (Last name first, Wasmer Schroeder &								
Bu	usiness or Residence Addr 600 5 <sup>th</sup> Avenue South,			Code)					
Ch	neck Box(es) that Apply:		☐ Beneficial Owner		□ Director	☐ General and/or Managing Partner			
Fu	ll Name (Last name first, Wasmer, Martin M.	if individual)							
Βι	usiness or Residence Addr 600 5 <sup>th</sup> Avenue South,			Code)		55.			
Ch	neck Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	☑ Executive Officer	☑ Director	☐ General and/or  Managing Partner			
	Ill Name (Last name first, Schroeder, Michael J.								
Вι	usiness or Residence Addr 600 5 <sup>th</sup> Avenue South,			Code)					
	neck Box(es) that Apply:	☑ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or  Managing Partner			
Fu	all Name (Last name first,	if individual)	_						
Bu	isiness or Residence Addr	ess (Number and	d Street, City, State, Zip	Code)					
Cł	neck Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner			
Fu	Ill Name (Last name first,	if individual)							
Βι	usiness or Residence Addr	ess (Number an	d Street, City, State, Zip	Code)					
Cł	neck Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner			
Fu	ill Name (Last name first,	if individual)				<u>-</u>			

Business or Residence Address (Number and Street, City, State, Zip Code)

_					В. І	NFORMA	TION AB	OUT OF	ERING	·			· · · · · · · · · · · · · · · · · · ·
1.	Has th	ne issuer s	old, or do	es the issu	er intend t	o sell, to ne	on-accredit	ed investor	rs in this o	ffering?	••••	Yes □	No ⊠
			•			-							
2.	Answer also in Appendix, Column 2, if filing under ULOE.  What is the minimum investment that will be accepted from any individual?								\$25	\$250,000			
												Yes	No
												🛛	U
4.	any co the of SEC a	ommission fering. If and/or wit	n or simila a person i h a state o	ir remuner to be lister r states, li	ration for d is an as st the nam	solicitation sociated pe se of the br	of purchaerson or agoker or dea	sers in cor ent of a baller. If mor	nnection w roker or de re than five	ith sales of aler regist (5) persor	or indirectly, f securities in ered with the as to be listed oker or dealer		
Full	Name	(Last nar	ne first, if	individua	l)							,	
Nan Stat	ne of A	Associated	Broker or	Dealer Has Solic	ited or Int	ends to Sol	licit Purcha	sers				🗆 All S	States
[4	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]
[1	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 nar	ne first, if	individua	l)						<u>-</u>		
Bus	iness o	r Residen	ce Addres	s (Numbe	r and Stree	et, City, Sta	ate, Zip Co	de)					
Nan	ne of A	ssociated	Broker or	Dealer									<del></del>
State						ends to Sol						🗆 All S	States
[4	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]

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

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES				
1. Enter the aggregate offering price of securities included in this offering and the tot	al amo	unt already sold. E	enter "C	" if answer is
"none" or "zero." If the transaction is an exchange offering, check this box □ and	i indica	ite in the columns	below	the amounts
of the securities offered for exchange and already exchanged.		A garagata	A	ount Already
Type of Security	,	Aggregate offering Price	AIII	ount Already Sold
Debt	\$	officing trice	\$	bolu
Equity	*		_	
	•	0	æ	0
☐ Common ☐ Preferred	\$	0	\$ _	0
Convertible Securities (including warrants)	\$	0	\$	0
Partnership Interests	\$	No Maximum	\$ _	\$32,770,000
Other (Specify)	\$		\$	
Total	\$	No Maximum	\$ -	\$32,770,000
Answer also in Appendix, Column 3, if filing under ULOE.			_	
raiower also merippending column 2, it ming under OBOE.				
2. Enter the number of accredited and non-accredited investors who have p				
aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate				
securities and the aggregate dollar amount of their purchases on the total lines. Enter "C	)" if an	swer is "none" or	"zero."	
			_	Aggregate
				ollar Amount of Purchases
Post Contraction of the Contract	N	lumber Investors		
Accredited Investors	_	51	\$	32,770,000
Non-accredited Investors	_	0	\$	0
Total (for filings under Rule 504 only)	_	N/A	\$	N/A
Answer also in Appendix, Column 4, if filing under ULOE.				
2 ICAL CIT 1 C C C 1 I D 1 COA - COC - A - A - 1 C - A - A - 1 C - A - A - 1 C - A - A - A - A - A - A - A - A - A -	1 C-	111-1 1		
3. If this filing is for an offering under Rule 504 or 505, enter the information reque date, in offerings of the types indicated, in the twelve (12) months prior to the first				
securities by type listed in Part C – Question 1.	. Saic U	i securities in this	OHEHH	ig. Classify
Type of Offering		Type of	Γ	Oollar Amount
- V F		Security		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 di	stributi	on of the securiti	es in t	his offering.
Exclude amounts relating solely to organization expenses of the issuer. The infe				
contingencies. If the amount of an expenditure is not known, furnish an estimate a	nd chec			
Transfer Agent's Fees		L	I \$	0
Printing and Engraving Costs			\$	0
Legal Fees		⊠	l \$	50,000
Accounting Fees			\$	0
Engineering Fees			\$	0
Sales Commissions (specify finders' fees separately)			\$	0
Other Expenses (identify) misc. expenses			\$	25,000
Total			\$	75,000

	O OSSISTANCE PRICE NAMED O	NE INTROMONO, DEDENGEO	4 BID	HOR	OF PDOC	1010	DC		
	C. OFFERING PRICE, NUMBER C	<del></del>		USE	OF PROC	.EE	DS		
	b. Enter the difference between the aggregate offering Question 1 and total expenses furnished in response to Pathe "adjusted gross proceeds to the issuer."								
	*based on an estimated aggregate offering of \$100,000,00	0					\$	_	*99,925,000
5.	Indicate below the amount of the adjusted gross proceed used for each of the purposes shown. If the amount for estimate and check the box to the left of the estimate. The the adjusted gross proceeds to the issuer set forth in respo	any purpose is not known, furnise total of the payments listed must e	h an						
				-	nents to				
					ficers, ectors &			Par	ments To
					filiates				Others
	Salaries and fees					0			0
	Purchase of real estate			\$ -		0		\$	0
	Purchase, rental or leasing and installation of m	achinery and equipment		\$ -		0		\$	0
	Construction or leasing of plant buildings and for	acilities		\$ -		0		\$	0
	Acquisition of other businesses (including the this offering that may be used in exchange another issuer pursuant to a merger)	for the assets or securities of		\$	·	0		\$	0
	Repayment of indebtedness			-		0			0
	Working capital			-		0			0
	Other (specify): purchase high yield and			-		_		•	· · ·
	through its investment in Osprey HYOF					_		_	
	business company incorporated in the Britisl	-		_		0	$\boxtimes$		99,925,000
	Column Totals			-		0	$\times$	\$	99,925,000
	Total Payments Listed (column totals added)		☒	\$		9	9,925	5,00	0
	D. F	FEDERAL SIGNATURE							<u>.</u>
the	e issuer has duly caused this notice to be signed by the following signature constitutes an undertaking by the itten request of its staff, the information furnished by 2.	the issuer to furnish to the U.S.	Secu	rities	and Excha	inge	Co	mn	nission, upon
Iss	uer (Print or Type)	Signature			Date				
Os	prey High Yield Opportunity Fund, L.P.	11/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1	<u> </u>		April-	3, <u>2</u>	008		
Van	ne of Signer (Print or Type)	Title of Signer (Print or Type	)						
M	artin M. Wasmer	Manager of Osprey Asset M	_			Gen	eral	Pa	rtner of

## ATTENTION

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