

## NOTICE OF COMMENCEMENT

Tax Parcel Identification Number 00-00-00-07756-000

County Clerk's Office Stamp or Seal

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): LOT 6 & S1/2 OF LOT 5 BLOCK 8 FOREST HILLS S/D UNIT 1. DC TB HOUSTON ORB 857-2167  
a) Street (job) Address: 467 SE OAK ST, LAKE CITY, FL 32025
2. General description of improvements: REROOF
3. Owner Information  
a) Name and address: HOUSTON, HAROLD E & ANITA K, 3328 NW NOEGEL ROAD, WELLBORN, FL 32094  
b) Name and address of fee simple titleholder (if other than owner) \_\_\_\_\_  
c) Interest in property OWNER
4. Contractor Information  
a) Name and address: LEWIS WALKER, PO BOX 2147 LAKE CITY, FL 32056  
b) Telephone No.: 866-959-7663 Fax No. (Opt.) \_\_\_\_\_
5. Surety Information  
a) Name and address: N/A  
b) Amount of Bond: \_\_\_\_\_  
c) Telephone No.: \_\_\_\_\_ Fax No. (Opt.) \_\_\_\_\_
6. Lender  
a) Name and address: N/A  
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: N/A  
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: N/A  
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

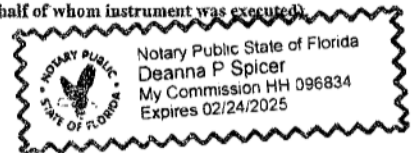
10. Anita K. Houston  
Signature of Owner or Owner's Authorized Officer/Director/Partner/Manager  
Anita K. Houston  
Print Name

The foregoing instrument was acknowledged before me, a Florida Notary, this 18 day of February, 20 22, by:  
Anita K Houston as owner (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 FL Driver License

Notary Signature Deanna P Spicer 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.

Anita K. Houston  
Signature of Natural Person Signing (in line #10 above.)