NOTICE OF COMMENCEMENT	Clerk's Office Stamp
Tax Parcel Identification Number:	A
	pt:201212005831 Date:4/16/2012 Time:11:02 AM DC,P.DeWitt Cason,Columbia County Page 1 of 1 B:1233 P:458
26-45-17-08749-124	
Florida Statutes, the following information is provided in th	
1. Description of property (legal description): LOT4	BLOCKB BRANDON HOTS SD SUZANNE WAY, LAKE CITY INTERIOR RENOVATIONS, HVAC
2. General description of Improvements: Poor into	INTERIOR RENOVATIONS, HVAC
3. Owner Information a) Name and address: John Woo b) Name and address of fee simple titleholder (if c) Interest in property FFF Same 4. Contractor information	DS_ other than owner)SAME_AS ABOUE, E
b) Telephone No.: 386 496 136	50x 777, LAKE BUTLER F1, 32054 60 Fax No. (Opt.) 386 496 1368
5. Surety Information a) Name and address: b) Amount of Bond:	
c) Telephone No.:	Fax No. (Opt.)
6. Lender	
a) Name and address:	
7. Identity of person within the State of Florida designated	by owner upon whom notices or other documents may be served:
a) Name and address:	Fax No. (Opt.)
b) relephone No	Fax No. (Opt.)
	rson to receive a copy of the Lienor's Notice as provided in Section
713.13(I)(b), Florida Statutes:	
b) Telephone No.:	Fax No. (Opt.)
 Expiration date of Notice of Commencement (the expiration is specified): 	don date is one year from the date of recording unless a different date
IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTIMPROVEMENTS TO YOUR PROPERTY; A NOTICE OF COMM	NER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED ION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR MENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST SULT YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING
/	
STATE OF FLORIDA COUNTY OF COLUMBIA	
	Signature of Owner's Authorized Office/Director/Partner/Manager
	John C. Woods
	Printed Name
The foregoing instrument was acknowledged before me, a Flori	Ida Notary, this 27 day of Warch , 20 12 by:
John C. Woods as	Dwner (type of authority, e.g. officer, trustee, attorney
fact) for Self	(name of party on bahalf of whom instrument was executed).
Personally Known OR Produced Identification Type	CL DL LAURIE HODSON
Notary Signature 2. Hodo	MY COMMISSION # DD 805657 EXPIRES: July 14, 2012 Bonded Thru Notary Public Underwinters
	4171
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.	
	(XQX)
	Signature of Natural Person Signing (in line #10 above.)
	D