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2003 OCT -1 AM 9:22

MORRIS W. CARTER
RECORDER 15-633-18

POWER OF ATTORNEY

I, Deborah A. Nasianceno, of Martin County, State of Indiana, do hereby designate Kimberly Nasianceno of LaKE County, State of Indiana, my true and lawful attorney in fact, or agent, to have the following powers:

- (Select or add appropriate provision)
- to make, draw and endorse promissory notes, checks or bills of exchange and to waive demand, presentment, protest, notice of protest, and notice of non-payment of all such instruments;
- to make and execute any and all contracts;
- to purchase, sell, dispose of, assign and pledge notes, stocks, bonds and securities and to exercise such voting rights as my ownership of any notes, stocks, bonds and securities may entitle me, either in person or by proxy;
- to represent me in all matters pertaining to the business of any corporation in which I may have any interest;
- to receive and to demand all sums of money, debts, dues, accounts, bequests, interest, dividends, and demands whatsoever which are now or shall hereafter become due or payable to me and to compromise or discharge the same;
- to bargain for, contract concerning, buy, sell, mortgage and in any and every way and manner deal with personal property of any kind or nature;
- to execute and file tax returns;
- to purchase, sell, mortgage, convey and lease any interest in real estate, wherever located, of which I may be owner now or hereafter;

and I hereby ratify and confirm all that my said attorney in fact or agent shall do by virtue hereof.

I hereby reserve the right of revocation; however, this Power of Attorney shall continue in full force and effect until:

- (Select or add appropriate provision)
- (A) I have executed and recorded in the Recorder's Office of the county of my domicile a written revocation hereof.
- (B) The 23 day of September, 2003
- (C) I further state that:

- (Select or add appropriate provision)
- (1) This Power of Attorney shall not be affected by my incapacity.
- (2) This Power of Attorney shall become effective upon my incapacity.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 23 day of September, 2003

Deborah A. Nasianceno
Deborah A. Nasianceno
Printed Signature

STATE OF FL)
) SS:
COUNTY OF)
) MARTIN

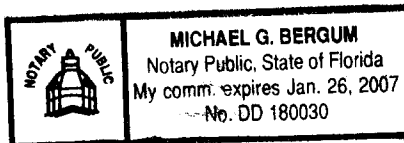
Before me, a Notary Public in and for said County and State, personally appeared Deborah A. Nasianceno, who acknowledged the execution of the foregoing Power of Attorney.

WITNESS my hand and Notarial Seal, this 23 day of September, 2003
MY COMMISSION EXPIRES: _____
COUNTY OF RESIDENCE: _____

Michael G. Bergum
Notary Public

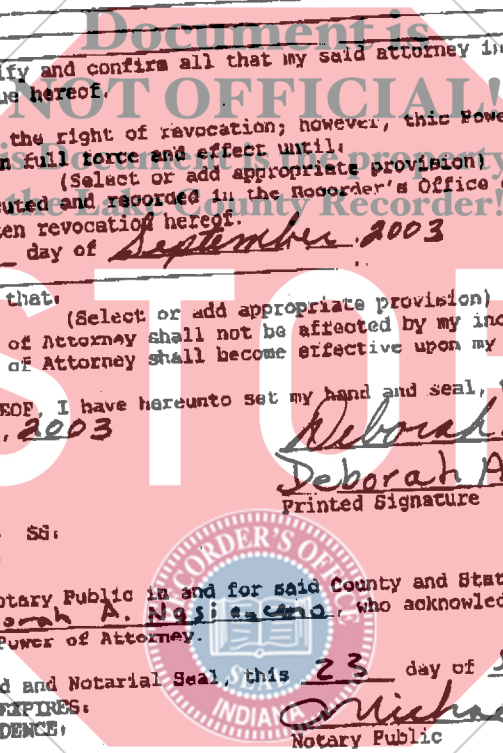
THIS INSTRUMENT PREPARED BY: Deborah A. Nasianceno

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FILED

SEP 30 2003

STEPHEN R. STIGLICH
LAKE COUNTY AUDITOR