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GENERAL POWER OF ATTORNEY

NOTICE: THE POWERS GRANTED BY THIS DOCUMENT ARE BROAD AND SWEEPING. IF YOU HAVE ANY QUESTIONS ABOUT THESE POWERS, OBTAIN COMPETENT LEGAL ADVICE. THIS DOCUMENT DOES NOT AUTHORIZE ANYONE TO MAKE MEDICAL AND OTHER HEALTH-CARE DECISIONS FOR YOU. YOU MAY REVOKE THIS POWER OF ATTORNEY IF YOU LATER WISH TO DO SO.

I, PETER N. SCHRUM III and EVA L. SCHRUM
[YOUR FULL LEGAL NAME], residing at
21309 67TH AVE EAST, BRADENTON, FL 34211
[YOUR FULL ADDRESS], hereby appoint
MITCHELL PORTNEY of _____,
as my Attorney-in-Fact ("Agent").

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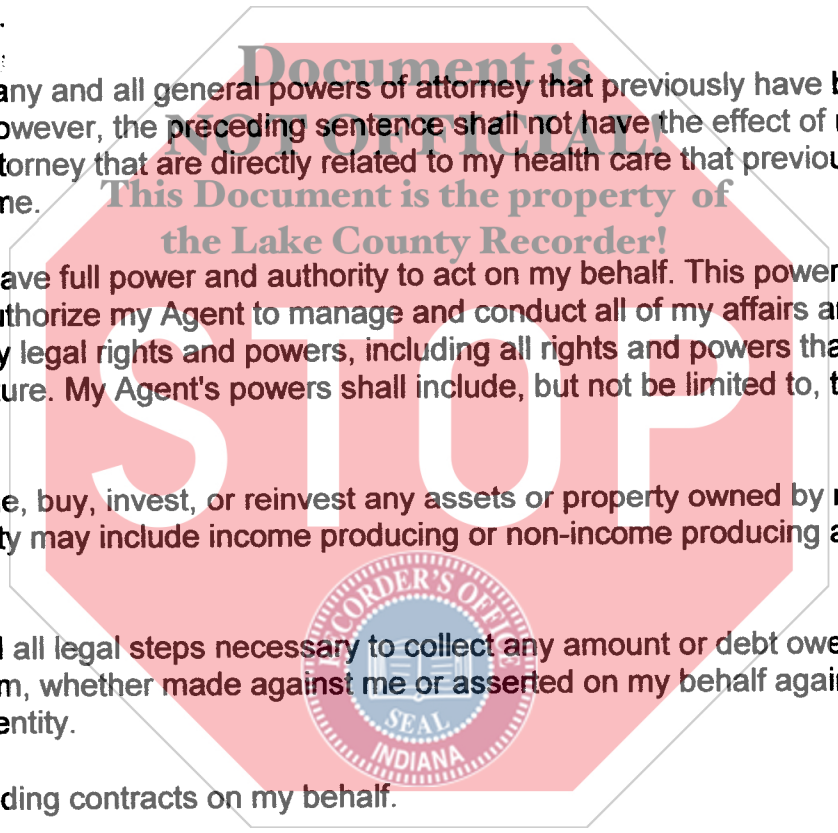
If my Agent is unable to serve for any reason, I designate
N/A, of _____,
as my successor Agent.

I hereby revoke any and all general powers of attorney that previously have been signed by me. However, the preceding sentence shall not have the effect of revoking any powers of attorney that are directly related to my health care that previously have been signed by me.

This Document is the property of the Lake County Recorder!

My Agent shall have full power and authority to act on my behalf. This power and authority shall authorize my Agent to manage and conduct all of my affairs and to exercise all of my legal rights and powers, including all rights and powers that I may acquire in the future. My Agent's powers shall include, but not be limited to, the power to:

1. Sell, exchange, buy, invest, or reinvest any assets or property owned by me. Such assets or property may include income producing or non-income producing assets and property.
2. Take any and all legal steps necessary to collect any amount or debt owed to me, or to settle any claim, whether made against me or asserted on my behalf against any other person or entity.
3. Enter into binding contracts on my behalf.
9. Sell, convey, lease, mortgage, manage, insure, improve, repair, or perform any other act with respect to any of my property (now owned or later acquired) including, but not limited to, real estate and real estate rights (including the right to remove tenants and to



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recover possession). This includes the right to sell or encumber any homestead that I now own or may own in the future.

This Power of Attorney shall be construed broadly as a General Power of Attorney. The listing of specific powers is not intended to limit or restrict the general powers granted in this Power of Attorney in any manner.

Any power or authority granted to my Agent under this document shall be limited to the extent necessary to prevent this Power of Attorney from causing: (i) my income to be taxable to my Agent, (ii) my assets to be subject to a general power of appointment by my Agent, and (iii) my Agent to have any incidents of ownership with respect to any life insurance policies that I may own on the life of my Agent.

My Agent shall not be liable for any loss that results from a judgment error that was made in good faith. However, my Agent shall be liable for willful misconduct or the failure to act in good faith while acting under the authority of this Power of Attorney.

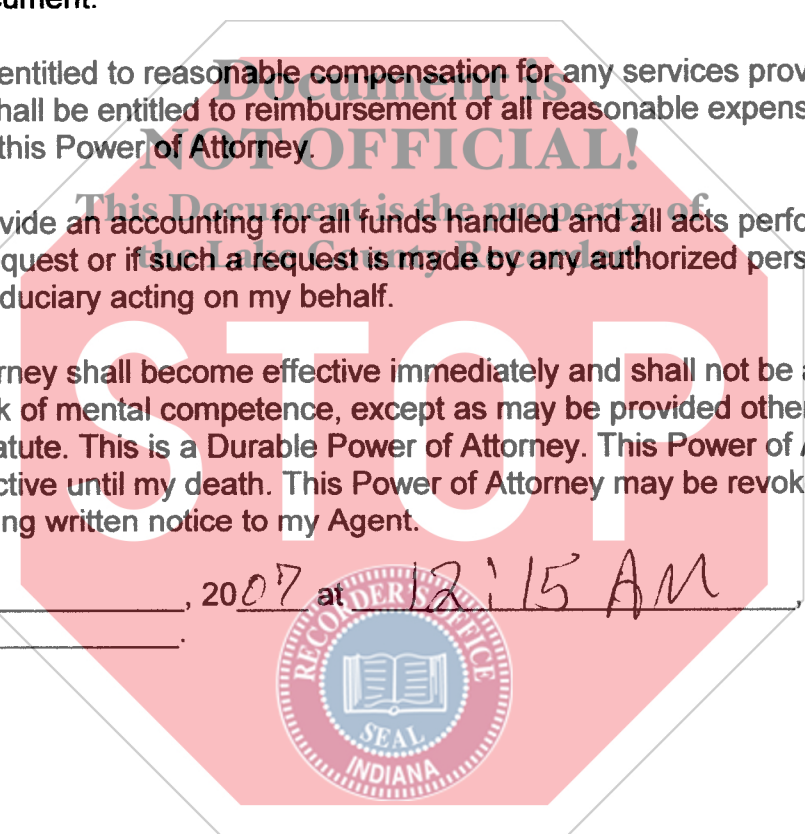
I authorize my Agent to indemnify and hold harmless any third party who accepts and acts under this document.

My Agent shall be entitled to reasonable compensation for any services provided as my Agent. My Agent shall be entitled to reimbursement of all reasonable expenses incurred in connection with this Power of Attorney.

My Agent shall provide an accounting for all funds handled and all acts performed as my Agent, if I so request or if such a request is made by any authorized personal representative or fiduciary acting on my behalf.

This Power of Attorney shall become effective immediately and shall not be affected by my disability or lack of mental competence, except as may be provided otherwise by an applicable state statute. This is a Durable Power of Attorney. This Power of Attorney shall continue effective until my death. This Power of Attorney may be revoked by me at any time by providing written notice to my Agent.

Dated 11/1, 2007 at 12:15 AM



YOUR SIGNATURE:

YOUR SIGNATURE:

Peter N. Schrum III Mrs. Eva L. Schrum

YOUR PRINTED FULL LEGAL NAME: YOUR PRINTED FULL LEGAL NAME:

PETER N. SCHRUM III Mrs. EVA L. Schrum

WITNESS' SIGNATURE:

WITNESS' SIGNATURE:

Caroline Christine Pinsky Caroline Christine Pinsky

WITNESS' PRINTED FULL LEGAL NAME:

WITNESS' PRINTED FULL LEGAL NAME:

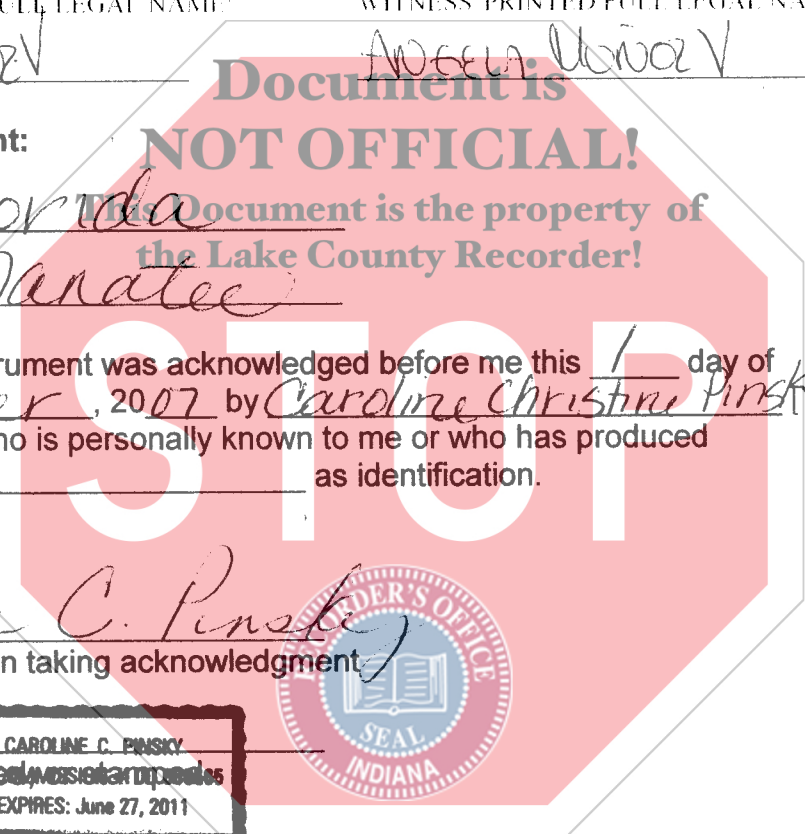
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Acknowledgement:

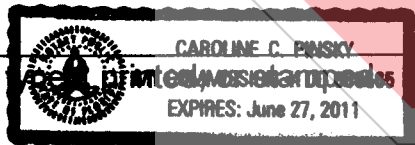
STATE OF Florida

COUNTY OF Manatee



The foregoing instrument was acknowledged before me this 1 day of November, 2007 by Caroline Christine Pinsky [YOUR FULL LEGAL NAME], who is personally known to me or who has produced FL DL as identification.

Caroline C. Pinsky
Signature of person taking acknowledgment



Name

Title or rank

Serial number (if applicable)

No: 920077452

LEGAL DESCRIPTION

Lot "I" in Second South Hammond Addition, in the City of Hammond, as per plat thereof, recorded in Plat Book 12, page 6, in the Office of the Recorder of Lake County, Indiana.





OFFICE OF THE LAKE COUNTY RECORDER

LAKE COUNTY GOVERNMENT CENTER
2293 NORTH MAIN STREET
CROWN POINT, INDIANA 46307

MICHAELA A. BROWN
Recorder



PHONE (219) 755-3730
FAX (219) 755-3257

MEMORANDUM

DISCLAIMER

Document is

NOT OFFICIAL!

**This document has been recorded as presented.
It may not meet with State of Indiana Recordation requirements.
This Document is the property of
the Lake County Recorder!**

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