

Permit Number: BD23-0588  
 Folio/Parcel ID #: \_\_\_\_\_  
 Prepared by: Kathy Rey - USA Venueserv, Inc.  
6448 Parkland Drive  
Sarasota, FL 34243  
 Return to: USA Venueserv, Inc.  
6448 Parkland Drive  
Sarasota, FL 34243

**NOTICE OF COMMENCEMENT**

State of Florida, County of Orange  
 The undersigned hereby gives notice that improvement 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.

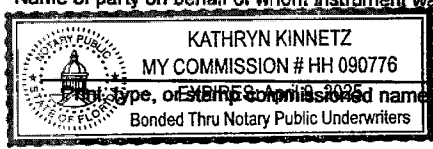
1. **Description of property** (legal description of the property, and street address if available)  
2121 South Service Lane, Bay Lake, FL 32830
2. **General description of improvement**  
Removal and installation of platform and antennas on existing tower.
3. **Owner information or Lessee information if the Lessee contracted for the improvement**  
 Name Crown Castle, Inc.  
 Address 4511 N. Himes Avenue, Suite 210, Tampa, FL 33614  
 Interest in Property Leasehold  
 Name and address of fee simple titleholder (if different from Owner listed above)  
 Name Walt Disney Parks and Resorts US, Inc.  
 Address PO Box 10000, Lake Buena Vista, FL 32830
4. **Contractor**  
 Name USA Venueserv, Inc. Telephone Number (941) 706-5182  
 Address 6448 Parkland Drive, Sarasota, FL 34243
5. **Surety** (if applicable, a copy of the payment bond is attached)  
 Name N/A Telephone Number \_\_\_\_\_  
 Address \_\_\_\_\_ Amount of Bond \$ \_\_\_\_\_
6. **Lender**  
 Name N/A Telephone Number \_\_\_\_\_  
 Address \_\_\_\_\_
7. **Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by §713.13(1)(a)7, Florida Statutes.**  
 Name \_\_\_\_\_ Telephone Number \_\_\_\_\_  
 Address \_\_\_\_\_
8. **In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's Notice as provided in §713.13(1)(b), Florida Statutes.**  
 Name \_\_\_\_\_ Telephone Number \_\_\_\_\_  
 Address \_\_\_\_\_
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 WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.**

Signature of Owner of Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager KEITH LEGG Signatory's Title/Office MGR OF FIELD OPS

The foregoing instrument was acknowledged before me this 14 day of Nov, 2023 by KEITH LEGG as MANAGER OF FIELD OPS for CROWN CASTLE, INC.  
month/year name of person Type of authority, e.g., officer, trustee, attorney in fact Name of party on behalf of whom instrument was executed

[Signature]  
 Signature of Notary Public - State of Florida



Personally Known  OR Produced ID \_\_\_\_\_  
 Type of ID Produced \_\_\_\_\_

Physical presence  Online notarization