

# DURABLE POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS:

That I/we, (grantor's name) FREDERICK GREEN, the undersigned Grantor(s), of (complete address) MERRILL GARDENS 1565 Virginia Ranch Rd. Apt #103 GARDNERVILLE NV. 89410 do hereby appoint and grant a durable power of attorney to (appointee's name) FREDERICK MARK GREEN of (complete address) 753 EAST PEAK LANE GARDNERVILLE, NV. 89460 as my attorney in fact.

Granting to my appointed attorney-in-fact full power and authority to do and undertake all acts on my behalf that I/we could do personally including but not limited to the right to sell, deed, buy trade, mortgage, assign rent or dispose of any real personal property; the right to execute, accept, undertake and perform all contracts in my name; the right to deposit, endorse, or withdraw funds to or from any of my bank accounts or safe deposit box; the right to borrow, collect, lend invest or reinvest funds; the right to initiate, defend, commence or settle legal actions on my behalf; the right to vote (in person or by proxy) any shares or beneficial interest in any entity, and the right to retain any accountant, attorney or other advisor deemed necessary to protect my interests relative to any foregoing unlimited power. My/our attorney-in-fact shall have full power to execute, deliver and accept all documents and undertake all acts consistent with the foregoing.

This power of attorney shall become effective upon and remain in effect only during such time periods as I may be mentally or physically incapacitated and unable to care for my/our own needs or make competent decisions as are necessary to protect my interests or conduct my/our affairs.

My/our attorney-in-fact hereby accepts his appointment subject to its items and agrees to act and perform in said fiduciary capacity consistent with my best interests as he in his best discretion deems advisable, and I/we affirm and ratify all acts so undertaken.

This power of attorney may be revoked by me/us at any time, and shall automatically be revoked upon my/our death, provided any person relying on this power of attorney shall have full rights to accept the authority of my attorney of my/our attorney-in-fact until in receipt of actual notice of revocation.

I hereby agree to accept the appointment as attorney-in-fact, pursuant to the foregoing Power of Attorney.

[Signature]  
Attorney-in-Fact Signature

In Witness Whereof, I/We have hereunto set my hand/our hands this 13 day of December, 2002

[Signature]  
Grantor's Signature  
FREDERICK GREEN  
Print or type name here

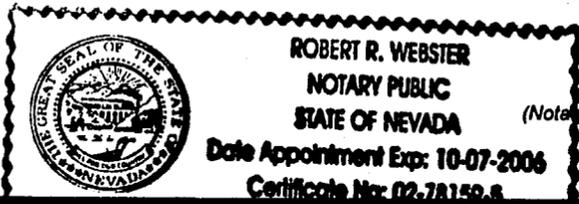
\_\_\_\_\_  
Grantor's Signature  
\_\_\_\_\_  
Print or type name here

STATE OF NEVADA )  
COUNTY OF DOUGLAS )

This instrument was acknowledged before me on (date) 12/13/02

By (person(s) appearing before notary public) FREDERICK GREEN

[Signature]  
Notary Public  
My commission expires: 10-02-2006



RECORDING REQUESTED BY AND MAIL TAX STATEMENT TO  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_

THIS SPACE FOR RECORDERS USE ONLY  
REQUESTED BY  
[Signature]  
IN OFFICIAL RECORDS OF  
DOUGLAS CO., NEVADA  
2002 DEC 13 AM 11:26  
LINDA SLATER  
RECORDER  
\$ 14.00 PAID Be DEPUTY  
0560643  
BK 1202 PG 05735