LIMITED POWER OF ATTORNEY

I, JANICE K. CLIFFORD, designate EDWARD H. FELDMAN, as my true and lawful attorney-in-fact or agent, to have the following power and authority:

To execute any documents necessary to purchase real estate located at 10555 Maine Drive, Crown Point, Lake County, Indiana, legally described as follows:

The North ½ of Lot 221 in Waterside Crossing Phase-1, as per plat thereof, recorded in Plat Book 94 page 10, in the Office of the Recorder of Lake County, Indiana

Tax Unit No. 23, Key No. 9-517-6 and 12 9-590-144 New

from WATERSIDE CROSSING, LLC, pursuant to the terms of a Purchase Agreement executed on June 16, 2004, for a purchase price of One Hundred Sixty-Two Thousand Two Hundred Effty Dollars (\$162,250.00), including but not limited to, Purchase Agreement, closing statements, disclosure forms, affidavits, tax pro-ration agreements, or any other documents necessary or required to purchase said property.

GIVING AND GRANTING unto my said attorney-in-fact full power and authority to do and perform every act, deed, matter, and thing whosoever in and about my estate, property, and affairs, as fully and effectually to all intents and purposes as I may or could down my own proper person if personally present, the above especially enumerated powers being in aid and exemplification of the limited power herein granted, and hereby ratifying all that my said attorney shall lawfully do or cause to be done by virtue of these presents: the property of

the Lake County Recorder!

And I hereby declare that any act or thing lawfully done hereunder by my said attorney-in-fact shall be binding on myself and my heirs, legal and personal representatives, and assigns, whether the same shall have been done before or after my death, or other revocation of this instrument, unless and until actual notice thereof shall have been received by any person acting in reliance thereon. This power of attorney may be filed for record in any public office. This power of attorney shall be immediately effective and shall not be affected by my subsequent disability or incapacity.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my signature in 14 day of November, 2004.

NOV 29 2004

STEPHEN R. STIGLICH

TICOR TITLE INSURANCE 11055 BROADWAY SUITE A **CROWN POINT, INDIANA 46307**

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STATE OF CALIFORNIA)

COUNTY OF LOS AGGLES

I hereby certify that Janice K. Clifford, personally known to me to be the same person whose signature is subscribed to the foregoing instrument, appeared before me this day in person and acknowledged that she made her signature and delivered the said instrument as her free and voluntary act, for the uses and purposes therein set forth.

Given under my hand and official seal this _/f day of November, 2004.

My Commission Expires:

Document is

County of Residence:

Notary Public

MIKE S. MATSUSHITA
COMM. #1368638
NOTARY PUBLIC CALIFORNA
LOS ANGLES COUNTY
LOS ANGLES COUNTY
LOS ANGLES COUNTY
Ny Comm. Expires Sept. 5, 2006

This instrument was prepared by: Edward H. Feldman, Attorney at Law 2833 Lincoln Street, Suite B, Highland, IN 46322 (219) 838-8200