

No. W 17246	Due no later than December 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		WILLIAM G ODOM													
	1. Mailing Address - Correct in this box, if applicable DREAMWALKER L.L.C. PO BOX 892 PRIEST RIVER, ID 83856		612 GOAWAY PRIEST RIVER, ID 83856													
3. <u>New</u> Registered Agent Signature																
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table border="1"> <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>MANAGER</td> <td>William G Odom</td> <td>P.O. Box 892</td> <td>PRIEST RIVER</td> <td>ID</td> <td>83856</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	William G Odom	P.O. Box 892	PRIEST RIVER	ID	83856
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>											
MANAGER	William G Odom	P.O. Box 892	PRIEST RIVER	ID	83856											
5. Organized Under the Laws of: IDAHO W 17246		6. Signature <u>Wm G Odom</u> Date <u>10/21/05</u> Name (Typed or Printed) <u>William Odom</u> Title <u>MANAGER</u>														

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