

No. W 13125	Due no later than October 31, 2005		2. Registered Agent and Office NO PO BOX																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	Annual Report Form		MELISSA A ALDERMAN																		
	1. Mailing Address - Correct in this box, if applicable DREAM TIME, LLC MELISSA A ALDERMAN 1009 W HWY 2 STE A SANDPOINT, ID 83864		2655 JEWELL LAKE RD SAGLE, ID 83860 3. <u>New</u> Registered Agent Signature																		
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="0"> <thead> <tr> <th><u>Office held</u></th> <th><u>Name</u></th> <th><u>Street or P.O. Address</u></th> <th><u>City</u></th> <th><u>State</u></th> <th><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td></td> <td>Manager Melissa Alderman</td> <td>2655 Jewell Lake rd.</td> <td>Sagle</td> <td>ID</td> <td>83860</td> </tr> <tr> <td></td> <td>manager Billie D. Alderman</td> <td>" "</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>		Manager Melissa Alderman	2655 Jewell Lake rd.	Sagle	ID	83860		manager Billie D. Alderman	" "			
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	Manager Melissa Alderman	2655 Jewell Lake rd.	Sagle	ID	83860																
	manager Billie D. Alderman	" "																			
5. Organized Under the Laws of: IDAHO W 13125	6. Signature <u>Melissa A. Alderman</u> Date <u>8/25/05</u> Name (Typed or Printed) <u>Melissa A. Alderman</u> Title <u>manager</u>																				

Issued 08/01/2005

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