

STATE OF MISSISSIPPI

COUNTY OF FORREST

GENERAL POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS, that I, Doris T. Wall,  
of 1225 Wall Ave. Hattiesburg, MS 39401, do hereby make, constitute and appoint by  
these presents, my granddaughter, \*Dorie J. Yontz  
of 5708 Woodbridge Lane, Midland, MI 48640,

as my true and lawful attorney, for me and in my name, place and stead, with full power

to: act for me in all matters affecting my personal or business affairs,  
including, but not limited to, the signing of my name to and/or on any  
documents or papers relating to banking affairs and/or accounts and with  
full power to mortgage, lease, sell, convey, and otherwise dispose of by  
general warranty of title or otherwise, all property owned by me or in  
which I may be interested, real, personal, and mixed. Further, without  
limiting the general nature of this power, my attorney is hereby granted specific  
full power and authority to make any and all decisions relative to my healthcare

It is my intention by this instrument to appoint the said Dorie J. Yontz, (see attached)

and I do hereby make, constitute and appoint the said Dorie J. Yontz,

individually and severally, my true and lawful attorney for me and in my name, place  
and stead, with full power to act for me and for all matters and things with power  
to do and perform all acts which I may in my own proper person perform and do.

I consent and authorize all acts by my attorney as though in fact done by me,  
given and granting unto my said attorney full power and authority to do and perform  
every act and thing whatsoever requisite and necessary to be done in and about all  
premises, as fully to all intents and purposes as I might or could do if personally  
present; hereby ratifying and confirming all that my said attorney shall lawfully do or  
cause to be done by virtue of these presents.

*This Power of Attorney shall not be affected by my subsequent disability or incompetence.*

IN WITNESS WHEREOF, I have hereunto set my hand and signature on this  
the 3 day of November, 192005.

Doris T. Wall

STATE OF MISSISSIPPI

COUNTY OF FORREST

PERSONALLY came and appeared before me, the undersigned authority in and for  
said County and State, Doris T. Wall, who

It is my intention by this instrument to appoint the said Dorie J. Yontz,  
and I do hereby make, constitute and appoint the said Dorie J. Yontz,  
individually and severally, my true and lawful attorney for me and in my name, place  
and stead, with full power to act for me and for all matters and things with power  
to do and perform all acts which I may in my own proper person perform and do.

I consent and authorize all acts by my attorney as though in fact done by me,  
given and granting unto my said attorney full power and authority to do and perform  
every act and thing whatsoever requisite and necessary to be done in and about all  
premises, as fully to all intents and purposes as I might or could do if personally  
present; hereby ratifying and confirming all that my said attorney shall lawfully do or  
cause to be done by virtue of these presents.

*This Power of Attorney shall not be affected by my subsequent disability or incompetence.*

IN WITNESS WHEREOF, I have hereunto set my hand and signature on this  
the 3 day of November, 192005.

Doris J. Wall

STATE OF MISSISSIPPI

COUNTY OF FORREST

PERSONALLY came and appeared before me, the undersigned authority in and for  
said County and State, Doris J. Wall, who  
acknowledged that he/she signed and delivered the within and foregoing Power of  
Attorney on the day and year therein mentioned.

GIVEN under my hand and official seal of office on this the 3rd day of  
November, 2005.

Jimmy O. Howard  
Notary Public Chancery Clerk  
By: Doris A. Middleton D.C.

My Commission Expires:  
1/6/2008

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needs and medical care, including but not limited to the power to grant, refuse, or withdraw treatment and the authority to confer with healthcare professionals and secure medical information pertaining to me.

STATE OF MISSISSIPPI  
FORREST COUNTY  
I CERTIFY THE INSTRUMENT  
WAS FILED AND RECORDED  
108006  
2005 NOV -3 PM 2:15  
WITNESS MY HAND AND SEAL  
JIMMY C. HAVARD  
CHANCERY CLERK

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