

Columbia  
County

47

201212008521 Date: 6/5/2012 Time: 10:49 AM  
DC, P. DeWitt Cason, Columbia County Page 1 of 1 B:1235 P:2732

## NOTICE OF COMMENCEMENT

This Instrument Prepared By:

Name: MIKE BENNETT

Address: PO BOX 387 Newberry, FL 32669

Permit No: \_\_\_\_\_

Tax Folio No: 00-00-00-14210-000

STATE OF: FLORIDA

COUNTY OF: ALACHUA

THE UNDERSIGNED HEREBY gives notice that improvement(s) 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: Street Address: 18112 SW SR 47 Ft. White FL  
Legal Description: \_\_\_\_\_

2. GENERAL DESCRIPTION OF IMPROVEMENT(S): roof over, metal building, commercial

3. OWNER INFORMATION: a.) Name: Ft. White True Value Hardware Address: 18112 SW SR 47 Ft. White FL 32038  
b.) Interest in Property: Owner

c.) Fee Simple Titleholder (if other than owner) Name: N/A Ft. White Hardware LLC Address: Santa

4. CONTRACTOR: a.) Name: MAC JOHNSON ROOFING Inc Address: PO BOX 387 Newberry, FL 32669 b.) Phone: 352-472-4943

5. SURETY: a.) Name: N/A Address: \_\_\_\_\_

b.) Amount of bond \$: N/A c.) Phone: \_\_\_\_\_

6. LENDER: a.) Name: N/A Address: \_\_\_\_\_ b.) Phone: \_\_\_\_\_

7. 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) 7., Florida Statutes:

a.) Name: N/A Address: \_\_\_\_\_ b.) Phone: \_\_\_\_\_

8. In addition to himself, Owner designates the following person(s) to receive a copy of Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes.

a.) Name: N/A Address: \_\_\_\_\_ b.) Phone: \_\_\_\_\_

9. Expiration date of notice of commencement (the expiration date is one (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. FL SR # BG 20 695 41085 0

x Paul Bennett  
Signature of Owner or Owner's Authorized Officer/Director  
Partner/Manager  
Signatory's Title/ Office \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_ (year)  
by \_\_\_\_\_ (name of person) as \_\_\_\_\_ (type of authority, e.g. officer,  
trustee, attorney in fact) for \_\_\_\_\_ (name of party on behalf of whom instrument was executed).



Tamara H. Malloy  
Notary Public - State of Florida  
Commission Number: \_\_\_\_\_  
Personally Known \_\_\_\_\_ or Produced Identification X FL: BG 20 695 41085 0

Verification Pursuant to Section 92.52, 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.

x Paul Bennett  
Signature of Natural Person Signing Above

This Instrument Prepared By:

Permit No:

STATE OF: FLORIDA

COUNTY OF: ALACHUA

1. DESCRIPTION OF PROPERTY: Street Address: 18112 SW SR 47 Ft. White, FL

**Legal Description:**

2. GENERAL DESCRIPTION OF IMPROVEMENT(S): roof over, metal building, commercial

3. OWNER INFORMATION: a.) Name: Ft White Tree Value Home

Address: 18112 SW 52 47 Ft. Lauderdale, Fla.  
32070

b.) Interest in Property: Owner

c.) Fee Simple Titleholder (if other than owner) Name: N/A *Ed White, Jr.*

Address: S. 12 N. 12 E.

4. CONTRACTOR: a.) Name: MAC JOHNSON ROOFING Inc. Address: PO BOX 367 Newberry, FL 32665

Phone: 352-471-4663

5. SURETY: a.) Name: N/A

Address:

b.) Amount of bond \$: N/A

c.) Phone:

6. LENDER: a.) Name: N/A

Address:

b.) Phone:

7. 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) 7. Florida Statutes:

a.) Name: N/A

Address:

b.) Phone:

8. In addition to himself, Owner designates the following person(s) to receive a copy of Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes.

a.) Name: N/A

Address:

b.1 Phone

9. Expiration date of notice of commencement (the expiration date is one (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.

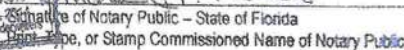
Signature of Owner or Owner's Authorized Officer/Director  
Partner/Manager

Signatory's Title/ Office

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ (year)

by \_\_\_\_\_ (name of person) as \_\_\_\_\_ (type of authority, e.g. officer)

trustee, attorney in fact) for \_\_\_\_\_ (name of party on behalf of whom instrument was executed)



Commission Number:

Personally Known ☐ or Produced Identification ☒ FL: B-20-69841050

Verification Pursuant to Section 92.524, 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.

Signature of Natural Person Signing Above