

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48617

Entity Name: LITHUANIAN FREEDOM THROUGH EDUCATION FUND, INC.**Current Principal Place of Business:**7216 RIDGE WAY
PARK CITY, UT 84098**Current Mailing Address:**7216 RIDGE WAY
PARK CITY, UT 84098**FEI Number:** 65-0352349**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**AVIZONIS, LIUDA
1933 RIDGE ROAD
NORTH PALM BEACH, FL 33408 US*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**Officer/Director Detail :**

Title	PRES
Name	AVIZONIS, LIUDA V.
Address	7216 RIDGE WAY
City-State-Zip:	PARK CITY UT 84098

Title	D
Name	AVIZONIS, PETRAS V
Address	7216 RIDGE WAY
City-State-Zip:	PARK CITY UT 84098

Title	D
Name	AVIZONIS, PETRAS V JR.
Address	6 ANDERSON DR.
City-State-Zip:	HINGHAM MA 02043

Title	D
Name	AVIZONIS, VILIJIA
Address	6578 CANYON COVE PL.
City-State-Zip:	SALT LAKE CITY UT 84121

Title	D
Name	MCCOMAS, GREGORY BM.D.
Address	6578 CANYON COVE PL.
City-State-Zip:	SALT LAKE CITY UT 84121

Title	D
Name	STELLWAGEN, DAINA A
Address	4295 AVENUE DE HAMPTON
City-State-Zip:	MONTREAL H3X 3-PA

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: LUIDA VIOLETA AVIZONIS**PRES****02/06/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date