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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # F94000003794

1. Corporation Name
AVID TECHNOLOGY, INC.



Principal Place of Business METROPOLITAN TECHNOLOGY PARK TEWKSBURY MA 01876	Mailing Address METROPOLITAN TECHNOLOGY PARK ONE PART WEST TEWKSBURY MA 01876 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Country
24	29
25	30

3. Date Incorporated or Qualified 07/20/1994	4. FEI Number 04-2977748	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent
**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	FL
83	
84 City	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	S <input checked="" type="checkbox"/> DELETE
NAME	HAMMOND, FREDERIC G
STREET ADDRESS	METROPOLITAN TECHNOLOGY PARK 1 PARK WEST
CITY-ST-ZIP	TEWKSBURY MA
TITLE	SVPT <input type="checkbox"/> DELETE
NAME	FLAHERTY, WILLIAM L.
STREET ADDRESS	METROPOLITAN TECHNOLOGY PARK, 1 PARK WEST
CITY-ST-ZIP	TEWKSBURY MA
TITLE	CBPC <input type="checkbox"/> DELETE
NAME	MILLER, WILLIAM J.
STREET ADDRESS	METROPOLITAN TECHNOLOGY PARK, 1 PARK WEST
CITY-ST-ZIP	TEWKSBURY MA
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Assistant Secretary <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Frederic G. Hammond
1.3 STREET ADDRESS	Metropolitan Tech. Park, 1 Park West
1.4 CITY-ST-ZIP	Tewksbury, MA 01876
2.1 TITLE	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Charles T. Brumback
2.3 STREET ADDRESS	Metropolitan Tech Park, 1 Park West
2.4 CITY-ST-ZIP	Tewksbury, MA 01876
3.1 TITLE	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	William E. Foster
3.3 STREET ADDRESS	Metropolitan Tech Park, 1 Park West
3.4 CITY-ST-ZIP	Tewksbury, MA 01876
4.1 TITLE	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Peter C. Gotcher
4.3 STREET ADDRESS	Metropolitan Tech Park, 1 Park West
4.4 CITY-ST-ZIP	Tewksbury, MA 01876
5.1 TITLE	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Robert M. Halperin
5.3 STREET ADDRESS	Metropolitan Tech Park, 1 Park West
5.4 CITY-ST-ZIP	Tewksbury, MA 01876
6.1 TITLE	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	Nancy Hawthorne
6.3 STREET ADDRESS	Metropolitan Tech Park, 1 Park West
6.4 CITY-ST-ZIP	Tewksbury, MA 01876

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Frederic G. Hammond 1/12/99 978-640-
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 3420

CR2E034 (1/98)

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Avid.

AVID TECHNOLOGY, INC.

CONTINUATION SHEET

13. Additions/Changes to Officers and Directors in 12.

		_ CHANGE <input checked="" type="checkbox"/> ADDITION
7.1 TITLE	Director	
7.2 NAME	Roger J. Heinen, Jr.	
7.3 STREET ADDRESS	Metropolitan Technology Park, One Park West	
7.4 CITY-ST-ZIP	Tewksbury, MA 01876	

		_ CHANGE <input checked="" type="checkbox"/> ADDITION
8.1 TITLE	Director	
8.2 NAME	Daniel Langlois	
8.3 STREET ADDRESS	Metropolitan Technology Park, One Park West	
8.4 CITY-ST-ZIP	Tewksbury, MA 01876	

		_ CHANGE <input checked="" type="checkbox"/> ADDITION
9.1 TITLE	Director	
9.2 NAME	William J. Miller	
9.3 STREET ADDRESS	Metropolitan Technology Park, One Park West	
9.4 CITY-ST-ZIP	Tewksbury, MA 01876	

		_ CHANGE <input checked="" type="checkbox"/> ADDITION
10.1 TITLE	Director	
10.2 NAME	Lucille S. Salhany	
10.3 STREET ADDRESS	Metropolitan Technology Park, One Park West	
10.4 CITY-ST-ZIP	Tewksbury, MA 01876	

		_ CHANGE <input checked="" type="checkbox"/> ADDITION
11.1 TITLE	Director	
11.2 NAME	William J. Warner	
11.3 STREET ADDRESS	Metropolitan Technology Park, One Park West	
11.4 CITY-ST-ZIP	Tewksbury, MA 01876	