Permit Number: Folio/Parcel ID #: Prepared by: TODD C. GREENE	
Return to: PO BOX 10000 LAKE BUENA VISTA, FL 32830	Phil Diamond, Comptroller Orange County, FL
NOTICE OF COMMENCEMENT State of Florida, County of Orange The undersigned hereby gives notice that improvement will be with Chapter 713, Florida Statutes, the following information is 1. Description of property (legal description of the property,	made to certain real property, and in accordance provided in this Notice of Commencement. and street address if available)
FORT WILDERNESS CAMPGROUND - 2602 MOCCASIN 2. General description of improvement	N TRAIL LAKE BUENA VISTA, FL 32830
General Construction / Plumbing 3. Owner information or Lessee information if the Lessee	contracted for the improvement
NameWalt Disnev Parks & Resorts US Inc. Address P.O. BOX 10000 LAKE BUENA VISTA FL 32830	
L. C.	
Name and address of fee simple titleholder (if different Name	
Address	
Contractor Name GULFCOAST UTIL!TY CONSTRUCTORS INC	Telephone Number <u>727-328-7882</u>
Address 7020 PROFESSIONAL PARKWAY SARASOTA, 5. Surety (if applicable, a copy of the payment bond is attached)	
Name	
Address	
6. Lender	
Name	Telephone Number
Address	
7. Persons within the State of Florida designated by Own	ier upon wnom notices or otner documents may
be served as provided by §713.13(1)(a)7, Fiorida Statu Name DAVE ELLIS SOURCING & PROCURMENT ADMII	N. Telephone Number <u>407-828-3582</u>
AddressPO BOX 10000 LAKE BUENA VISTA, FL 32830-	
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 TODD C. GREENE	Telephoпе Number 407-701-6171
Address PO BOX 10000 LAKE BUENA VISTA, FL 32830-	1000
 Expiration date of notice of commencement (the expiration unless a different date is specified) 	ation date will be 1 year from the date of recording
ARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE RE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, S SULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPER CORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTI ITH YOUR LENDER OF ANIATTORNEY BEFORE COMMENCING WORK OR	SECTION 713.13, FLORIDA STATUTES, AND CAN TY. A NOTICE OF COMMENCEMENT MUST BE ON. IF YOU INTEND TO OBTAIN FINANCING, CONSULT RECORDING YOUR NOTICE OF COMMENCEMENT.
mature of Owner of Lessee, or Owner's or Lessee's Authorized Officer/Director	
ne foregoing instrument was acknowledged before me this 21	month/year name of person
Type of authority, e.g., officer, trustee, attorney in fact Nar	me of party on behalf of whom instrument was executed
Sind Si Meldanado	Est. d. A. Rivera · Maldonad Print, type, or stamp commissioned name of Notary Public
Signature of Notary Public – State of Florida Personally KnownOR Produced ID	ENID AYDIN RIVERA MALDONADO
Type of ID Produced	MY COMMISSION # HH 128056 EXPIRES: September 8, 2025 Bonded Thru Notary Public Underwritters