

NOTICE OF COMMENCEMENT

Tax Parcel Identification Number: 26-3S-16-02308-061

Inst: 201312012269 Date: 8/12/2013 Time: 4:04 PM
DQ: P DeWitt Cason Columbia County Page 1 of 1 B 1259 P 1837

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 the NOTICE OF COMMENCEMENT:

1. Description of property: Single family dwelling
 - a) Street (job) Address: 354 NW Harris Loop, Lake City, FL 32055-7225
2. General descriptions of improvements: Roof Renovations / Re-roof
3. Owner Information:
 - a) Name and Address: Anderson Columbia Company, Inc
P.O. Box 1829, Lake City, FL 32056-1829
4. Contractor Information:
 - a) Name and Address: SLK Construction, Inc 764 SW Riverside Ave, Ft. White
 - b) Telephone Number: 386-497-2289
5. Surety Information: none
6. Lender: none
7. Identity of person with the State of Florida designated by owner upon whom notices or other documents may be served:
 - a) Name and Address: _____
 - b) Telephone number: _____
8. 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 number: _____ fax number: _____
9. 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

Brian P. Schreiber
Signature of Owner or Owner's Authorized Office/Director

Brian P. Schreiber
Print Name

The foregoing instrument was acknowledged before me, a Florida Notary, the 5th day of August 2013
by: Brian P Schreiber CFO for Anderson Columbia Company, Inc.

Personally Known x or Produced Identification _____ Type _____

Notary Signature Susan E. Chappell 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.

Brian P. Schreiber
Signature of Owner or Owner's Authorized Office/Director