

Permit Number: \_\_\_\_\_  
Folio/Parcel ID #: 33-3S-17-06802-000  
Prepared by: JOHN RUARK  
1130 1ST STREET S  
WINTER HAVEN, FL 33880  
Return to: ROOFINGSPECIALISTS@YOURENERGYSPECIALIST.NET

### NOTICE OF COMMENCEMENT

State of Florida, County of COLUMBIA

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)**  
869 SW COR OF LOT 7 & LOCK 1, ODOM HEIGHTS S.D., N 7 DEG E 104.74 FT E 116.87 FT, E 104.87 FT, W 136.93 FT TO POB EX RD RW, 535-11 746-1245, DC 807-1868, 807-1869, 819-2243, 849-512 WD 1433-469, WD 1478-1862, WD 1478-1864, 1865 117 SE MONTGOMERY PLACE LAKE CITY, FL 32025
2. **General description of improvement**  
RE-ROOF ASPHALT SHINGLES & MODIFIED BITUMEN
3. **Owner information or Lessee information if the Lessee contracted for the improvement**  
Name FAB ACQUISITIONS, INC. (AUDREY BRUNER)  
Address 117 SE MONTGOMERY PLACE LAKE CITY, FL 32025  
Interest in Property OWNER  
Name and address of fee simple titleholder (if different from Owner listed above)  
Name SAME  
Address \_\_\_\_\_
4. **Contractor**  
Name JOHN RUARK Telephone Number 863-514-9532  
Address 1130 1ST STREET S WINTER HAVEN, FL 33880
5. **Surety (if applicable, a copy of the payment bond is attached)**  
Name \_\_\_\_\_ Telephone Number \_\_\_\_\_  
Address N/A Amount of Bond \$ \_\_\_\_\_
6. **Lender**  
Name N/A Telephone Number \_\_\_\_\_  
Address \_\_\_\_\_
7. **Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by §713.13(1)(a)7, Florida Statutes.**  
Name N/A Telephone Number \_\_\_\_\_  
Address \_\_\_\_\_
8. **In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's Notice as provided in §713.13(1)(b), Florida Statutes.**  
Name N/A Telephone Number \_\_\_\_\_  
Address \_\_\_\_\_
9. **Expiration date of notice of commencement (the expiration date will be 1 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 WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.**

Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager \_\_\_\_\_ OWNER  
Signatory's Title/Office \_\_\_\_\_

The foregoing instrument was acknowledged before me this 15 day of FEB 23 by AUDREY BRUER  
as OWNER for OWNER  
Type of authority, e.g., officer, trustee, attorney in fact \_\_\_\_\_ Name of party on behalf of whom instrument was executed \_\_\_\_\_

Jeri L. Walker  
Signature of Notary Public - State of Florida

Jeri L. Walker  
Print, type, or stamp commissioned name of Notary Public

Personally Known ☒ OR Produced ID ☒  
Type of ID Produced FLDL

