


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2004 8:00 am
Secretary of State

03-01-2004 90038 017 ***150.00

DOCUMENT # F94000003794

1. Entity Name
AVID TECHNOLOGY, INC.



Principal Place of Business
**AVID TECHNOLOGY PARK
 ONE PARK WEST
 TEWKSBURY, MA 01876**

Mailing Address
**ATTN: E. DESROCHERS
 AVID TECHNOLOGY PARK, ONE PARK WEST
 TEWKSBURY, MA 01876 US**

54013584



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

01072004 Chg-P CR2E034 (10/03)

City & State
 Zip

City & State
 Zip

4. FEI Number
04-2977748

Applied For
 Not Applicable

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

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

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <input type="checkbox"/> Delete KRALL, DAVID A AVID TECHNOLOGY PARK, ONE PARK WEST TEWKSBURY, MA 01876
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete BRUMBACK, CHARLES T AVID TECHNOLOGY PARK, ONE PARK WEST TEWKSBURY, MA 01876
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S <input type="checkbox"/> Delete JACKS, ETHAN E AVID TECHNOLOGY PARK, ONE PARK WEST TEWKSBURY, MA 01876
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS <input type="checkbox"/> Delete KAZMER, CAROL E AVID TECHNOLOGY PARK, ONE PARK WEST TEWKSBURY, MA 01876
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T <input type="checkbox"/> Delete LAMOUNTAIN, JOHN AVID TECHNOLOGY PARK, ONE PARK WEST TEWKSBURY, MA 01876
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete GUTTAG, JOHN AVID TECHNOLOGY PARK, ONE PARK WEST TEWKSBURY, MA 01876

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Robert M. Halperin Avid Tech. Park, One Park West Tewksbury, MA 01876
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Nancy Hawthorne Avid Tech. Park, One Park West Tewksbury, MA 01876
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Pamela F. Lenehan Avid Tech. Park, One Park West Tewksbury, MA 01876
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition William Warner Avid Tech. Park, One Park West Tewksbury, MA 01876

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Carol E. Kazmer Carol E. Kazmer 1/28/04 978-640-3420
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #