

NOTICE OF COMMENCEMENT

State of: FLORIDA County of: MADISON City of: MADISON

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.

DESCRIPTION OF PROPERTY:

Street Address: SE Benchmark Dr. Lee, A. 32059

Section: _____ Township: _____ Range: _____

Lot: _____ Block: _____

Parcel ID: 15-18-10-1253006000 Subdivision: _____

GENERAL DESCRIPTION OF IMPROVEMENT

To Construct: Sitebuild 1-18x24-2-story shed + 1-8x10 shed and 16x16 "

OWNER INFORMATION

Owner(s) Name: Craig A + Robert C Grant

Address: P.O. Box 299

City: Ponte Vedra State: FL Zip: 32082 Phone: 904-377-1715

CONTRACTOR INFORMATION

Contractor Name: Jonathan Patrick Langl Duane Sandy

Business Name: Classic Manor Builders, Inc.

Address: 555 Columbia Dr.

City: Carrollton State: GA Zip: 30117 Phone: 256-231-7139

LENDER INFORMATION

X Lender Name: N/A Contact: _____
Address: _____
City: _____ State: _____ Zip: _____ Phone: _____
201100025118
Filed for Record in
MADISON
TIM SANDERS
A _____ M.
NTC COMMENC 10.00
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Persons within the State of Florida designated by Chapter 713 whom notices or other documents may be served as provided by Section 713.13(1)(a)1, Florida Statutes:

Name: Robert Grant
Address: P.O. Box 299 Ponte Vedra Bch FL 32004

In addition to myself, _____ N/A _____
to receive a copy of the Lender's notice as provided in Section 713.13 (1)(b), Florida Statutes.

Expiration is one (1) year from date of recording unless otherwise specified.

X Signature of Owner: [Signature] 6653 101-48-125-0 4/18
Print Name: Craig A. Grant

Sworn to and subscribed before me this 31 day of Jan, 2011

Notary Public: [Signature] My Commission Expires: 1-31-2013



MARTHA R. WADDAIL
Notary Public, State of Florida
My Comm. Expires Jan. 31, 2013
Commission No. DD 847067