## NOTICE OF COMMENCEMENT

This Instrument Prepared By:			
Name: Ben Keeler			
Address: 578 SE 70th Loop Trenton FL 32693			
Permit No:		23	ST .
Tax Folio No: 03-4S-16-02739-215 (11543)			
STATE OF:Florida	LOT 15 TURKEY RUN S/D. 10	05-707, WD 1	017-2132, WD 1031-1417, (DC 1187-2125
COUNTY OF: COLUMBIA COUNTY	FRANCES PILKINGTON), CT	1256-242, SV	VD 1263-1469, SWD 1263-1470,
THE UNDERSIGNED HEREBY gives notice that imp Statutes, the following information is provided in this	Notice of Commencement		
1. DESCRIPTION OF PROPERTY: Street Address:	397 SW PHILLIPS CIR, LAK	E CITY	
Legal Description:			
2. GENERAL DESCRIPTION OF IMPROVEMENT	SI: INSTALL METAL OVER EXIST	TING ROOF N	MATERIAL W/ 1X4'S
3. OWNER INFORMATION: 8.) Name: SKINNE	P IAMES H.IP	Address:	397 SW PHILLIPS CIR
b.) Interest in Property: Owner SKINNE	R SANDRA Y	- 	LAKE CITY, FL 32024
c.) Fee Simple Titleholder (if other than owner) Name	)	Address: .	
4. CONTRACTOR: a.) Name: Ben Keeler	Address: 578 SE	70th Loop Tren	nton Ft. 32693 b.) Phone; 352-514-4930
5. SURETY: a.) Name:	Addre	ess:	
b.) Amount of bond \$:	c.) Pl	ione:	<del></del>
6. LENDER: a.) Name:	Address:		b.) Phone:
7. Persons within the State of Florida designated	i by Owner upon whom notices or	otherdocum	ents may be served as provided by Section
a.) Name:	Address:		b.) Phone:
8. In addition to himself, Owner designates the f	ollowing person(s) to receive a co	py of Lienor's	Notice as provided in Section 713.13(1)(b),
a.) Name:	Address:		b.) Phone:
WARNING TO OWNER: ANY PAYMENTS MADE CONSIDERED IMPROPER PAYMENTS UNDER C PAYING TWICE FOR IMPROVEMENTS TO YOU! THE JOB SITE BEFORE THE FIRST INSPECTIN ATTORNEY BEFORE COMMENCING WORK OR F	R PROPERTY. A NOTICE OF CO	MMENCEMEN N FINANCING	IT MUST BE RECORDED AND POSTED OF
		/	
12	X		
<b>*</b> .	Signature of Own Partner Manager	er or Owner's	Suthorized Officer/Director
The foregoing instrument was acknowledged before by Stephanie Massey trustee, altorney in fact) for Sand		757	23 (upper)
	Δ.	,	
NIE Maria	Stanh	nnle	MANU
Y PORCE	Signature of Nota	ry Public - Sta	ite of Florida
W. T.	Print, Type, or St	amp Commissi	ioned Name of Notary Public
200-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	Commission Nuri Personally Know	ther 2	1 (7)
MISSION	Personally Know	uor Produ	ced identification
	cation Pursuant to Section 92.525		
On the races of perjury, I declare that I have	read the foregoing and that the t	facts stated in	It are true to the best of my knowledge ar
ALK IN	Δ.		r Anno naverno

REVISED 7-1-07