

31679

NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

03-48-16-02730-000

Clerk's Office Stamp

Inst. 201412000916 Date: 1/23/2014 Time: 9:26 AM
DC, P DeWitt Cason Columbia County Page 1 of 2 B 1268 P 1428

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 this NOTICE OF COMMENCEMENT

- 1 Description of property (legal description) Attached
a) Street (job) Address _____
- 2 General description of Improvements _____
- 3 Owner Information
a) Name and address: Di Ann Davis, 693 SW Deputy J. Davis Ln, Lake City, FL 32024
b) Name and address of fee simple titleholder (if other than owner) _____
c) Interest in property owner
- 4 Contractor Information
a) Name and address: Foundation Professionals of Florida, Inc.
b) Telephone No: 386.755.3002 Fax No (Opt) 386.752.5456
- 5 Surety Information
a) Name and address _____
b) Amount of Bond _____
c) Telephone No: _____ Fax No (Opt) _____
- 6 Lender
a) Name and address: _____
b) Phone No _____
- 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: _____
b) Telephone No: _____ Fax No. (Opt) _____
- 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(l)(b), Florida Statutes
a) Name and address: _____
b) Telephone No.: _____ Fax No (Opt) _____
- 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

10.

Signature of Owner or Owner's Authorized Office/Director/Partner/Manager

Di Ann Davis

Printed Name

The foregoing instrument was acknowledged before me, a Florida Notary, this 22 day of January, 20 14, by

Di Ann Davis as owner (type of authority, e.g. officer, trustee, attorney

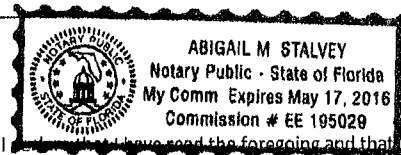
fact) for property referenced above (name of party on behalf of whom instrument was executed).

Personally Known ☒ OR Produced Identification _____ Type _____

Notary Signature

Abigail M. Stalvey

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

Di Ann Davis
Signature of Natural Person Signing (in line #10 above)

Tax Parcel ID: 03-4~~5~~¹⁶-02730-000

COMM NW COR OF SEC, RUN E 1228 FT FOR POB, CONT E 127.65 FT TO NE
COR OF NW1/4 OF NW1/4, RUN S 122.52 FT TO N R/W OF CR-252, W ALONG
R/W 135.75 FT, N 170.27 FT TO POB. ORB 730-358(DC), 747-1610, 818-782, 896-
532, 899-646, CORRECTIVE DEED 903-1736 BUT STILL WRONG LEGAL. QC
1122-693