

**DURABLE FAMILY POWER OF ATTORNEY**

KNOW ALL MEN BY THESE PRESENTS that I, HILDA W. KIKTA, have made and appointed STEPHEN E. KIKTA as my true and lawful attorney and I empower him to act in my name, to collect and receive any sums of money to which I am entitled, and to handle, compromise and negotiate any and all of my business matters. He is authorized to transact business in my name and I empower him to lease, sell, purchase, convey, and mortgage lands and properties upon such terms and conditions as he deems proper. He is empowered to execute documents with full power and authority to do and perform every act as fully as I could do if personally present and I ratify and confirm all that is lawfully done by virtue hereof. He is further empowered to make gifts of any kind or nature including but not limited to gifts of real property and personal property.

This power specifically authorizes STEPHEN E. KIKTA to sign checks, make deposits or withdrawals, enter safe deposit boxes and generally handle all banking matters and insurance matters for the undersigned. This power also authorizes the said STEPHEN E. KIKTA to make medical decisions regarding my care, treatment, and hospitalization and to authorize additional treatment or to terminate or change existing treatment.

I certify that this is a Durable Family Power of Attorney and that STEPHEN E. KIKTA is related to me as my husband. This Durable Family Power of Attorney shall not be affected by disability of the Principal except as provided by Statute.

In the event my husband predeceases me, or is otherwise unable to act on my behalf, then I appoint my son, JOSEPH F. KIKTA, as my true and lawful attorney and direct that he shall have all the duties, rights, powers, liabilities, privileges and immunities which are hereinbefore given to my attorney as aforesaid.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 1<sup>st</sup> day of July, 2002.

Sealed and delivered in the  
presence of



ALBERT C. PENSON



HILDA W. KIKTA



LYNN S. DAUGHTON

STATE OF FLORIDA  
COUNTY OF LEON

The foregoing instrument was acknowledged before me by HILDA W. KIKTA, who is personally known to me, and is known to be the person described in and who executed the foregoing instrument, and acknowledged to and before me that she executed said instrument for the purposes therein expressed.

WITNESS my hand and official seal, this 1<sup>st</sup> day of July, 2002.

*Pamela B. Miller*

PAMELA B. MILLER

Notary Public

My Commission Expires:

