FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

APPROVED AND FILED

1997 APR 24 AM 11: 59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P27428 (2)

1. Corporation Name
PICTURETEL CORPORATION

Principal Place of Business	Mailing Address
222 ROSEWOOD DR DANVERS MA 01923	222 ROSEWOOD DR DANVERS MA 01923-4510

3. Date Incorporated or Qualified: 12/26/1989
3a. Date of Last Report: 05/01/1996
4. FEI Number: 04-2835972 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 100 Minuteman Road	26 100 Minuteman Road
Suite, Apt #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Andover, MA	City & State 28 Andover, MA
Zip 24 01810 Country 25	Zip 29 01810 Country 30

9. **Name and Address of Current Registered Agent**
CORPORATION INFORMATION SERVICES, INC.
1201 HAYES STREET
TALLAHASSEE FL 32301

10. **Name and Address of New Registered Agent**
81 Name: Corporation Service Company
82 Street Address (P.O. Box Number is Not Acceptable): 1201 Hays Street
83
84 City: Tallahassee FL 32301

000002157840 -- 6
-04/28/97--01034--014
****165.00 ****165.00

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: Gail Shelby — Gail Shelby, as Agent   DATE: 4-24-97
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered agent's signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PC ☐ DELETE	☒ Change ☐ Addition
NAME	GAUT, NORMAN E.	
STREET ADDRESS	222 ROSEWOOD DR	100 Minuteman Road
CITY-ST-ZIP	DANVERS MA	Andover MA 01810
TITLE	D ☐ DELETE	☒ Change ☐ Addition
NAME	KNIGHT, ROBERT T	
STREET ADDRESS	222 ROSEWOOD DRIVE	100 Minuteman Road
CITY-ST-ZIP	DANVERS MA	Andover MA 01810
TITLE	D ☐ DELETE	☒ Change ☐ Addition
NAME	KHOSLA, VINOD	
STREET ADDRESS	222 ROSEWOOD DR	100 Minuteman Road
CITY-ST-ZIP	DANVERS MA	Andover MA 01810
TITLE	D ☐ DELETE	☒ Change ☐ Addition
NAME	LEVI, DAVID B.	
STREET ADDRESS	222 ROSEWOOD DR	100 Minuteman Road
CITY-ST-ZIP	DANVERS MA	Andover MA 01810
TITLE	D ☐ DELETE	☒ Change ☐ Addition
NAME	SWARTZ, JAMES R.	
STREET ADDRESS	222 ROSEWOOD DR	100 Minuteman Road
CITY-ST-ZIP	DANVERS MA	Andover MA 01810
TITLE	VST ☐ DELETE	☒ Change ☐ Addition
NAME	STRAUSS, LES	
STREET ADDRESS	222 ROSEWOOD DR	100 Minuteman Road
CITY-ST-ZIP	DANVERS MA	Andover MA 01810 SCC 4-24-97

14. I do 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.

SIGNATURE: SIGNATURE REQUIRED Les Strauss 4/2/97 (508) 292-5000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (9/96)

0000732