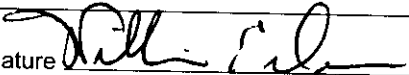


No. W 8411	Due no later than Mar 31, 2001 Annual Report Form		2. Registered Agent and Office NO PO BOX																		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable		CHRISTOPHER P LINDER 9965 VIXEN DR BOISE, ID 83709																		
	OMCS, LLC CHRISTOPHER P LINDER 9965 VIXEN DR BOISE, ID 83709																				
4. Limited Liability Companies: Enter Names and Addresses of Members. <table border="1"> <thead> <tr> <th>Office held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>Member</td> <td>Christopher Linder</td> <td>9965 Vixen Dr.</td> <td>Boise</td> <td>ID</td> <td>83709</td> </tr> <tr> <td>Member</td> <td>William E. Duncan</td> <td>2342 E Three Bars Dr.</td> <td>Meridian</td> <td>ID</td> <td>83642</td> </tr> </tbody> </table>				Office held	Name	Street or P.O. Address	City	State	Zip	Member	Christopher Linder	9965 Vixen Dr.	Boise	ID	83709	Member	William E. Duncan	2342 E Three Bars Dr.	Meridian	ID	83642
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5. Organized Under the Laws of: IDAHO W 8411	6.  Signature _____ Date <u>3-6-01</u> Name (Typed or Printed) <u>William E. Duncan</u> Title: <u>member.</u> XXXX																				