Shelby Cnty Judge of Probate AL 10/02/2014 02:19:36 PM FILED/CERT

DURABLE POWER OF ATTORNEY

Containing Health Care Surrogate & Pre-Need Guardian Provisions, and Provisions Relating to Transfer of Real Property **Including Homestead Property**

BY THIS DURABLE POWER OF ATTORNEY, I, GWENDOLYN ROBERSON, of Lake County, Florida, appoint my daughter, PAMELA MARIE DODSON, as my attorney-in-fact, to manage my affairs in my name, place and stead as more particularly set forth herein below. Upon the death of my daughter, PAMELA MARIE DODSON, an adjudication of her incapacity, or her written renunciation of this Durable Power of Attorney, I appoint my daughter, TERRY ANNE CARDONE, as successor attorney-in-fact, to manage my affairs in my name, place and stead as more particularly set forth herein below. The last successor attorney-in-fact, named above, shall have the authority to designate one or more successor agents to act as an agent if said last successor attorney-in-fact resigns, dies or becomes incapacitated.

This Durable Power of Attorney is not affected by my subsequent incapacity and is exercisable from the date of execution until such time as I shall die, or I shall revoke the power, or I am adjudicated totally or partially incapacitated unless a Court determines that certain authority in this document is to remain exercisable by my attorney-in-fact. It is my intent that a photocopy or electronically transmitted copy of this Durable Power of Attorney shall have the same effect as the original.

GENERAL GRANT OF POWER

I hereby grant to my attorney-in-fact full power and authority to exercise or perform any act, power, duty, right or obligation whatsoever that I now have or may hereafter acquire, relating to any person, matter, transaction, or any interest in property owned by me, including, without limitation, my interest in all real property, including homestead real property; all personal property, tangible or intangible; all property held in any type of joint tenancy, including a tenancy in common, joint tenancy with right of survivorship, or a tenancy by the entirety; all property over which I hold a general, limited, or special power of appointment; choses in action, and all other contractual or statutory rights or elections, including, but not limited to, any rights or elections in any probate or similar proceeding to which I am or may become entitled; all as to such property now owned or hereafter acquired by me. I grant to my attorney-in-fact full power and authority to do everything necessary in exercising any of the powers herein granted as fully as I might or could do if personally present, with full power of substitution or revocation. Except as otherwise limited by applicable law, or by this Durable Power of Attorney, my attorney-in-fact has full authority to perform without prior court approval, every act authorized and specifically enumerated in this Durable Power of Attorney. I hereby ratify and confirm that my attorneyin-fact shall lawfully have, by virtue of this Durable Power of Attorney, the powers herein granted, including, but not limited to, the following:

- My attorney-in-fact has the power and authority to collect all sums of money and other property that may be payable or belonging to me, and to execute receipts, releases, cancellations or discharges.
- My attorney-in-fact has the power and authority to settle any account in which I have any interest and to pay or receive the balance of that account as the case may require. My attorney-in-fact is granted full power and authority to take the following actions:
- Assert and prosecute before a court or administrative agency a claim, claim for relief, cause of action, counterclaim, cross-complaint, or offset, and defend against an individual, a legal entity, or government, including suits to recover property or other things of value, to recover damages sustained by me, to eliminate or modify tax liability, or to seek an injunction, specific performance, or other relief.
 - Bring an action to determine adverse claims, intervene in litigation, and act as amicus curiae.
 - In connection with litigation:
- Procure an attachment, garnishment, libel, order of arrest, or other preliminary, provisional, or intermediate relief, and use any available procedure to effect, enforce, or satisfy a judgment, order, or decree.
- Perform any lawful act, including acceptance of tender, offer of judgment, admission (b) of facts, submission of a controversy on an agreed statement of facts, consent to examination before trial, and binding me in litigation.
- Submit to arbitration, settle, and propose or accept a compromise with respect to a claim or 4. litigation.
- Waive the issuance and service of process upon me; accept service of process; appear for me; designate persons upon whom process directed to me may be served; execute and file or deliver stipulations on my behalf; verify pleadings; seek appellate review; procure and give surety and indemnity bonds; contract and pay for the

preparation and printing of records and briefs; receive and execute and file or deliver a consent, waiver, release, confession of judgment, satisfaction of judgment, notice, agreement, or other instrument in connection with the prosecution, settlement, or defense of a claim or litigation.

- 6. Act for me with respect to bankruptcy or insolvency proceedings, whether voluntary or involuntary, concerning me or some other person, or with respect to a reorganization proceeding, or with respect to an assignment for the benefit of creditors, receivership, or application for the appointment of a receiver or trustee, that affects an interest of mine in property or other thing of value.
- 7. Pay a judgment against me or a settlement made in connection with litigation, and receive and conserve money or other thing of value paid in settlement of or as proceeds of a claim or litigation.
- c. My attorney-in-fact has the power and authority to borrow money on such terms and with such security as my attorney-in-fact may think fit and to execute all notes, mortgages and other instruments that my attorney-in-fact finds necessary or desirable.
- d. My attorney-in-fact has the power and authority to conduct banking transactions as provided in section 709.2208(1), Florida Statutes, including, but not limited to draw, accept, endorse or otherwise deal with any checks or other commercial or mercantile instruments for my benefit, specifically including the right to make withdrawals from any savings account or savings and loan deposits. My attorney-in-fact has the power and authority to handle any and all of my banking needs, including, but not limited to, adding additional names to an existing account, removing name(s) from an existing account, signing checks on my behalf, making deposits on my behalf, receiving bank statements, vouchers, notices or similar documents from a financial institution, and opening and/or closing any account in my name (including but not limited to, any checking, savings, certificate of deposit, money market, Christmas club or any other type of account that a bank may offer); to receive and endorse for deposit in any account any payment that I receive from any branch or department of the United States or other government, including, without limitation, Social Security payments, Veteran's Administrations payments or grants, Medicare or Medicaid payments. My attorney-in-fact has the power and authority to borrow money, pledge as security any personal property in order to borrow, pay, renew or extend the time of payment of any debt.
- e. My attorney-in-fact has the power and authority to purchase, to redeem bonds issued by the United States government or any of its agencies, any other bonds and any certificates of deposit or other similar assets belonging to me.
- f. My attorney-in-fact has the power and authority to conduct investment transactions as provided in section 709.2208(2), Florida Statutes, including, but not limited to the purchase, sell, assign or exchange, exercise voting rights in and to all types of securities and financial instruments including, but not limited to, bonds, shares of stock, warrants, debentures, mutual funds or other assets belonging to me, and execute all assignments and other instruments necessary or proper for transferring them to the purchaser or purchasers, and give good receipts and discharges for all money payable in respect to them. My attorney-in-fact has the power to execute stock powers or similar documents on my behalf and delegate to a transfer agent or similar person the authority to register any stocks, bonds, or other securities either into or out of my name or nominee's name.
- My attorney-in-fact has the power and authority to: 1) Purchase, to sell, exchange, convey with or without covenants, quitclaim, release, surrender, partition or consent to partitioning, subdivide, apply for zoning, rezoning or other governmental permits, plat or consent to platting, develop, grant options, rent, lease for any term, mortgage any real estate or interests in it, including homestead property, for such considerations and upon such terms and conditions as my attorney-in-fact may see fit, and release, assign, satisfy, enforce by litigation, execute, acknowledge and deliver all instruments conveying or encumbering title to property owned by me alone as well as any owned by me and by any other person, jointly. If I am married, the attorney-in-fact may not mortgage or convey my homestead property without joinder of my spouse or my spouse's legal guardian. Joinder by my spouse may be accomplished by the exercise of authority in a Durable Power of Attorney executed by my joining spouse, and either my spouse or I may appoint the other as attorneyin-fact. 2) To contract with any person for leasing all or any real estate for such periods, at such rents and subject to such conditions as my attorney-in-fact shall deem advisable, to let any such person into possession thereto, to execute all such leases and contracts as shall be necessary or proper, to give notice of eviction to any tenant or occupant thereof, to receive and recover from all or any number of the tenants and occupants thereof all rents and sums of money which now are or shall hereafter become due and payable in respect thereof, and on nonpayment of any part or all thereof, to take all necessary or proper means and proceedings for terminating the tenancy or occupancy of such tenants or occupants and for evicting tenants or occupants and recovering the possession thereof. 3) Use, develop, alter, replace, remove, erect or install structures or other improvements upon real property, to change the form of title of an interest in or right incident to real property, to dedicate to public or private use, with or without consideration, easements over real property.
- h. If my attorney-in-fact is also named as a Trustee or a Successor Trustee, under any Trust created by me, then my attorney-in-fact may also exercise all the Trustee powers granted to me under the terms of that Trust, including, but not limited to, the power to sell, convey, mortgage, lease or otherwise dispose of any real property, or interest in real property, held by that Trust.

- i. My attorney-in-fact is granted full power and authority to execute any documents on my behalf for the purpose of qualifying for any public or private benefits, including, but not limited to, applying for Medicaid benefits and, if my income exceeds any Medicaid income limit, to create, amend, or modify an irrevocable income trust and to transfer so much of my income to said trust as will enable me to qualify for Medicaid benefits. My attorney-in-fact is granted full power and authority to sign on my behalf any document necessary to reflect my intention to return to my residence after any incapacity or other condition which prevents me from currently residing in such residence.
- j. My attorney-in-fact has the power and authority to handle my Medicare affairs, if I am a Medicare Patient. Medicare administrators are authorized to release to my attorney-in-fact, Medicare information, even that information covered by the Privacy Act.
- k. My attorney-in-fact has the power and authority to represent me before the Treasury Department in connection with any matter involving any federal taxes in which I am a party, to prepare, sign, execute, verify and file any Federal, State, County and Municipal income, payroll, FICA, gift, property, estate and/or any other (for all periods, whether before or after the execution of this instrument) return required to be made under the revenue laws of the United States, or the Internal Revenue Code, or under the statutes of any state and to file any claim for refund, offer and compromise or application for a closing agreement, receive and endorse refund checks, execute waivers of any period of limitation, request extensions of time, execute any waiver of restrictions on assessment for collection of any tax, to execute consents extending the statutory period of assessments or collections of taxes, to receive confidential information regarding tax matters, to execute a closing agreement (under Internal Revenue Code Section 7121, or its successor provisions) in respect to any tax liability or specific matter, to execute a protest to a determination of taxes, to delegate authority or to substitute another attorney or agent and to execute Petition of Appeal to the United States Tax Court.
- l. My attorney-in-fact has the power and authority, in connection with any pension, profit sharing or stock bonus plan, individual retirement arrangement, s. 403(b) annuity or account, s. 457 plan or any other retirement plan, arrangement or annuity in which I am a participant or of which I am a beneficiary (whether established by my attorney-in-fact or otherwise), (each of which is hereinafter referred to as "such Plan"):
- 1. To make contributions (including "rollover" contributions) or cause contributions to be made to such Plan with my funds or otherwise on my behalf.
- 2. To receive and endorse checks or other distributions to me from such Plan, or to arrange for the direct deposit of same in any account in my name or in the name of any revocable "living" trust established by me.
- 3. To elect a form of payment of benefits from such Plan, to withdraw benefits from such Plan, to make contributions to such Plan, and to make, exercise, waive or consent to any and all elections and/or options that I may have regarding the contributions to, investments or administration, of, or distribution or form of benefits under, such Plan.
- 4. To designate one or more beneficiaries or contingent beneficiaries for any benefits payable under such Plan on account of my death, and to change any such prior designation of beneficiary made by me or by my attorney-in-fact; provided, however, that my attorney-in-fact shall have no power to designate my attorney-in-fact directly or indirectly as a beneficiary or contingent beneficiary to receive a greater share or proportion of any such benefits than my attorney-in-fact would have otherwise received unless such change is consented to by all other beneficiaries who would have received the benefits but for the proposed change. This limitation shall not apply to any designation of my attorney-in-fact as a beneficiary in a fiduciary capacity, with no beneficial interest.
 - 5. If authorized by the plan, to borrow from, sell assets to, and purchase assets from the plan.
- 6. Waive my spouse as the required beneficiary of a joint or survivor annuity or any other benefit under any qualified plan, if I am married at the time of the waiver.
- 7. Consent to a waiver of my right as the required beneficiary of a joint and survivor annuity or any other benefit under any qualified plan, if I am married at the time of the consent.
- m. My attorney-in-fact has the power and authority to access, withdraw from or place articles into any safe deposit box held in my name at any banking, financial or other institution holding such safe deposit box.
- n. My attorney-in-fact has the power and authority to demand, obtain, review and release to others my medical records or other documents protected by the patient-physician privilege, attorney-client privilege or any similar privilege; to file or process claims for any medical bills with all insurance companies through which I have coverage, including, but not limited to Medicare and Medicaid; to receive from Blue Cross/Blue Shield or any other insurer, information obtained in adjudication of any claim in regard to services furnished to me under Title 18 of the Social Security Act.
 - o. My attorney-in-fact has the power and authority to:
 - 1. Operate, buy, sell, enlarge, reduce, and terminate a business interest.
- 2. To the extent that an agent is permitted by law to act for a principal and subject to the terms of the partnership agreement:
- (a) Perform a duty or discharge a liability and exercise a right, power, privilege, or option that I have, may have, or claim to have under a partnership agreement, whether or not I am a partner.

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- (b) Enforce the terms of a partnership agreement by litigation or otherwise.
- (c) Defend, submit to arbitration, settle, or compromise litigation to which I am a party because of membership in the partnership.
- Exercise in person or by proxy, or enforce by litigation or otherwise, a right, power, privilege, or option that I have or claim to have as the holder of a bond, share, or other instrument of similar character, and defend, submit to arbitration, settle, or compromise litigation to which I am a party because of a bond, share, or similar instrument.
 - 4. With respect to any business that I solely own:
- (a) Continue, modify, renegotiate, extend, and terminate a contract made with an individual or a legal entity, firm, association, or corporation by me or on my behalf with respect to the business before and after execution of this Power.
- (b) Determine the policy of the business as to (1) the location of its operation; (2) the nature and extent of its business; (3) the methods of manufacturing, selling, merchandising, financing, accounting, and advertising employed in its operation; (4) the amount and types of insurance carried; and (5) the mode of engaging, compensating, and dealing with its accountants, attorneys, and other agents and employees.
- (c) Change the name or form of organization under which the business is operated, and enter into a partnership agreement with other persons or organize a corporation to take over all or part of the operation of the business.
- (d) Demand and receive money due or claimed by me or on my behalf in the operation of the business, and control and disburse the money in the operation of the business.
- 5. Expansion of a business, including investing additional capital into a business in which I have an interest.
 - 6. Join in a plan of reorganization, consolidation, or merger of the business.
- 7. Sell or liquidate a business or part of it at the time and upon the terms my attorney-in-fact considers desirable.
- 8. Represent me in establishing the value of a business under a buy-out agreement to which I am a party.
- 9. Prepare, sign, file, and deliver reports, compilations of information, returns, or other papers with respect to a business that are required by a governmental agency or instrumentality or that my attorney-in-fact considers desirable, and make related payments.
- 10. Pay, compromise, or contest taxes or assessments and do any other act that my attorney-in-fact considers desirable to protect me from illegal or unnecessary taxation, fines, penalties, or assessments with respect to a business, including attempts to recover, in any manner permitted by law, money paid before or after this Power is executed.
- p. My attorney-in-fact has the power and authority to act for me in all matters that affect a trust, probate estate, guardianship, conservatorship, escrow, custodianship, or other fund from which I am, may become, or claim to be entitled, as a beneficiary, to a share or payment, whether such matters deal with property located in this state or elsewhere. My attorney-in-fact has the power and authority to:
- 1. Accept, reject, disclaim, receive, receipt for, sell, assign, release, pledge, exchange, or consent to a reduction in or modification of a share in or payment from the fund.
- 2. Demand or obtain by litigation or otherwise money or other thing of value to which I am, may become, or claim to be entitled by reason of the fund.
- 3. Initiate, participate in, and oppose litigation to ascertain the meaning, validity, or effect of a deed, will, declaration of trust, or other instrument or transaction affecting my interest.
 - 4. Initiate, participate in, and oppose litigation to remove, substitute, or surcharge a fiduciary.
 - 5. Conserve, invest, disburse, and use anything received for an authorized purpose.
- 6. Transfer an interest of mine in real property, stocks, bonds, accounts with financial institutions, insurance, and other property to the Trustee of a revocable trust created by me as Trustor.
- 7. Convey or release any contingent or expectant interests in property, including marital property rights, and any rights of survivorship incident to joint tenancy or tenancy by the entirety.
- q. My attorney-in-fact has the power and authority to resign from any fiduciary position to which I have been or may be in the future named, appointed, nominated, or elected, including by way of illustration, but not of restriction, the positions of executor, administrator, personal representative, trustee, agent, guardian, director or officer of a corporation, or governmental position or office; and to take whatever steps are necessary to accomplish such resignation, for example, by rendering an accounting or appearing in court to receive approval for such action, as appropriate.
 - r. My attorney-in-fact has the power and authority to:

- 1. Do the acts necessary to maintain my customary standard of living and the customary standard of living of any persons legally entitled to my support to the extent such acts would not reduce the availability of government benefits to any such person, including providing living quarters by purchase, lease, or other contract, or paying the operating costs, including interest, amortization payments, repairs, and taxes, on premises owned by any such persons.
 - 2. To use my assets to provide all of the following:
 - (a) Normal domestic help.
 - (b) Usual vacations and travel expenses.
 - (c) Funds for shelter, clothing, food, appropriate education, and other current living costs.
- 3. Pay for necessary medical, dental, and surgical care, hospitalization, and custodial care of the individuals described in this paragraph.
- 4. Continue any provision made by me, for the individuals described in this paragraph, for automobiles or other means of transportation, including registering, licensing, insuring, and replacing them.
- 5. Maintain or open charge accounts for the convenience of the individuals described in this paragraph and open new accounts my attorney-in-fact considers desirable to accomplish a lawful purpose.
- 6. Continue payments incidental to my membership in or affiliation with a church, club, society, order, or other organization and continue contributions to those organizations.
- 7. Provide, in connection with my care, and in accordance with my established beliefs and customary activities, for the presence and involvement of church persons, clergy, or other persons to attend to my spiritual needs and permit them access to me, maintain or arrange for my membership in religious organizations, and permit my access to their activities and publications, including books, tapes, and similar materials.
- 8. House, or arrange for the housing, support, and maintenance of, any animals that I own or have custody of and pay reasonable boarding, kenneling, and veterinary fees for such animals, or if the support and maintenance of any such animal becomes unreasonably expensive, to dispose of such animal in a humane fashion, preferably by finding another home for the animal.
- 9. Arrange for my funeral or other memorial service and for burial or cremation of my remains, including the purchase of a burial plot or other place for interment of my remains or ashes.

Specific Real Estate Powers

My attorney-in-fact and his/her successor(s) are all granted authority to sell, convey, maintain, mortgage or to dispose of any real property, including but not limited to homestead property, and to execute any and all documents necessary to effectuate the sale, conveyance or encumbrance of real property. Such documents shall include, but not be limited to, contracts, deeds, affidavits, bills of sale, closing statements, mortgages notes and such other instruments as may be required to carry out the purposes herein expressed, and I, GWENDOLYN ROBERSON, hereby give and grant unto the attorney-in-fact named herein and his/her successor(s), said attorney-in-fact, full power and authority to do and perform all and every act and thing whatsoever requisite and necessary to be done in and about the premises as fully, to all intents and purposes, as I, GWENDOLYN ROBERSON, might or could do if personally present, with full power of substitution and revocation, hereby ratifying and confirming all that said attorney-in-fact shall lawfully do or cause to be done by virtue hereof.

The above powers conferred upon my attorney-in-fact extend to all of my right, title and interest in such property as I have described above and in which I may have an interest jointly with any other person, whether in an estate by the entirety, joint tenancy or tenancy in common.

2. AUTHORITY THAT REQUIRES SEPARATE ENUMERATION

a	My attor	ney-in-fact has the po	wer and authority to	create, amend,	or modify any	Revocable
Living Trust in my	name, for my b	enefit or for the benefi	t of my issue and/or	any other of my	dependents, inc	luding the
power to name or c	hange beneficiai	ries, to do and perform	all and every act and	d thing relating to	the creation, ar	nendment,
or modification of	any Revocable L	iving Trust. My attorn	ney-in-fact may deliv	ver, convey and/o	or transfer any of	r all of my
assets to the Truste	e or Trustees of	any trust created by me	or created by my at	torney-in-fact for	my benefit.	

b. My attorney-in-fact has the power to designate one or more beneficiaries or continge
beneficiaries in any account, whether banking or investment, held by any financial institution, provided, however, that n
attorney-in-fact shall have no power to designate my attorney-in-fact directly or indirectly as a beneficiary or continge
beneficiary to receive a greater share or proportion of any such benefits than my attorney-in-fact would have otherwi
received through my Last Will and Testament or Revocable Living Trust.

My attorney-in-fact has the power to create, amend, or modify an irrevocable income trust and to transfer so much of my income to said trust as will enable me to qualify for Medicaid benefits.
d. My attorney-in-fact has the power and authority to create, amend, or modify any Individual Retirement Account in my name, including the power to change beneficiaries, to begin or increase withdrawals and to do and perform all and every act and thing relating to the management of any Individual Retirement Account.
e. My attorney-in-fact has the power and authority, in connection with any pension, profit sharing or stock bonus plan, individual retirement arrangement, s. 403(b) annuity or account, s. 457 plan or any other retirement plan, arrangement or annuity in which I am a participant or of which I am a beneficiary (whether established by my attorney-in-fact or otherwise), (each of which is hereinafter referred to as "such Plan"). To designate one or more beneficiaries or contingent beneficiaries for any benefits payable under such Plan on account of my death, and to change any such prior designation of beneficiary made by me or by my attorney-in-fact; provided, however, that my attorney-in-fact shall have no power to designate my attorney-in-fact directly or indirectly as a beneficiary or contingent beneficiary to receive a greater share or proportion of any such benefits than my attorney-in-fact would have otherwise received unless such change is consented to by all other beneficiaries who would have received the benefits but for the proposed change. My attorney-in-fact has the power and authority to consent to a waiver of my right as the required beneficiary of a joint and survivor annuity or any other benefit under any qualified plan, if I am married at the time of the consent.
f. My attorney-in-fact is granted full power and authority to create, amend, or modify any Life Insurance Policy in my name, including the power to change beneficiaries, to begin or increase withdrawals, to authorize and receive a distribution of cash value, and to do and perform all and every act and thing relating to the management of any Life Insurance Policy.
g. My attorney-in-fact has the power and authority to claim, disclaim, or waive any interest in property that I have or would otherwise receive, including, but not limited to any homestead property and any elective share property.
h. My attorney-in-fact has the power and authority to act for me in all matters that affect a trust probate estate, guardianship, conservatorship, escrow, custodianship, or other fund from which I am, may become, or claim to be entitled, as a beneficiary, to a share or payment, whether such matters deal with property located in this state or elsewhere. My attorney-in-fact has the power and authority to accept, reject, disclaim, receive, receipt for, sell, assign release, pledge, exchange, or consent to a reduction in or modification of a share in or payment from any estate created above.
i. My attorney-in-fact has the power and authority to make gifts from any and all of my assets, to any individual or institution, including the making of gifts to my attorney-in-fact. My attorney-in-fact has the power and authority to make gifts of any of my assets (whether or not such assets are held in a revocable trust created by me or by my attorney-in-fact pursuant to this Power) to any individuals, especially to take advantage of the federal estate and gift tax annual exclusion, (and/or to any charities), provided that I have previously made gifts to such donee, or such donee is a beneficiary under my most recently executed Will or Living Trust (as determined by my attorney-in-fact), or such donee is otherwise a natural object of my bounty. My attorney-in-fact, however, shall make no gift: (i) to said attorney-in-fact that would exceed the largest amounts not considered to have been appointed as a release by reason of an annual and non-cumulative lapse of a power under Section 2514(e) of the Internal Revenue Code of 1986, as amended, any percentage described therein being relative to the value of all of my assets; or (ii) that would have the effect of discharging said attorney-in-fact of any legal obligation of support. In addition, gifts to my attorney-in-fact may only be made it substantially identical gifts are simultaneously made to others similarly situated, exclusive of any donee whose receipt of a gift would supplant or replace any government benefits that are being or would be provided absent a gift. I authorize my attorney-in-fact to appoint a Special Agent who, relative to my attorney-in-fact, is not a related or subordinate party as described in Section 672 of the Internal Revenue Code of 1986, as amended, to make gifts of my assets to the parties previously described in this paragraph (whether or not such assets are held in a revocable trust created by mc or my attorney-in-fact pursuant to this Power) if, in my attorney-in-fact's judgment, the gift of such assets will qualify me for government

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3. LIMITATIONS

Notwithstanding the powers contained in this Durable Power of Attorney, my attorney-in-fact may not:

- a. Perform duties under a contract that requires the exercise of my personal services;
- b. Make any affidavit as to my personal knowledge;
- c. Vote in any public election on my behalf;
- d. Execute or revoke any Will or Codicil;
- e. Create, amend, modify or revoke any document or other disposition effective at my death or transfer assets to an existing Trust created by me unless expressly authorized by this Durable Power of Attorney; or
 - f. Exercise powers and authority granted to me as a court-appointed fiduciary.

4. HEALTH CARE SURROGATE PROVISIONS

(Designation of Health Care Surrogate Pursuant to Florida Statutes §765.201)

In the event that I have been determined to be incapacitated to provide informed consent for medical treatment and surgical and diagnostic procedures, I wish to designate my daughter, PAMELA MARIE DODSON, as my surrogate for health care decisions. In the event that my daughter, PAMELA MARIE DODSON, is or becomes unwilling or unable to perform her duties, I wish to designate my daughter, TERRY ANNE CARDONE, as my successor health care surrogate. My capacity to make health care decisions for myself shall be determined by my attending physician pursuant to the standards set forth in Florida Statutes §765.204. My capacity to make health care decisions for myself may also be determined by a court of competent jurisdiction. This designation revokes any prior health care surrogate designation which I may have made.

I fully understand that this designation will permit my surrogate to make health care decisions and to provide, withhold, or withdraw consent on my behalf; to apply for public benefits to defray the cost of health care; and to authorize my admission to or transfer from a health care or a mental health care facility.

Additional Instructions

Without limitation on the rights and authority of my Surrogate, my Surrogate may, among other acts and decisions:

- a. Have final authority to act for me and to make health care decisions for me in matters regarding my health care during my said incapacity;
- b. Consult with appropriate health care providers to provide informed consent in my best interests as the Surrogate perceives same. If there is no indication of what health care decision I would have chosen, the Surrogate may consider my best interest in deciding that proposed treatments are to be withheld or that treatments currently in effect are to be withdrawn;
 - c. Give any consent in writing using the appropriate consent forms;
- d. Have access to all of my appropriate clinical records and may authorize the release of information and clinical records to appropriate persons to ensure the continuity of my health care;
- e. Apply for public benefits, including but not limited to, Medicare and Medicaid, for me, and to have access to information regarding my income and assets to the extent required to make application;
 - f. Authorize my transfer and admission to or discharge from a health care facility;
 - g. Authorize my transfer and admission to or discharge from a mental health care facility;
- h. Authorize my discharge, even against medical advice, from any hospital, nursing home, residential care, assisted living or similar facility or service;
- i. Consent, refuse or withdraw consent to any and all types of medical care, treatment, surgical procedures, diagnostic procedures, medication, and the use of mechanical or other procedures that affect any bodily function, including, but not limited to, artificial respiration, nutritional support and hydration, and cardiopulmonary resuscitation;
- j. Withhold or withdraw life-prolonging or death-delaying procedures in accordance with a written declaration, living will or last illness will and testament I may have or will in the future make;
- k. Seek Court orders providing for the withholding and withdrawal of life-prolonging or death-delaying procedures in accordance with a living will or last illness will and testament or declaration I may have made;
- l. <u>HIPAA Release Authority</u>. I intend for my health care surrogate to be treated as I would be with respect to my rights regarding the use and disclosure of my individually identifiable health information or other medical records. This release authority applies to any information governed by the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), 42 U.S.C. 1320d and C.F.R. 160-164. I authorize any physician, healthcare professional, dentist, health plan, hospital, clinic, laboratory, pharmacy or other covered health care provider, any insurance company and the Medical Information Bureau, Inc. or other health care clearinghouse that has provided

treatment or services to me or that has paid or is seeking payment from me for such services to give, disclose and release to my health care surrogate without restriction, all of my individually identifiable health information and medical records regarding any past, present or future medical or mental health condition, to include all information relating to the diagnosis and treatment of HIV/AIDS, sexually transmitted diseases, mental illness and drug or alcohol abuse. The authority given my health care surrogate shall supersede any prior agreement that I may have made with my health care providers to restrict access to or disclosure of my individually identifiable health information. The authority given my health care surrogate has no expiration date and shall expire only in the event that I revoke the authority in writing and deliver it to my health care provider.

m. Do all acts and make all decisions regarding my health care as authorized by law.

My Surrogate shall not be liable or responsible for any costs or expenses of my medical treatment or care except as expressly stated by Statute and my Surrogate's signature on any admission papers for a health care facility shall not make the Surrogate liable or responsible for any costs and expenses incurred for my care at such health care facility, it being understood that the Surrogate acts for me and in my stead, and I, alone, would be liable or responsible for such costs and expenses.

I further affirm that this designation is not being made as a condition of treatment or admission to a health care or mental health care facility.

5. STANDARD OF CARE

Except as otherwise provided herein, any attorney-in-fact named herein is a fiduciary who must observe the standards of care applicable to trustees as described in Florida Statutes Section 708.2101. My attorney-in-fact is not liable to third parties for any act pursuant to this Durable Power of Attorney if the act was authorized at the time. If the exercise of the power is improper, my attorney-in-fact is liable to interested persons as described in Florida Statutes Section 731.201(23) for damage or loss resulting from a breach of fiduciary duty by my attorney-in-fact to the same extent as the trustee of an express trust. If my attorney-in-fact has accepted appointment either expressly in writing or by acting under the power, my attorney-in-fact is not excused from liability for failure either to participate in the administration of assets subject to the power or for failure to attempt to prevent a breach of fiduciary obligations thereunder.

6. MULTIPLE ATTORNEYS-IN-FACT

- a. If my Durable Power of Attorney is vested jointly in two or more attorneys-in-fact, each co-attorney-in-fact is specifically authorized to act independently.
- b. If a third party or health care provider is, or becomes aware, of a dispute between my named attorneys-in-fact, the decision of the first named attorney-in-fact shall control.
- c. Any attorney-in-fact who has not concurred in the exercise of authority is not liable to me or any other person for the consequences of the exercise. A dissenting attorney-in-fact is not liable for the consequences of an act in which the attorney-in-fact joins at the direction of the majority of the joint attorneys-in-fact if the attorney-in-fact expresses such dissent in writing to any of the other joint attorneys-in-fact at or before the time of the joinder.
- d. Unless my Durable Power of Attorney provides otherwise, all authority vested in multiple attorneys-in-fact may be exercised by the one or more that remain after the death, resignation, or incapacity of one or more of the multiple attorneys-in-fact.
- e. While I am granting the power to any of my attorneys-in-fact to act alone, as set forth in paragraphs 5a and 5b above, it is my hope and request that they make a reasonable effort to consult with each other before making important decisions hereunder.

7. <u>INTERPRETATION AND GOVERNING LAW</u>

This instrument is executed by me in the State of Florida, but it is my intention that this power of attorney shall be exercisable in any other state or jurisdiction where I may have any property or interests in property.

This instrument is to be construed and interpreted as a Durable Power of Attorney as provided for in Florida Statutes Section 708.2101, and as a health care surrogate as provided for in Florida Statutes Chapter 765.201, as these statutes may be amended from time to time. The enumeration of specific powers herein is not intended to, nor does it, limit or restrict the general powers herein granted to my attorney-in-fact. This instrument is executed and delivered in the

State of Florida, and the laws of the State of Florida shall govern all questions as to the validity of this power and the construction of its provisions.

8. THIRD PARTY RELIANCE

- a. Any third party may rely upon the authority granted in my Durable Power of Attorney until the third party has received notice as provided herein.
- b. Until a third party has received notice of revocation pursuant to the terms contained herein, partial or complete termination of the Durable Power of Attorney by adjudication of incapacity, suspension by initiation of proceedings to determine incapacity, my death, or the occurrence of an event referenced in this Durable Power of Attorney, the third party may act in reliance upon the authority granted in this Durable Power of Attorney.
- c. A third party that has not received written notice hereunder may, but need not, require that my attorney-in-fact execute an affidavit stating that there has been no revocation, partial or complete termination, or suspension of the Durable Power of Attorney at the time the power of attorney is exercised. A written affidavit executed by my attorney-in-fact under this paragraph is attached.
- d. Third parties who act in reliance upon the authority granted to my attorney-in-fact hereunder and in accordance with the instructions of the attorney-in-fact will be held harmless by me from any loss suffered or liability incurred as a result of actions taken prior to receipt of written notice of revocation, suspension, notice of a petition to determine incapacity, partial or complete termination, or my death. A person who acts in good faith upon any representation, direction, decision, or act of my attorney-in-fact is not liable to me or to my estate, beneficiaries, or joint owners for those acts.
- e. My attorney-in-fact is not liable for any acts or decisions made by him or her in good faith and under the terms of the Durable Power of Attorney.

9. NOTICE

- a. A notice, including, but not limited to, a notice of revocation, partial or complete termination, suspension, or otherwise, is not effective until written notice is served upon my attorney-in-fact or any third persons relying upon this Durable Power of Attorney.
- b. Notice must be in writing and served on the person or entity to be bound by such notice. Service may be by any form of mail that requires a signed receipt or by personal delivery as provided in the Florida Statutes for service of process, and must otherwise be in accordance with Florida Statute Section 709.08.

10. DAMAGES AND COSTS

In any judicial action regarding this Durable Power of Attorney, including, but not limited to, the unreasonable refusal of a third party to allow an attorney-in-fact to act pursuant to the power, and challenges to the proper exercise of authority by the attorney-in-fact, per statute, the prevailing party is entitled to damages and costs, including reasonable attorney's fees.

11. VALIDITY

This Durable Power of Attorney shall be non-delegable, except as to the stock powers which may be delegated to a transfer agent per paragraph 1.f hereunder, and shall be valid until such time as I shall die, revoke the power, or shall be adjudged to be totally or partially incompetent by a court of competent jurisdiction. I may revoke the power only by providing written notice to my attorney-in-fact. All acts of my attorney-in-fact taken or done without actual knowledge of 1) my death, 2) an adjudication of my incompetency, or 3) my revocation are valid and effective, and are hereby ratified and confirmed.

12. REVOCATION OF PRIOR INSTRUMENTS

By this instrument I hereby revoke any power of attorney, durable or otherwise, that I may have executed prior to the date of this Durable Power of Attorney. I hereby confirm all acts of my attorney-in-fact pursuant to this power.

13. DECLARATION NAMING PRE-NEED GUARDIAN

(Designation of Pre-Need Guardian Pursuant to Florida Statutes §744.3045, as amended)

- a. If I am at any time determined to be an incapacitated person, as that term is defined in the Florida Guardianship Law, as it now exists or may be hereafter amended, I declare that my then serving attorney-in-fact is to serve as the plenary guardian of my property, to exercise all delegable legal rights and powers to perform all tasks necessary to care for my property or estate.
- b. I further declare that my then serving attorney-in-fact is also to serve as plenary guardian of my person, to exercise all delegable legal rights and powers to perform all tasks necessary to care for my person.
- c. I further declare that it is my intent and desire that the above-named attorney-in-fact be appointed by the Court having jurisdiction to serve without bond.

Any act that is done under this power between the revocation of this instrument and notice of that revocation to my attorney-in-fact shall be valid unless the person claiming the benefit of the act had notice of that revocation.

IN WITNESS WHEREOF, I have hereunto set my hand and seal on this 22 day of August, 2011.

Signed, sealed and delivered in the presence of:

4

GWENDOLYN ROBERSON, PRINCIPAL

CYNTIAIA DE HART (Witness)

STATE OF FLORIDA COUNTY OF SUMTER

BEFORE ME, the undersigned authority, duly authorized to take acknowledgments and administer oaths, personally appeared GWENDOLYN ROBERSON, _____ to me personally known or ____ who produced a Florida Driver's License as identification, who executed the within Power of Attorney, and who acknowledged the within Power of Attorney to be her free act and deed.

SWORN TO AND SUBSCRIBED BEFORE ME on this 2-day of August, 2011.

ROSEMARY SLATER
NOTARY PUBLIC

Rosemary Slater

Notary Public, State of FLORIDA My Commission #DD0932611

Expires OCTOBER 12, 2013

Bonded thru FLORIDA NOTARY ASSOCIATION

This Instrument Prepared by:
Michael D. Millhorn, Attorney At Law
Millhorn Law Firm
13710 U. S. Highway 441, Suite 100
The Villages, Florida 32159
(352) 753-9333 (800) 743-9732

ACCEPTANCE AFFIDAVIT

- 1. Affiant is the attorney-in-fact named in the above Durable Power of Attorney of GWENDOLYN ROBERSON, (the "Principal").
 - 2. Affiant hereby accepts the terms of this Durable Power of Attorney.
 - 3. To the best of Affiant's knowledge, after diligent search and inquiry:
- a. The Principal is a resident of the State of Florida and (i) is not deceased; (ii) has not been adjudicated incapacitated, and (iii) has not revoked, partially or completely terminated or suspended this Durable Power of Attorney; and
- b. A petition to determine the incapacity of or to appoint a guardian for the Principal is not pending.
- 4. Affiant agrees not to exercise any powers granted by the Durable Power of Attorney if Affiant attains knowledge that it has been revoked, partially or completely terminated, suspended or is no longer valid because of the death or adjudication of incapacity of the Principal.

PAMELA MARIE DODSON
Affiant and Attorney-In-Fact

STATE OF Alabama
COUNTY OF Shelly

BEFORE ME, the undersigned authority, duly authorized to take acknowledgments and administer oaths, personally appeared PAMELA MARIE DODSON, to me personally known or ____ who produced a as identification, who executed the within Acceptance Affidavit, and who acknowledged the within Acceptance Affidavit to be her free act and deed.

SWORN TO AND SUBSCRIBED BEFORE ME on this day of Houst, 2011.

{NOTARY SEAL}

MY COMMISSION EXPIRES SEPTEMBER 17, 2013

DURABLE POWER OF ATTORNEY

In this section of your Estate Planning binder you will find your Durable Power(s) of Attorney. The Durable Power of Attorney appoints a trusted person to manage your affairs should you later become mentally or physically incapacitated. That person is referred to as your Attorney-In-Fact.

The Durable Power of Attorney ceases to be effective at the death of the person creating the document.