

REVOCATION OF POWER OF ATTORNEY

TO WHOM IT MAY CONCERN: on this 13th day of JANUARY, 20 02,
I, MARGARET ELIZABETH JOHNSON, the undersigned Grantor(s),
a resident of MINDEN, NEVADA, County of
DOUGLAS, State of NEVADA executed a Power of Attorney
appointing LINDA JOHNSON my attorney in fact to perform certain
acts for me.

On this 25th day of JULY, 20 1989, said Power of Attorney was recorded in the Office of the
Recorder of DOUGLAS County, State of NEVADA, in Book
789 pg 2770, Instrument Number 207345.

I HEREBY REVOKE SAID POWER OF ATTORNEY, AND ALL POWERS THEREIN GRANTED TO MY SAID
ATTORNEY-IN-FACT.

IN WITNESS WHEREOF, I have hereunto set my hand this 13th day of JANUARY, 20 02

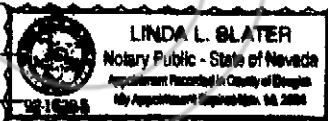
Margaret Elizabeth Johnson
Signature of Grantor

MARGARET ELIZABETH JOHNSON
Print or type name here

STATE OF Nevada }
COUNTY OF Douglas }

This instrument was acknowledged before me on (date) January 13, 2002
By (person(s) appearing before notary public) MARGARET ELIZABETH JOHNSON

Linda L. Slater
Notary Public
My commission expires: (92-16285)



(Notary Stamp)

RECORDING REQUESTED BY AND MAIL TAX STATEMENT TO
Name: Margaret E. Johnson
Address: P.O. Box 301
City/State/Zip: Minden NV 89423

THIS SPACE FOR RECORDERS USE ONLY
REQUESTED BY
Margaret Johnson
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA
2003 JAN 13 PM 1:56
WERNER CRISTEN
RECORDER
\$14⁰⁰ PAID Bh DEPUTY

POA102
Nevada Legal Forms and Books, Inc. (702) 870-8977
3901 West Charleston Boulevard
Las Vegas, Nevada 89102
www.legalforms.com
© 2000 Consult an attorney if you doubt this forms fitness for your purpose.

0563740
BK0103PG04517