

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N41604

**FILED**  
**Apr 21, 2011**  
**Secretary of State**

**Entity Name:** THE MEWS OF NAPLES HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

3725 RACHEL LANE  
NAPLES, FL 34103 US

**New Principal Place of Business:**

**Current Mailing Address:**

3725 RACHEL LANE  
NAPLES, FL 34103 US

**New Mailing Address:**

**FEI Number:** 65-0261289

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LONGE, LAURIE A  
3725 RACHEL LANE  
NAPLES, FL 34103 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: S  
Name: MANCUSO, JANICE L  
Address: 3721 RACHEL LANE  
City-St-Zip: NAPLES, FL 34103

Title: T  
Name: LONGE, LAURIE A  
Address: 3725 RACHEL LN  
City-St-Zip: NAPLES, FL 34103

Title: D  
Name: EASLICK, DAVID  
Address: 3734 RACHEL LANE  
City-St-Zip: NAPLES, FL 34103

Title: PD  
Name: MANCUSO, EDWIN W  
Address: 3721 RACHEL LANE  
City-St-Zip: NAPLES, FL 34103

Title: D  
Name: FORBES, CHRISTINA  
Address: 3736 RACHEL LANE  
City-St-Zip: NAPLES, FL 34103

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LAURIE LONGE

T

04/21/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date