

**2006 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2006**

**DOCUMENT # A00000000327**

1. Entity Name  
**DIAG INVESTMENT III, LTD.**



Principal Place of Business  
**8881 Terrene Ct. Suite 104  
Bonita Springs, FL 34135**

Mailing Address  
**P.O. Box 2311  
Bonita Springs, FL 34133**

**FILED**

**00000000-1 PM 1:18**

**SECRETARY OF STATE  
TALLAHASSEE FLORIDA**

*Change*



**DO NOT WRITE IN THIS SPACE**

01122006 No Chg-LP CR2E003 (11/05)

4. FEI Number **65-0981973** Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**WRIGHT, CHRISTINE F  
4427 SE 16TH PLACE, #2  
CAPE CORAL, FL 33904**

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

DATE

**FILE NOW!!! FEE IS \$500.00  
After May 1, 2006, Fee will be \$900.00**

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner..**

**12. GENERAL PARTNER INFORMATION**

DOCUMENT # **P99000021895**  
NAME **DIAG MANAGEMENT, INC.**  
STREET ADDRESS **28341 SOUTH TAMiami TRAIL, SUITE 1**  
CITY-ST-ZIP **BONITA SPRINGS, FL 34134**

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05/17/06--01016--014 \*\*500.00**

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14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

*Thomas J. Luke* **THOMAS J. LUKE** **4/25/06** **239.390.0991**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE