

Permit Number: \_\_\_\_\_  
Folio/Parcel ID #: \_\_\_\_\_  
Prepared by: Brandon Oglesby (PWS)  
WALT DISNEY WORLD  
PO BOX 10000 LAKE BUENA VISTA, FL. 32830  
Return to: WALT DISNEY WORLD  
PO BOX 10000 LAKE BUENA VISTA, FL. 32830  
Sam Dienes/Brandon Oglesby

DOC # 20250062917  
02/03/2025 09:50 AM 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  
Orange County, FL  
Ret To: SIMPLIFILE LC

## 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)  
745 W SAVANNAH CIR Bay Lake, FL 32830 Tax ID#34-24-27-0000-00-003
2. **General description of improvement**  
General Construction
3. **Owner information or Lessee information if the Lessee contracted for the improvement**  
Name WALT DISNEY WORLD  
Address PO BOX 10000, LAKE BUENA VISTA, FL 32830  
Interest in Property \_\_\_\_\_  
Name and address of fee simple titleholder (if different from Owner listed above)  
Name \_\_\_\_\_  
Address \_\_\_\_\_
4. **Contractor**  
Name Westbrook Service Corporation Telephone Number 407-841-3310  
Address 1411 S Orange Blossom Trl, Orlando, FL 32805
5. **Surety** (if applicable, a copy of the payment bond is attached)  
Name \_\_\_\_\_ Telephone Number \_\_\_\_\_  
Address \_\_\_\_\_ Amount of Bond \$ \_\_\_\_\_
6. **Lender**  
Name \_\_\_\_\_ 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 Sam Dienes Telephone Number 407-701-6762  
Address PO 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 Brandon Oglesby (PWS) AK FACILITIES Telephone Number 407-257-5336  
Address PO BOX 10000, LAKE BUENA VISTA, FL 32830
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) \_\_\_\_\_

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

Manager- Eng. Svcs

Signatory's Title/Office

The foregoing instrument was acknowledged before me this 31<sup>st</sup> day of Jan 2025 by Sam Dienes

as Authorized Signatory

month/year

name of person

Type of authority, e.g., officer, trustee, attorney in fact

for the Walt Disney Company

Name of party on behalf of whom instrument was executed

Signature of Notary Public - State of Florida

Print, type, or stamp commissioned name of Notary Public

Personally Known ☒ OR Produced ID \_\_\_\_\_

Type of ID Produced \_\_\_\_\_

