

DATE 05/12/2003

Columbia County Building Permit / Application

PERMIT

000020690

This Permit Expires One Year From Date of Issue

New Resident N

APPLICANT JOE MATTINGLY PHONE 850-838-9740
 ADDRESS 88 ELLISO/FRITH RD PERRY FL 32347
 OWNER RIMA OF LAKE CITY PHONE 386-365-1988
 ADDRESS RT 22 BOX 2357 LAKE CITY FL 32024
 CONTRACTOR JOE MATTINGLY PHONE 850-584-6555
 LOCATION OF PROPERTY HWY 47 & I-75 RALLY GAS STATION

TYPE DEVELOPMENT COPY/GAS LINE ESTIMATED COST OF CONSTRUCTION 110000.00
 FLOOR AREA _____ TOTAL AREA _____ HEIGHT 15.00 STORIES 1 WALLS METAL
 FOUNDATION CONCRETE ROOF (Type & Pitch) FLAT FLOOR SLAB
 LAND USE & ZONING CHI MAX. HEIGHT 35
 MINIMUM SET BACK: STREET-FRONT / SIDE 25.00 REAR 15.00 SIDE 10.00
 NO. EX.D.U. 1 FLOOD ZONE X CERT. DATE _____ DEV. PERMIT _____

LEGAL DESCRIPTION

PARCEL ID 30-4S-17-08889-000 SUBDIVISION _____
 BLOCK _____ LOT _____ UNIT _____ TOTAL ACRES _____

I certify that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction and that all foregoing information is accurate and all work will be done in compliance with all applicable laws regulating construction and zoning.

EXISTING N PCC056863
 Driveway Connection Culvert Waiver Contractor's License Number _____
P03-0088 BK RJ
 Septic Tank Number _____ LU & Zoning checked by _____ Approved for Issuance _____

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power _____ Foundation _____ Monolithic _____
 date/app. by _____ date/app. by _____ date/app. by _____
 Under slab rough-in plumbing _____ slab _____ framing _____
 date/app. by _____ date/app. by _____ date/app. by _____
 Rough-in plumbing above slab and below wood floor _____
 date/app. by _____
 Electrical rough-in _____ Heat and Air Duct _____ Peri. beam _____
 date/app. by _____ date/app. by _____ date/app. by _____
 Permanent power _____ Final _____ Pool _____
 date/app. by _____ date/app. by _____ date/app. by _____

COMMENTS: REPALCING CANOPY CHANGINE GAS LINES / CK#1107 not on file

OTHER TYPES OF INSPECTIONS

Culvert _____ M/H tie downs, blocking, electricity and plumbing _____
 date/app. by _____ date/app. by _____
 Utility Pole _____ Pump pole _____ Reconnection _____
 date/app. by _____ date/app. by _____ date/app. by _____

BUILDING PERMIT FEE \$ 550.00 ZONING CERT. FEE \$ 25.00 Certification Fee \$.00 Surcharge \$.00MISC. FEES \$.00 CULVERT FEE \$ _____ TOTAL PERMIT FEE \$ 575.00INSPECTORS OFFICE L. Hodges CLERKS OFFICE CH

NOTICE: IN ADDITION TO THE REQUIREMENTS OF THIS PERMIT, THERE MAY BE ADDITIONAL RESTRICTIONS APPLICABLE TO THIS PROPERTY THAT MAY BE FOUND IN THE PUBLIC RECORDS OF THIS COUNTY. AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.

"WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT."

This Permit Must Be Prominently Posted on Premises During Construction

PLEASE NOTIFY THE COLUMBIA COUNTY BUILDING DEPARTMENT AT LEAST 24 HOURS IN ADVANCE OF EACH INSPECTION, IN ORDER THAT IT MAY BE MADE WITHOUT DELAY OR INCONVENIENCE, PHONE 758-1008. THIS PERMIT IS NOT VALID UNLESS THE WORK AUTHORIZED BY IT IS COMMENCED WITHIN 6 MONTHS AFTER ISSUANCE.

The Issuance of this Permit Does Not Waive Compliance by Permittee with Deed Restrictions.

**Columbia County
Building Permit Application**

20690

Date 4-24-03

Application No. 0304-60

Applicants Name & Address Joe Mattingly D.B.A. J+J Equipment Co. (Perry) 88 Ellison/Erith Rd. Perry, FL 32347 Phone (850) 584-1655

Owners Name & Address Rima of Lake City Inc RR 22 Box 2357 LAKE CITY FL 32024-9280 Phone 386/365-1988

Fee Simple Owners Name & Address Demont Sani Phone 386/365-1988

Contractors Name & Address Joe Mattingly DBA J+J Equipment Co, Perry 88 Ellison/Erith Rd Perry, FL 32347 Phone (850) 584-1655

Legal Description of Property Comm NW Cor of NW 1/4 of NW 1/4 Run E 1020.15 F to R/W E 75 SS Along R/W 1195.87 F+ For POB, Run W 196.16 F S

Location of Property Hy 47 + I 75 Rally Gas Station

Tax Parcel Identification No. 30-45-17-08889-000 Estimated Cost of Construction \$ 110,000.00

Type of Development Replacing Canopy & Product Lines Number of Existing Dwellings on Property 0

Comprehensive Plan Map Category Highway Interchange Zoning Map Category CHI

Building Height 15' Number of Stories 1 Floor Area 2880 Total Acreage in Development 1

Distance From Property Lines (Set Backs) Front 93 Side 24 Rear 100 Street West 48'

Flood Zone X Certification Date NTA Development Permit NTA

Bonding Company Name & Address _____

Architect/Engineer Name & Address Roger S Lingerfelt PE Powder Springs GA

Mortgage Lenders Name & Address Columbia County Bank Hy 90

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction.

OWNERS AFFIDAVIT: I hereby certify that all the foregoing information is accurate and all work will be done in compliance with all applicable laws regulating construction and zoning.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY.
IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

[Signature]
Owner or Agent (including contractor)

[Signature]
Contractor



Leslie I. Dow
MY COMMISSION # CC833240 EXPIRES
May 5, 2003
BONDED THRU TROY FAIR INSURANCE, INC.

PCC056863
Contractor License Number

STATE OF FLORIDA
COUNTY OF COLUMBIA

Sworn to (or affirmed) and subscribed before me
this 28th day of April by DAIMANT G. SONI

STATE OF FLORIDA
COUNTY OF COLUMBIA

Sworn to (or affirmed) and subscribed before me
this _____ day of _____ by _____

Personally Known _____ OR Produced Identification

FDI-8500-167-68-064-0

Personally Known _____ OR Produced Identification

0304-60



APPROXIMATE SCALE IN FEET
2000 0 2000

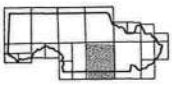
NATIONAL FLOOD INSURANCE PROGRAM

FIRM
FLOOD INSURANCE RATE MAP

COLUMBIA
COUNTY,
FLORIDA
(UNINCORPORATED AREAS)

PANEL 175 OF 290

PANEL LOCATION



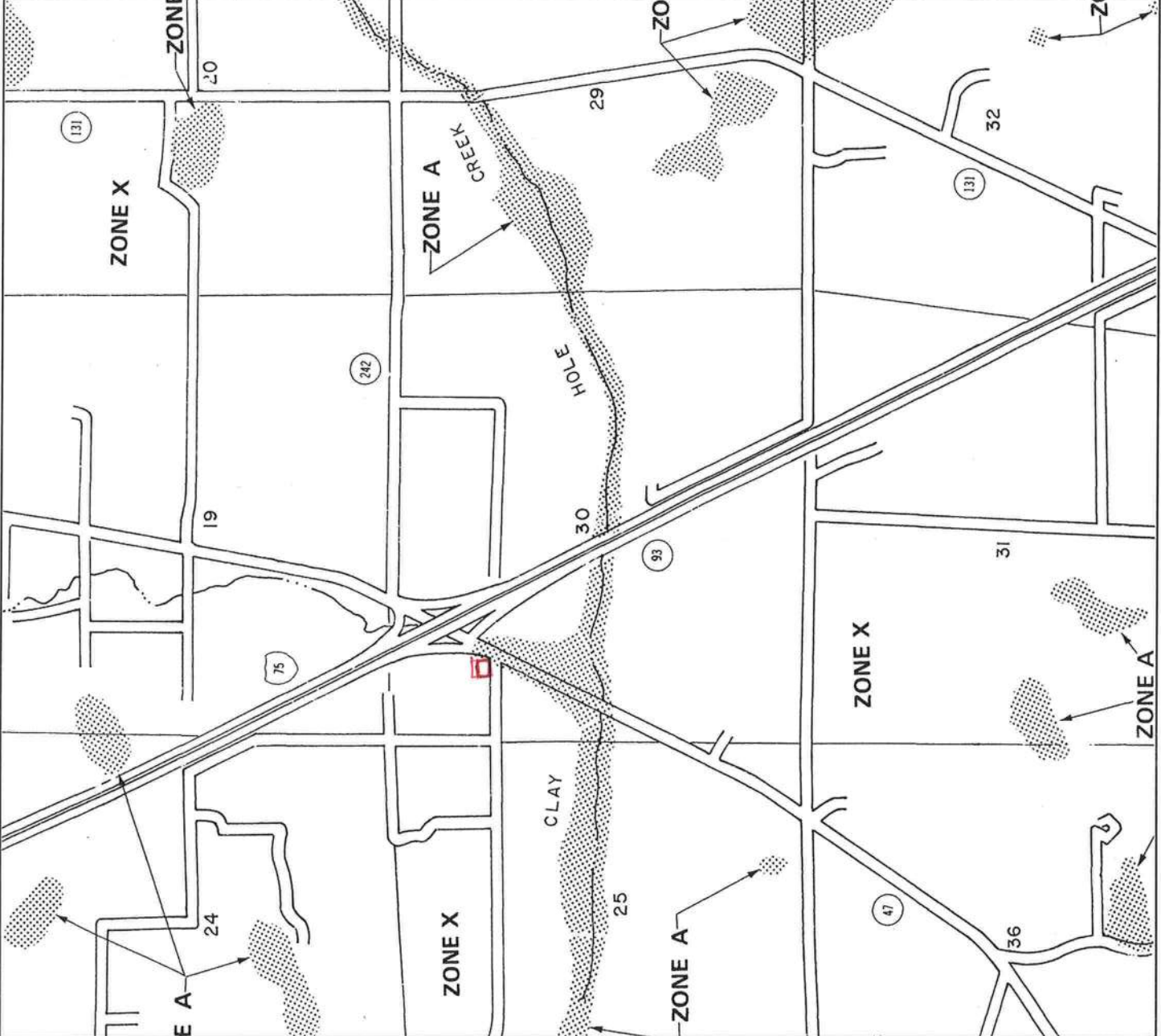
COMMUNITY-PANEL NUMBER
120070 0175 B

EFFECTIVE DATE:
JANUARY 6, 1988



Federal Emergency Management Agency

This is an official copy of a portion of the above referenced flood map. It was extracted using F-MIT Version 1.0. This map does not reflect changes or amendments which may have been made subsequent to the date on the title block. Further information about National Flood Insurance Program flood hazard maps is available at www.fema.gov/mit/ltd.



Permit No. PD3-0088

Tax Parcel No. 30-45-17-08889-000

COLUMBIA COUNTY NOTICE OF COMMENCEMENT

STATE OF FLORIDA

Inst: 2003008770 Date: 04/28/2003 Time: 12:07

COUNTY OF COLUMBIA

MRK DC, P. DeWitt Cason, Columbia County B: 981 P: 2012

THE UNDERSIGNED hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement.

1. Description of property: (legal description of the property, and street address if available.)

Parcel ID 30-45-17-08889-000

Comm NW COR OF NW 1/4 OF NW 1/4
Run S 1020.15 FT to W/R/W T 75, S 2
Along R/W 1195.87 FT For P.O.B. Run W 196.16 FT S.

2. General description of improvement: reconfigure gasoline product lines and replacing canopy

3. Owner Information:

A. Name and address:

Rima of Lake City
RR 22 Box 2357 Lake City FL 32024-9280

B. Interest in property:

C. Name and address of fee simple titleholder (if other than owner):

4. Contractor: (name and address)

Joe Mattingly (D.B.A. J & J Equipment Company (Perry))
8 Ellison/Erith Rd Perry FL 32347

5. Surety

A. Name and address: Hartford Casualty Ins. Co.

PO BOX 659519, SAN Antonio, TX 78265

B. Amount of bond:


\$ 1,000,000.00

6. Lender: (name and address)

7. Persons within the State of Florida designated by Owner upon whom notices or her documents may be served as provided by Section 718.13 (1) (a) 7., Florida Statutes: (name and address)

8. In addition to himself, owner designates _____
of _____ to receive a copy of
the Lienor's Notice as provided in Section 713.13 (1) (a) 7., Florida Statutes.

9. Expiration date of notice of commencement (the expiration date is 1 year from the
date of recording unless a different date is specified) _____.


(Signature of Owner)

SWORN TO and subscribed before me this 28th day of April
19 2003




Notary Public

My Commission Expires:

produced F.L.S.

This instrument prepared by
Herbert F. Davis
Daisy, Peck, Bowdoin & Payne
Attorneys at Law
Post Office Drawer 1707
Lake City, Florida 32056-1707

CORRECTIVE SPECIAL WARRANTY DEED

THIS CORRECTIVE SPECIAL WARRANTY DEED made this 11th day of October, 2002, by SOUTHERN RELOAD, INC., a Florida corporation, whose mailing address is 205 Burk Street, Lake City, Florida 32055, hereinafter called the Grantor, to RIMA OF LAKE CITY, INC., a Florida corporation, whose post office address is Route 22, Box 2357, Lake City, Florida 32024, hereinafter called the Grantee:

WITNESSETH:

That the Grantor, for and in consideration of the sum of TEN AND NO/100 (\$10.00) DOLLARS and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the Grantee, all that certain land situate in Columbia County, Florida, viz:

TOWNSHIP 4 SOUTH - RANGE 17 EAST

Section 30: A part of the NW 1/4 of NW 1/4 further described as: Begin at the intersection of the North right-of-way line of State Road No. S-242 and the West right-of-way line of State Road No. 47; run thence North 89°47'29" West 150.00 feet to a point on said North right-of-way line of State Road No. S-242; run thence North 0°12'31" East 150.00 feet to a point; run thence South 89°47'29" East 196.16 feet to a point on the West right-of-way line of State Road No. 47, run

thence South 16°28'37" West 45 feet to the West right-of-way line of State Road No. 47; 142.20 feet to the POINT OF BEGINNING, and a permanent easement of ingress and egress which was conveyed by Lake Ford, Inc., to Grantor's predecessors in title by Easement Agreement dated August 1, 1964, and recorded in Official Records Book 234, Page 59, public records of Columbia County, Florida, over and across the following described premises located and adjacent to the above described parcel:

Begin at the intersection of the North right-of-way line of State Road No. S-242 and the West right-of-way line of State Road No. 47; run thence North 25°20'22" East 14.91 feet along the West right-of-way line of State Road No. 47; thence run North 16°28'37" East along said right-of-way line of State Road No. 47 a distance of 142.20 feet to POINT OF BEGINNING; run thence North 89°47'29" West along the common boundary line of properties owned by Grantor and Lake Ford, Inc., 110 feet; run thence in a Northeasterly direction along a straight line to a point on the West right-of-way line of State Road No. 47, said point being 45 feet Northeast of the POINT OF BEGINNING; run thence South 16°28'37" West along the West right-of-way line of State Road No. 47 a distance of 45 feet to the POINT OF BEGINNING. Containing 26117 square feet more or less.

Parcel Number: #102-174S30-08889-000

This deed is given subject to all easements, reservations, and restrictions of record, if any, but this shall not serve to reimpose the same, and subject to Right of Entry Agreement dated July 25, 2001, recorded in Official Records Book 931, Pages 2292-2296, public records of Columbia County, Florida,.

The purpose of this deed is to correct a scrivener's error in that certain Special Warranty Deed dated October 22, 2001, recorded October 24, 2001, in Official Records Book 938, Page 767, public records of Columbia County, Florida, between the same parties, which inadvertently omitted the Township and Range in which the property was located.

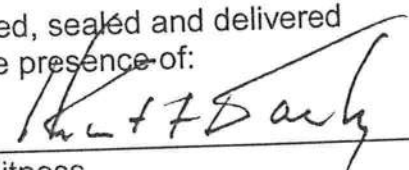
TOGETHER WITH all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

TO HAVE AND TO HOLD, the same in fee simple forever.

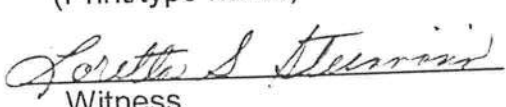
AND the Grantor hereby covenants with said Grantee that the Grantor is lawfully seized of said land in fee simple; that the Grantor has good right and lawful authority to sell and convey said land; and hereby warrants the title to said land and will defend the same against the lawful claims of all persons claiming by, through or under the said Grantor.

IN WITNESS WHEREOF, the said Grantor has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered
in the presence of:


Witness

Herbert F. Darby
(Print/type name)

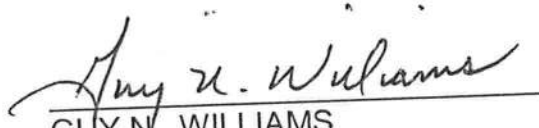

Witness

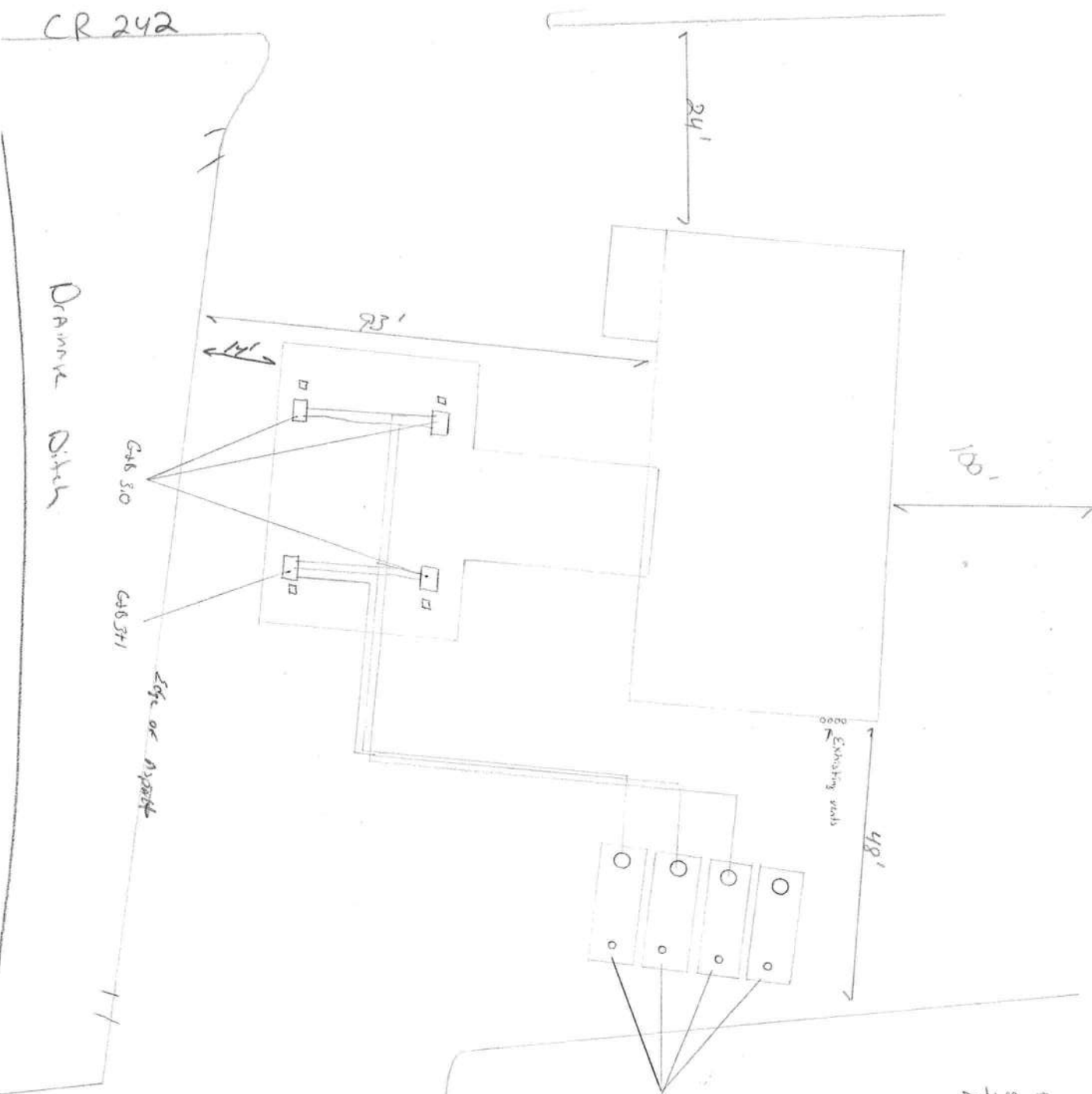
Loretta S. Steinmann

(Print/type name)

SOUTHERN RELOAD, INC.

By


GUY N. WILLIAMS
President



Map ID# 8518862
Stop n Go #4
ITS 84447
Lake City FL 32055

Existing 10,000 gallon
Double wall tanks

Please call
Joe Mattingly
1-800-511-7742

AC# 0555567

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L02082802911

DATE	BATCH NUMBER	LICENSE NBR
08/28/2002	200073689	PCC056863

The POLLUTANT STORAGE SYSTEMS CONTRACTOR

Named below IS CERTIFIED

Under the provisions of Chapter 489 FS.

Expiration date: AUG 31, 2004

MATTINGLY, JOSEPH WILLIAM
INDIVIDUAL
88 ELLISON-FRITH RD
PERRY FL 32347

JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

KIM BINKLEY-SEYER
SECRETARY

JOE MATTINGLY

OWNER

88 ELLISON FRITH ROAD

Perry, FL 32347

NAME OF BUSINESS

GENERAL REPAIR/PUMP REPAIR & MAINTENANCE

DATE OF BUSINESS OR OCCUPATION

08-26-2002

\$20.00

AMOUNT

J & J EQUIPMENT

NAME OF BUSINESS

88 ELLISON FRITH ROAD

STREET OR P.O.

Perry, FL 32347

STATE, ZIP

ADDRESS

No. 2002-1352

LICENSE

TAYLOR COUNTY, FLORIDA

License to engage in or manage a business or
occupation for the period commencing
October 1, 2002 and ending September 30, 2003.

Paul Stearn
Tax Collector, Taylor County

All licenses must be conspicuously displayed.

03-12-2003

STATE OF FLORIDA
DEPARTMENT OF FINANCIAL SERVICES
DIVISION OF WORKERS' COMPENSATION

CERTIFICATE OF EXEMPTION FROM FLORIDA WORKERS' COMPENSATION LAW

CONSTRUCTION INDUSTRY EXEMPTION

This certifies that the individual listed below has elected to be exempt from Florida Workers' Compensation Law.

EFFECTIVE	03/21/2003	EXPIRATION DATE	03/20/2005
PERSON	MATTINGLY	JOSEPH	W
SSN	261-31-4870		
FEIN	261314870		
BUSINESS	J & J EQUIPMENT CO 88 ELLISON FRITH RD PERRY		
	FL 32347		

NOTE: Pursuant to Chapter 440.10(1), (g), 2, F.S., a sole proprietor, partner, or an officer of a corporation who elects exemption from the Florida Workers' Compensation Law may not recover benefits or compensation under Chapter 440.

ACORD CERTIFICATE OF LIABILITY INSURANCEDATE (MM/DD/YYYY)
04/25/2003PRODUCER (813)685-7731 FAX (813)685-1823
Odiorne Insurance Agency Inc
1206 N. Parsons Ave.
Post Office Box 830
Brandon, FL 33509THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION
ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE
HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR
ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.INSURED J & J Equipment Co.
88 Ellison/Frith Rd.
Perry, FL 32347

INSURERS AFFORDING COVERAGE

NAIC #

INSURER A Hartford Casualty Ins Co

INSURER B Old Dominion Ins. Co.

INSURER C:

INSURER D:

INSURER E:

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING
ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR
MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH
POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	ADD'L INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
A		GENERAL LIABILITY	215BAKD8731	01/11/2003	01/11/2004	EACH OCCURRENCE \$ 1,000,000
		<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000
		<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person) \$ 10,000
						PERSONAL & ADV INJURY \$ 1,000,000
		GEN'L AGGREGATE LIMIT APPLIES PER:				GENERAL AGGREGATE \$ 2,000,000
		<input type="checkbox"/> POLICY <input type="checkbox"/> PRO. JECT <input type="checkbox"/> LOC				PRODUCTS - COMPIOP AGG \$ 2,000,000
B		AUTOMOBILE LIABILITY	BIG29212	04/10/2003	04/10/2004	COMBINED SINGLE LIMIT (Ea accident) \$ 300,000
		<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$
		<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
		<input checked="" type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident) \$
		<input checked="" type="checkbox"/> HIRED AUTOS				
		<input checked="" type="checkbox"/> NON-OWNED AUTOS				
		GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT \$
		<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC AGG \$
		EXCESS/UMBRELLA LIABILITY				EACH OCCURRENCE \$
		<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE \$
		<input type="checkbox"/> DEDUCTIBLE				\$
		RETENTION \$				\$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS OTH-ER
		ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				E L EACH ACCIDENT \$
		If yes, describe under SPECIAL PROVISIONS below				E L DISEASE - EA EMPLOYEE \$
		OTHER				E L DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

CERTIFICATE HOLDER

Columbia County Health Department
Courthouse Annex
35 N Hernando Street
Lake City, FL 32055

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE
EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL
10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT,
BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY
OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

Steven Odiorne (C)/SBW

CR 242

Drainage Ditch

Gas 30

Gas 341

Edge of Airport

24'

93'

14'

18'

Existing vents

48'

Existing 10,000 gallon
Double wall tanks

Dep ID# 85-1886
Stop n Go #4
I 75 & H 47
Lake City FL 32055