

# NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

16-4S-16-03041-000

Clerk's Office Stamp

Inst: 202412016699 Date: 08/02/2024 Time: 2:46PM  
Page 1 of 1 B: 1520 P: 1633, James M Swisher Jr, Clerk of Court  
Columbia, County, By: OA  
Deputy Clerk

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): S/T/R 16-4S-16 3.48 acres  
a) Street (job) Address: 133 SW Mildred Ct Lake City FL 32024
2. General description of improvements: Garport
3. Owner Information or Lessee information if the Lessee contracted for the improvements:  
a) Name and address: Daniel Williams 133 SW Mildred Ct Lake City FL 32024  
b) Name and address of fee simple titleholder (if other than owner) \_\_\_\_\_  
c) Interest in property \_\_\_\_\_
4. Contractor Information  
a) Name and address: Joseph Penning 7585 216th St O'Brien FL 32071  
b) Telephone No.: 386-362-9223
5. Surety Information (if applicable, a copy of the payment bond is attached):  
a) Name and address: \_\_\_\_\_  
b) Amount of Bond: \_\_\_\_\_  
c) Telephone No.: \_\_\_\_\_
6. Lender  
a) Name and address: \_\_\_\_\_  
b) Phone No. \_\_\_\_\_
7. Person 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 and address: \_\_\_\_\_  
b) Telephone No.: \_\_\_\_\_
8. In addition to himself or herself, 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: \_\_\_\_\_ OF \_\_\_\_\_  
b) Telephone No.: \_\_\_\_\_
9. Expiration date of Notice of Commencement (the expiration date will be 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 YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.**

STATE OF FLORIDA  
COUNTY OF COLUMBIA

10 Daniel C Williams  
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager

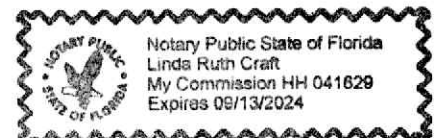
DANIEL C. WILLIAMS  
Printed Name and Signatory's Title/Office

The foregoing instrument was acknowledged before me, a Florida Notary, this 25th day of July, 2024, by:

Daniel C Williams as \_\_\_\_\_ for \_\_\_\_\_  
(Name of Person) (Type of Authority) (name of party on behalf of whom instrument was executed)

Personally Known \_\_\_\_\_ OR Produced Identification X Type FLDL

Notary Signature Linda Ruth Craft Notary Stamp or Seal:



# NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

16-4S-16-03011-000

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Columbia, County, By: OA  
Deputy Clerk

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1. Description of property (legal description): S1T1R 16-4S-16 3.48 acres  
a) Street (job) Address: 133 SW Mildred Ct Lake City FL 32024
2. General description of improvements: Carport
3. Owner Information or Lessee Information if the Lessee contracted for the improvements:  
a) Name and address: Daniel Williams 133 SW Mildred Ct Lake City FL 32024  
b) Name and address of fee simple titleholder (if other than owner):  
c) Interest in property:
4. Contractor Information  
a) Name and address: Joseph Penning 7585 216th St O'Brien FL 32071  
b) Telephone No.: 386-362-9223
5. Surety Information (if applicable, a copy of the payment bond is attached):  
a) Name and address:  
b) Amount of Bond:  
c) Telephone No.:
6. Lender  
a) Name and address:  
b) Phone No.:
7. Person 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 and address:  
b) Telephone No.:
8. In addition to himself or herself, 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: \_\_\_\_\_ OF \_\_\_\_\_  
b) Telephone No.: \_\_\_\_\_
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STATE OF FLORIDA  
COUNTY OF COLUMBIA

10. Daniel C. Williams  
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager

DANIEL C. WILLIAMS  
Printed Name and Signatory's Title/Office

The foregoing instrument was acknowledged before me, a Florida Notary, this 25th day of July, 2024, by:  
Daniel C. Williams as \_\_\_\_\_ for \_\_\_\_\_  
(Name of Person) (Type of Authority) (name of party on behalf of whom instrument was executed)

Personally Known \_\_\_\_\_ OR Produced Identification Y Type FLDL

Notary Signature Linda Ruth Craft Notary Stamp or Seal:



James M Swisher Jr  
Clerk of the Circuit Court  
Columbia County

PO Drawer 2069  
Lake City, FL 32056-2069

Official Records Receipt  
Recording

Username: oarmas  
Changed By: oarmas

Receipt#: 277548 Payee Name: SIMPLE SERVICES LLC  
Receipt Date: 08/02/2024

Instrument(s): 202412016699-BK1520/PG1633-NOTICE OF COMMENCEMENT

Details

Copies	\$1.00
CTY COMM JULY 1	\$2.00
FACC JULY 1	\$0.10
Indexing	\$0.00
PRMTF JULY 1	\$1.90
Recording	\$5.00
Records Trust	\$1.00

Receipt Total: \$11.00  
Amount Tendered: \$11.00  
Amount Paid (including any fees): \$11.00  
Overage: \$0.00

Check	\$11.00	1633	
Auth. Code:		Tender:	
Card:		AID:	
Payment Method:		TID:	
Payment Variant:		MID:	