



STATE OF ALABAMA
COUNTY OF SUMTER

KNOW ALL MEN BY THESE PRESENTS: That I, Gwendolyn E. Clark, the mother and custodial parent of Mario Sturdivant, pursuant to the provisions of Section 26-2A-7 Code of Alabama, 1975, have made, constituted and appointed and by these presents do hereby make, constitute, and appoint Lendon Wallace, who resides at 148 Blue Springs Place, Alabaster, Alabama 35007 and who is the natural father of the said Mario Sturdivant, my true and lawful attorney for me and in my name, place, and stead, and as my act and deed to exercise all parental rights and control over my son, Mario Sturdivant, who was born January 15, 1985 and whose Social Security Number is 416-21-7076, which said powers shall include the right to execute documents in my name to provide for the education, medical treatment and general welfare of my said son, Mario Sturdivant.

Giving and granting unto my said attorney full power and authority to do and perform any and every act, deed, matter, and anything whatsoever in and about exercising the parental rights and control over my son as fully and effectually to all intents and purposes as I might or could do in my own proper person if personally present and I hereby ratify and confirm all that my said attorney shall lawfully do or cause to be done by virtue of these presents.

And I hereby declare that any act or thing lawfully done hereunder by my said attorney shall be binding on me 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 reliable intelligence or notice thereof shall have been received by any person acting in reliance hereon. This power of attorney shall not be affected by my subsequent disability, incompetency or incapacity.

IN WITNESS WHEREOF, I have hereunto set my hand and seal on this the 7th
of August, 2002.

Gwendolyn E. Clark (SEAL)
Gwendolyn E. Clark

STATE OF ALABAMA X
 X
COUNTY OF SUMTER X

I, Lisa B. Stuart a Notary Public in and for said County
and State, hereby certify that Gwendolyn E. Clark, whose name is signed to the foregoing
power of attorney, and who is known to me, acknowledged before me on this day that,
being informed of the contents of said power of attorney, she executed the same voluntarily
on the day the same bears date.

Given under my hand and official seal of office this the 7th day of August, 2002.

Lisa B. Stuart
Notary Public
My Commission Expires: 3/12/10