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|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|---------------------------------------------------------------|---------|
| No. <b>W 12763</b>                                                                                                                                     |                   | <b>Due no later than Aug 31, 2007</b>                                                                                                                                                        |            | 2. Registered Agent and Address <b>(NO PO BOX)</b>            |         |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                   | <b>Annual Report Form</b><br><br><b>1. Mailing Address: Correct in this box if needed.</b><br><br>IDAHO TRUST DEEDS, L.L.C.<br>RICHARD B. GIESLER<br>PO BOX 5626<br>TWIN FALLS ID 83303-5626 |            | RICHARD B GIESLER<br>2191 POLE LINE RD<br>TWIN FALLS ID 83301 |         |
|                                                                                                                                                        |                   |                                                                                                                                                                                              |            | 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 |
| MANAGER                                                                                                                                                | RICHARD B GIESLER | 2191 POLE LINE RD                                                                                                                                                                            | TWIN FALLS | ID                                                            | USA     |
| Postal Code 83301                                                                                                                                      |                   |                                                                                                                                                                                              |            |                                                               |         |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 12763</b>                                                                                           |                   | 6. Annual Report must be signed.*<br>Signature: Richard B. Giesler<br>Name (type or print): Richard B. Giesler                                                                               |            |                                                               |         |
|                                                                                                                                                        |                   | Date: 06/12/2007<br>Title: Manager                                                                                                                                                           |            |                                                               |         |
| Processed 06/12/2007                                                                                                                                   |                   | * Electronically provided signatures are accepted as original signatures.                                                                                                                    |            |                                                               |         |