## NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

Clerk's Office Stamp

1031:201212004365 Date:3/21/2012 Time:3:03 PM

08-55-16-03490-037
HE UNDERSIGNED hereby gives notice that improvements will be made to certain real property, and in accordance with Section 713.13 of the
Description of property (legal description): Lot 37 of the Hunt Place Subdivision
General description of improvements: Single Family Residence
a) Name and address: William Peeler 758 SW Seville Pl, Lake City, Fl b) Name and address of fee simple titleholder (if other than owner)
c) Interest in property  A. Contractor Information  a) Name and address: Edgely Construction 5908W Arlington Blud, Suite 113, 326  b) Telephone No.: 7520-0580  Fax No. (Opt.) 752-4904
Curaty Information
a) Name and address:
b) Amount of Bond:Fax No. (Opt.)
6. Lender a) Name and address:
b) Phone No
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: 51 1. Constant 590 SW Arlington Blud, Suite 113, 32025
8. In addition to himself, owner designates the following person to receive a september of the following person to rece
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 INTO YOUR PROPERTY; A NOTICE OF COMMENCEMENT AND A STRONGE OF COMMENCING WORK OR RECORDING
IMPROVEMENTS TO YOUR PROPERTY; A NOTICE OF COMMENCEMENT MOST BE RECORDED COMMENCING WORK OR RECORDING 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
Printed Name
The foregoing instrument was acknowledged before me, a Florida Notary, this 315t day of March 2012 by:
William Reeler as(type of authority, e.g. officer, trustee, attorney
fact) for (name of party on behalf of whom instrument was executed).
Personally Known OR Produced Identification Type LORETTA S. RUSS MY COMMISSION # DD 938655 EXPIRES: March 6, 2014
Notary Signature   Notary Public Underwriters   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.
Signature of Natural Person agning (in line #10 above.)
Signature of Natural Person alimit in the way above.