


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2006 8:00 am
Secretary of State

04-06-2006 90010 044 ***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**

40044981



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

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

City & State

Zip Country

03202006 Chg-P CR2E034 (11/05)

4. FEI Number
04-2977748

Applied For
 Not Applicable

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

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

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 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 KRALL, DAVID A AVID TECHNOLOGY PARK, ONE PARK WEST TEWKSBURY, MA 01876 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAWTHORNE, NANCY AVID TECHNOLOGY PARK, ONE PARK WEST TEWKSBURY, MA 01876 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S JACKS, ETHAN E AVID TECHNOLOGY PARK, ONE PARK WEST TEWKSBURY, MA 01876 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS KAZMER, CAROL E AVID TECHNOLOGY PARK, ONE PARK WEST TEWKSBURY, MA 01876 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LAMOUNTAIN, JOHN AVID TECHNOLOGY PARK, ONE PARK WEST TEWKSBURY, MA 01876 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GUTTAG, JOHN AVID TECHNOLOGY PARK, ONE PARK WEST TEWKSBURY, MA 01876 <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director George H. Billings One Park West, Tewksbury, MA 01876 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Elizabeth M. Daley One Park West, Tewksbury, MA 01876 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Pamela F. Lenehan One Park West, Tewksbury, MA 01876 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Youngme E. Moon One Park West, Tewksbury, MA 01876 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 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: *Carroll* 3/20/06 978-640-3420

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

Avid.

April 3, 2006

40544981

F94000003794

By Express Mail

Florida Department of State
Division of Corporations
Annual Report Filings
P.O. Box 1500
Tallahassee, FL 32303-1500

Re: Avid Technology, Inc.

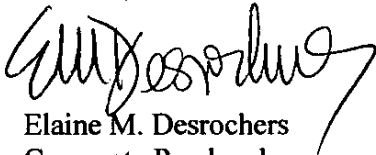
Dear Sir or Madam:

Enclosed for filing please find the *2006 For Profit Corporation Annual Report* for Avid Technology, Inc. Also enclosed is a check in the amount of \$150 to cover the required filing fee.

Please acknowledge receipt of the enclosed materials by date-stamping the enclosed copy of this letter and returning it to my attention. A self-addressed envelope is enclosed for your convenience.

If you have any questions, please contact me by telephone at (978) 640-3350.

Sincerely,



Elaine M. Desrochers
Corporate Paralegal

Enclosures

Avid Technology, Inc.
One Park West
Tewksbury, MA 01876
www.avid.com
tel 978 640 3350
fax 978 851 7216