

PERMIT# \_\_\_\_\_

**NOTICE OF COMMENCEMENT**

STATE OF: FLORIDA

COUNTY OF: COLUMBIA

CITY OF: LAKE CITY

\*\*\*\*\*  
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.  
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**DESCRIPTION OF PROPERTY**

SECTION: 15 TOWNSHIP: 45 RANGE: 17 TAX PARCEL #: 08359-002  
LOT: \_\_\_\_\_ BLOCK: \_\_\_\_\_ SUBDIVISION: \_\_\_\_\_  
PLATBOOK #: \_\_\_\_\_ MAP PAGE #: \_\_\_\_\_  
STREET ADDRESS: 3345 SW Country Club Rd  
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**GENERAL DESCRIPTION OF IMPROVEMENT**

TO CONSTRUCT: Single Family Home  
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**OWNER INFORMATION**

NAME: John G. & Patricia Wilson PHONE NUMBER: 386 755 7060 / 886 623 2679  
ADDRESS: P.O. Box 2061 LAKE CITY FL  
STATE: FLORIDA ZIP CODE: 32056  
INTEREST IN THE PROPERTY: N/A  
FEE SIMPLE TITLEHOLDER NAME (OTHER THAN OWNER): N/A  
FEE SIMPLE TITLEHOLDER ADDRESS: N/A  
\*\*\*\*\*

CONTRACTOR NAME: John G. Wilson PHONE NUMBER: 386 623 2679  
COMPANY NAME: \_\_\_\_\_ FAX NUMBER: 386 755-7151  
ADDRESS: P.O. Box 2061 CITY: Lake City  
STATE: Florida ZIP CODE: 32056  
\*\*\*\*\*

BONDING COMPANY: N/A PHONE NUMBER: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

LENDER NAME: N/A PHONE NUMBER: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
\*\*\*\*\*

Persons within the State of Florida designated by owner upon whom notices or other documents may be served as provided by Section 713.13(1) (a), Florida Statute:

NAME: N/A ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

In addition to himself, the owner designates \_\_\_\_\_

To receive a copy of the Lienor's notice as provided in Section 713.13(1) (b) Florida Statutes.

\*\*\*\*\*  
Expiration date of Notice of Commencement (the expiration date is one (1) year from the date of recording unless a different date is specified): \_\_\_\_\_

SIGNATURE OF OWNER: John G. Wilson  
this 29 day of May, 2013  
Known personally/I.D. Shown \_\_\_\_\_

Sworn to and subscribed before me

Notary: Shannon M. Regar

My commission expires \_\_\_\_\_

