FORM D



1180262

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

AMENDMENT NO. 1 TO FORM D

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

OMB API	PROVAL
OMB Number:	3235-0076
Expires:	May 31, 2002
Estimated average	ge burden
hours per form	16.00

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UNIFORM LIMITED OFFERING EXEMPTION	
Name of Offering (check if this is an amendment and name has changed, and indicate change.) WH Holdings (Cayman Islands) Ltd.	
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☑ Rule 506 ☐ Section 4(6) ☐ ULOE	
Type of Filing: ☐ New Filing ■ Amendment	14 2002
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	· ~ 11 - 1/2 - 1/2
Name of Issuer (☐ check if this is an amendment and name has changed, and indicate change.) WH Holdings (Cayman Islands) Ltd.	
Address of Executive Offices (Number and Street, City, State, Zip Code) C/o M&C Corporate Services Ltd., P.O. Box 309GT, Ugland House, South Church Street, Georgetown, Grand Cayman, Cayman Islands (345) 949-8066	
Address of Principal Business Operations (if different from Executive Offices)SAME (Number and Street, City, State, Zip Code) SAME	ng Area Code)
Brief Description of Business Holding company for seller of dietary nutritional supplements.	
Type of Business Organization ☑ corporation ☐ limited partnership, already formed	PROCESS
□ business trust □ limited partnership, to be formed □ other:	NOV 9 200
Actual or Estimated Date of Incorporation or Organization: Month Year 0 2 Estimate	FINANCIAL
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)	N TINANUAL
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 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 deet the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address give received at that address after the date on which it is due, on the date it was mailed by United States registered or certifications. 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. The manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.	emed filed with yen below or, if ied mail to that

State

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.

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.

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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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	A. BASIC IDENT	IFICATION DATA		·
2. Enter the information reques	sted for the following:			
• Each promoter of the is:	suer, if the issuer has been organ	ized within the past five y	ears;	
 Each beneficial owner lesecurities of the issuer; 	naving the power to vote or dispo	ose, or direct the vote or di	isposition of, 10%	or more of a class of equity
• Each executive officer a and	and director of corporate issuers a	and of corporate general a	nd managing part	ners of partnership issuers;
Each general and manage	ging of partnership issuers.			
Check Box(es) that Apply: ☐ Promote	er 🗷 Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individ Whitney V, L.P.	•			
Business or Residence Address (Nun c/o Whitney & Co., LLC, 177 Broad				
Check Box(es) that Apply:□ Promote	er 🗷 Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individ WH Investments Ltd.	<u> </u>			
Business or Residence Address (Nun c/o M&C Corporate Services Ltd.,		e, South Church St., Geo	orgetown, Grand	Cayman, Cayman Islands
Check Box(es) that Apply: ☐ Promot	ter 🗷 Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individ CCG Investments (BVI), L.P.	•			
Business or Residence Address (Nun c/o Golden Gate Private Equity, Inc	c., One Embarcadero Ĉenter, S		o, CA 94111	
Check Box(es) that Apply: ☐ Promote	er 🔲 Beneficial Owner	☑ Executive Officer	■ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individed Hockin, John C.				
Business or Residence Address (Nun c/o Whitney & Co., LLC, 177 Broad				
Check Box(es) that Apply: ☐ Promot		Executive Officer	■ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individ	ual)			

Castleman, Peter M.

Full Name (Last name first, if individual)

Check Box(es) that Apply:□ Promoter

Full Name (Last name first, if individual)

Check Box(es) that Apply: ☐ Promoter

Rodgers, Steven E.

Orr, Charles L.

Business or Residence Address (Number and Street, City, Zip Code) c/o Whitney & Co., LLC, 177 Broad Street, Stamford, CT 06901

Business or Residence Address (Number and Street, City, Zip Code) c/o Whitney & Co., LLC, 177 Broad Street, Stamford, CT 06901

Business or Residence Address (Number and Street, City, Zip Code) 353 Sacramento Street, 23rd Floor, San Francisco, CA 94111

☐ Beneficial Owner

☐ Beneficial Owner

☐ Executive Officer

☐ Executive Officer

☑ Director

☑ Director

☐ General and/or Managing Partner

☐ General and/or Managing Partner

*		•	A. BASIC IDENT	IFICATION DATA		
2.	En	ter the information requested for	or the following:			
	•	Each promoter of the issuer, i	f the issuer has been organ	ized within the past five yo	ears;	
	•	Each beneficial owner having securities of the issuer;	g the power to vote or dispo	ose, or direct the vote or di	sposition of, 10%	or more of a class of equity
	•	Each executive officer and di	rector of corporate issuers	and of corporate general an	nd managing parti	ners of partnership issuers;
	•	Each general and managing of	f partnership issuers.			·
Check	Box(es) that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
		Last name first, if individual) mes H.				
Busine	ss or	Residence Address (Number a & Co., LLC, 177 Broad Stre				
		es) that Apply: \square Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Na Rogers		Last name first, if individual)				·
Busine	ss or	Residence Address (Number a Gate Private Equity, Inc., On		uite 3300 San Francisco	CA 94111	
		es) that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Na Ashe, l		Last name first, if individual)				
Busine	ss or	Residence Address (Number a		-:4- 2200 C F	C 4 04111	
		Gate Private Equity, Inc., On es) that Apply: ☐ Promoter	Beneficial Owner	Executive Officer	E Director	☐ General and/or Managing Partner
Full Na Diekro		Last name first, if individual) Ken	The state of the s			
Busine	ss or	Residence Address (Number a Gate Private Equity, Inc., On		uite 3300 San Francisco	CA 94111	
		es) that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
		Last name first, if individual) refan L.				
Busine	ss or	Residence Address (Number a		wite 2200 Can Even sizes	CA 04111	
		Gate Private Equity, Inc., On es) that Apply: ☐ Promoter	Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Na	ame (Last name first, if individual)		**************************************		,
Busine	ss or	Residence Address (Number a	nd Street, City, Zip Code)			
Check	Box(es) that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Na	ame (Last name first, if individual)	· · · · · · · · · · · · · · · · · · ·			
Busine	ss or	Residence Address (Number a	nd Street, City, Zip Code)			
		(Use blank	sheet, or copy and use add	itional copies of this sheet,	, as necessary.)	

-	•			B. IN	FORMAT	ION ABO	UT OFFE	RING				
								_				Yes No
1.	Has the issu	ier sold, or			l to sell, to i in Appendi					•••••••••••	••••••	🗆 🗷
2.	What is the	minimum	investment	that will b	e accepted	from any i	ndividual?.			••••••		
3.	Does the of	fering pern	nit joint ow	nership of	a single un	it?			•••••	•••••	•••••	Yes No ⊠ □
4.	Enter the in commission a person to states, list t broker or de	or similar be listed is he name of ealer, you n	remuneration remuneration is an associal from the broker may set fort	ion or solic ted person r or dealer	citation of p or agent o . If more t	ourchasers f a broker han five (:	in connecti or dealer re 5) persons	on with sal egistered w to be listed	es of secur ith the SEC	rities in the C and/or wi	offering. ith a state o	Íf or
Full Name	e (Last name	first, if ind	lividual)									
Business	or Residence	Address (1	Number and	d Street, Ci	ity, State, Z	Cip Code)				M-24.		
Name of A	Associated B	roker or De	ealer	······································								
States in V	Which Person	n Listed Ha	s Solicited	or Intends	to Solicit I	Purchasers						
(Check "A	All States" or	check indi	ividual Stat	es)	•••••	•••••	•••••		•••••	•••••		All 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]	[ID] [MO] [PA] [PR]
Full Nam	e (Last name	first, if inc	lividual)									
Business	or Residence	Address ()	Number and	1 Street, C	ity. State. 7	(in Code)						
Name of A	Associated B	roker or De	ealer									
States in '	Which Person	n Listed Ha	s Solicited	or Intends	to Solicit I	Purchasers	···			- v + /	<u> </u>	
	(Check "Al	l States" or	check indi	ividual Stat	es)	•••••••	***************************************	••••••	***************************************	🗆	All 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]	[ID] [MO] [PA] [PR]
Full Nam	e (Last name	first, if inc	lividual)									
Business	or Residence	Address (1	Number and	d Street, C	ity, State, Z	Cip Code)						
Name of .	Associated B	roker or D	ealer		<u> </u>							
States in	Which Person	n Listed Ha	as Solicited	or Intends	to Solicit I	Purchasers		_				
	(Check "Al	l States" or	check indi	ividual Stat	es)						All 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]	[ID] [MO] [PA] [PR]

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

1.	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND U 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 in an	SE OF PROCEED	S
	exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Offering Price	Amount Already Sold
	Debt		\$
	Equity	<u>\$176,000,000</u>	\$154,089,421.50
	□Common ☑ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Limited Partnership Interests	\$	\$
	Other (Specify)	\$	\$
	Total	\$176,000,000	\$154,089,421.50
	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."		
	is notice of zero.	Number of Investors	Aggregate Dollar Amount
	Accredited Investors	62	Of Purchase \$154,089,421.50
	Non-accredited Investors		\$0
	Total (for filings under Rule 504 only)		
-	Answer also in Appendix, Column 4, if filing under ULOE.		
٥.	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	Dollar Amount
		Security	Sold
	Rule 505	N/A	\$ <u>N/A</u>
	Regulation A	N/A	\$ <u>N/A</u>
	Rule 504	N/A	\$ <u>N/A</u>
	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 issuer. The information may be given as subject to future contingencies. If the amount of expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees	X	\$5,000
	Printing and Engraving Costs	X	\$150,000
	Legal Fees	X	\$500,000
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)	🗖	\$
	Other Expenses (identify)		\$
	Total	I Y i	\$ 655,000

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AN	VD U	SE OF PROC	EED	S
b. Enter the differences between the aggregate offering price given in response to Part Question 1 and total expenses furnished in response to Part C - Question 4.a. difference is the "adjusted gross proceeds to the issuer."	This			<u>\$175,345,000</u>
5. Indicate below the amount of the adjusted gross proceeds to the issuer used or propose be used for each of the purposes shown. If the amount of any purpose is not known, fur an estimate and check the box to the left of the estimate. The total of the payments li must equal the adjusted gross proceeds to the issuer set forth in response to Part Questions 4.b above.	nish sted			
		Payments to Officers, Directors, & Affiliates		Payments To Others
Salaries and fees		\$		\$
Purchase of real estate	🗆	\$		\$
Purchase, rental or leasing and installation of machinery and equipment	🗆	\$		\$
Acquisition of other business (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		\$	×	\$ <u>175,345,000</u>
Repayment of indebtedness		\$		\$
Working capital	🗆	\$		\$
Other (specify):		\$		<u>\$</u>
Column Totals	🗆	\$	×	\$175,345,000
Total Payments Listed (column totals added)		×	\$175	5,345,000
D. FEDERAL SIGNATURE				
The issuer has duly caused this notice to be signed by the undersigned duly authorized p following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities of its staff, the information furnished by the issuer to any non-accredited investor pursuant to	s and	Exchange Cor	nmiss f Rule	sion, upon written requ e 502.
Issuer (Print or Type)		_	D	ate
		<u> </u>		November , 2002
WH Holdings (Cayman Islands) Ltd.				
WH Holdings (Cayman Islands) Ltd. Name (Print or Type) Title (Print or Type)				