

Permit Number:
 Folio/Parcel Identification Number:
 Prepared by and Return to:
 Walt Disney World Resort - FAM
 Attn: Jason Goff
 P.O. Box 10000
 Lake Buena Vista, FL 32830-1000

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 property, and street address if available)
 4047560 - 1720 EPCOT Resorts BLVD #D (Shipwreck Pool), Bay Lake, Florida, 32830, 282430000000009

2. **General description of improvement**
 General Construction

3. **Owner information or Lessee information if the Lessee contracted for the improvement**
 Name Walt Disney World Resort
 Address P.O. Box 10000, Lake Buena Vista, FL 32830
 Interest in Property Owner
 Name and address of fee simple titleholder (if different from Owner listed above)
 Name _____
 Address _____

4. **Contractor**
 Name POLI CONSTRUCTION INC Telephone Number 866-611-3632
 Address 7512 DR PHILLIPS BOULEVARD, SUITE 50-725, ORLANDO, FL 32819

5. **Surety**
 Name _____ Telephone Number _____
 Address _____ Amount of Bond \$ _____

6. **Lender**
 Name _____ Telephone Number _____
 Address _____


7. **Persons within the State of Florida designed by Owner upon whom notices or other documents may be served as provided by Section 713.13(1)(b), Florida Statutes.**
 Name Megan Kelley, Facility Asset Management (FAM) Telephone Number 407-939-4963
 Address P.O. Box 10000, Lake Buena Vista, Florida 32830-1000

8. **In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's Notice as provided by Section 713.13(1)(b), Florida Statutes.**
 Name Jason Goff Telephone Number _____
 Address P.O. Box 10000, Lake Buena Vista, Florida 32830-1000

9. **Expiration date of notice of commencement** (the expiration date may not be before the completion of construction and final payment to the contractor, but will be 1 year from the date of recording unless a different date is specified)
12/9/2025

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.

Under penalty of perjury, I declare that I have read the foregoing notice of commencement and that the facts stated in it are true to the best of my knowledge and belief.



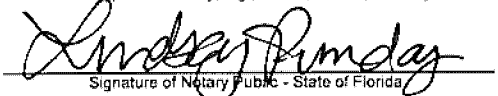
 Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager

Jason Goff / Project Rep. / FAM

 Signatory's Printed Name/Title/Office

The foregoing instrument was acknowledged before me this 13 day of Jan 2025 by Jason Goff
month/year

as Authorized Signatory for _____
Type of authority, e.g., officer, trustee, attorney in fact Name of party on behalf of whom instrument was executed



 Signature of Notary Public - State of Florida

Lindsay Punday

 Print, type, or stamp name of Notary Republic

Personally known OR Produced ID _____
 Type of ID Produced _____

