No. <b>W 54946</b>		Due no later than Oct 31, 2009 Annual Report Form  1. Mailing Address: Correct in this box if needed.  NORTH IDAHO DREAM TEAM LLC 1208 IDAHO ST POST FALLS ID 83854		2. Registered A	2. Registered Agent and Address (NO PO BOX)  DAVID L SWARAT 1208 IDAHO ST POST FALLS ID 83854  3. New Registered Agent Signature:*			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE				1208 IDAHO POST FALLS				
4. Limited Liability Compa	nies: Enter Nar	mes and Addre	sses of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MEMBER	DAVID L SWARAT		7752 VALLEY ST	DALTON GARDENS	ID	USA	83815	
MEMBER	MARY A SWARAT		7752 VALLEY ST	DALTON GARDENS	ID	USA	83815	
5. Organized Under the Laws of:		6. Annual Rep	port must be signed.*					
ID W 54946		Signature:	David L. Swarat		Date: 09/17/2009			
		Name (type	e or print): David L. Swarat		Title: Member			
Processed 09/17/2009 * Electronically provided signatures are accepted as original signatures.								