

No. W 30778		Due no later than May 31, 2009		2. Registered Agent and Address (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 1. Mailing Address: Correct in this box if needed. DREAM FIELD LLC COLLEEN M MURPHY 705 N MAIN MOSCOW ID 83843		COLLEEN M PHILLIP 705 N MAIN MOSCOW ID 83843			
				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MANAGER	COLLEEN A MURPHY	1601 CHRISTOPHER LANE	MOSCOW	ID	USA	83843	
5. Organized Under the Laws of: ID W 30778		6. Annual Report must be signed.* Signature: Colleen A Murphy Name (type or print): Colleen A Murphy Date: 03/16/2009 Title: Manager					
Processed 03/16/2009		* Electronically provided signatures are accepted as original signatures.					