

# NOTICE OF COMMENCEMENT

Tax Parcel Identification Number 21-45-16-03087-132 (14713) County Clerk's Office Stamp or Seal

THE UNDERSIGNED hereby gives notice that improvements will be made to certain real property, and in accordance with Section 713.13 of the Florida Statutes, the following information is provided in this NOTICE OF COMMENCEMENT.

- Description of property (legal description): Lot 32 Forest Country 6<sup>th</sup> Addition WD 1338-610  
a) Street (job) Address: 120 SW Pinehurst Dr 32034 WD 1433-451
- General description of improvements: \_\_\_\_\_
- Owner Information  
a) Name and address: Denise Jones  
b) Name and address of fee simple titleholder (if other than owner) 120 SW Pinehurst Dr. Lake City FL  
c) Interest in property \_\_\_\_\_
- Contractor Information  
a) Name and address: Jerry Castagna 1459 SW Grandview Dr St 109 Lake City FL 32055  
b) Telephone No.: (813) 755-6867 Fax No. (Opt.) \_\_\_\_\_
- Surety Information  
a) Name and address: \_\_\_\_\_  
b) Amount of Bond: N/A  
c) Telephone No.: \_\_\_\_\_ Fax No. (Opt.) \_\_\_\_\_
- Lender  
a) Name and address: N/A  
b) Phone No.: \_\_\_\_\_
- Identity of person within the State of Florida designated by owner upon whom notices or other documents may be served:  
a) Name and address: N/A  
b) Telephone No.: \_\_\_\_\_ Fax No. (Opt.) \_\_\_\_\_
- In addition to himself, owner designates the following person to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes:  
a) Name and address: \_\_\_\_\_  
b) Telephone No.: \_\_\_\_\_ Fax No. (Opt.) \_\_\_\_\_
- Expiration date of Notice of Commencement (the expiration date is one year from the date of recording unless a different date is specified): \_\_\_\_\_

**WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.**

STATE OF FLORIDA  
COUNTY OF COLUMBIA

10. Denise L. Jones Leonor L. Jones  
Signature of Owner or Owner's Authorized Office/Director/Partner/Manager  
DENISE L. JONES Leonor L. Jones  
Print Name

The foregoing instrument was acknowledged before me, a Florida Notary, this 10 day of August, 2022, by:  
Denise Jones as Owner (type of authority, e.g. officer, trustee, attorney  
fact) for 120 SW Pinehurst Dr. (name of party on behalf of whom instrument was executed).

Personally Known ☒ OR Produced Identification \_\_\_\_\_ Type \_\_\_\_\_

Notary Signature Kristi L. Ditter Notary Stamp or Seal:



11. Verification pursuant to Section 92.525, Florida Statutes. Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true to the best of my knowledge and belief.

STATE OF FLORIDA, COUNTY OF COLUMBIA  
I HEREBY CERTIFY, that the above and foregoing  
is a true copy of the original filed in this office.  
JAMES M SWISHER JR, CLERK OF COURTS

By Valerie  
Deputy Clerk  
Date 8/10/2022

Signature of Natural Person Signing (in line #10 above.)