Permit Number: Folio/Parcel ID #: Prepared by: TODD C. GREENE	DOC # 20240168638 03/21/2024 15:40 PM Page 1 of 1 Rec Fee: \$10.00 Deed Doc Tax: \$0.00 Mortgage Doc Tax: \$0.00	
	Intangible Tax: \$0.00 Phil Diamond, Comptroller	
D. I. DO DOY 10000	Orange County, FL	
Return to: PO BOX 10000 LAKE BUENA VISTA, FL 32830	Ret To: SIMPLIFILE LC	
LAKE BUENA VISTA, FL 32030		
NOTICE OF COMMENCEMENT		
State of Florida, County of Orange The undersigned hereby gives notice that improvement will be m	ade to cortain real property, and in accordance	
with Chapter 713, Florida Statutes, the following information is pr		
Description of property (legal description of the property, an		
FORT WILDERNESS CAMPGROUND - 2200 ARROWHEAI	D WAY LAKE BUENA VISTA, FL 32830	
General description of improvement General Construction / Plumbing	·	
3. Owner information or Lessee information if the Lessee co	ontracted for the improvement	
NameWalt Disnev Parks & Resorts US Inc.		
Address P.O. BOX 10000 LAKE BUENA VISTA FL 32830		
Interest in Property OWNER		
Name and address of fee simple titleholder (if different fro		
Name		
Address		
4. Contractor	T. I.) . N. I. 707 000 7000	
Name GULFCOAST UTILITY CONSTRUCTORS INC.	Telephone Number 727-328-7882	
Address 7020 PROFESSIONAL PARKWAY SARASOTA,FL		
5. Surety (if applicable, a copy of the payment bond is attached	•	
Name	Telephone NumberAmount of Bond \$	
Address6. Lender	Amount or bond '\$	
Name	Telephone Number	
Address	Tolophone Humbol	
7. Persons within the State of Florida designated by Owner		
be served as provided by §713.13(1)(a)7, Florida Statutes		
Name DAVE ELLIS SOURCING & PROCURMENT ADMIN.	Telephone Number 407-828-3582	
Address PO BOX 10000 LAKE BUENA VISTA, FL 32830-10		
8. In addition to himself or herself, Owner designates the fo	ollowing to receive a copy of the Lienor's	
Notice as provided in §713.13(1)(b), Florida Statutes.	Tale 10 and Nation 407 704 6474	
Name TODD C. GREENE	Telephone Number 407-701-6171	
Address PO BOX 10000 LAKE BUENA VISTA, FL 32830-10 9. Expiration date of notice of commencement (the expiration	on data will be 1 year from the data of recording	
unless a different date is specified)		
RNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXECONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. CORDED AND POSTED ON THE GOB SITE BEFORE THE FIRST INSPECTION THE YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RE	TION 713.13, FLORIDA STATUTES, AND CAN A NOTICE OF COMMENCEMENT MUST BE . IF YOU INTEND TO OBTAIN FINANCING, CONSULT	
A STATE OF THE PROPERTY OF THE	MITIK Signator in Title/Office	
nature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Par		
e foregoing instrument was acknowledged before me this $2/$ da	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	
Type of authority, e.g., onice, trustee, attorney in raci	En: J A. Rivera-Maldonad	
Signature of Notary Public – State of Florida P	rint, type, or stamp commissioned name of Notary Public	
Personally KnownOR Produced ID		
Type of ID Produced	SAY WAY CAND AND IN THE PARTY.	

