Permit Number:
Folio/Parcel ID #:
Prepared by: Scott Dubois
1442 E Bueana Vistaa Dr

Return to: DON Bell Signhs
365 Oak Place Port Orange
FL 32127

**DOC # 20250362117** 06/20/2025 12:26 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
Orange County, FL
Ret To: SIMPLIFILE LC

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)  3403 E vista Dr  2. General description of improvement Add Sign and low voltage Electrical  3. Owner information or Lessee information if the Lessee contracted for the improvement Name Walt Disney Parks And Resorts 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 Address And Resorts Amount of Bond \$  Elephone Number Address And Resorts Amount of Bond \$  Elephone Number Address And Resorts Amount of Bond \$  Elephone Number Address And Resorts Amount of Bond \$  Elephone Number Address And Resorts Name Address And Resorts Name Felephone Number Address And Resorts Name Address And Resorts Name Address And Resorts Name Felephone Number Address And Resorts Name Address And Resorts Name Felephone Number Address And Resorts Name Address And Resorts Name Felephone Number Address Beard and Note of Resorts Notice as provided by §713.13(1)(a)7, Florida Statutes. Name Felephone Number Address Beard and Note of Notice of Commencement (the expiration date will be 1 year from the date of recording unless a different date is specified)  Name Felephone Number Address Beard And Post And Andress Beard	36	65 Oak Place Port Orange		
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foregoing instrument was acknowledged before me this B day of 6 25 by John Rei Chert name of person for Walt Discopt name of person Name of party on behalf of whom instrument was executed  ANN GERTRUDE HELMINK  Signature of Notary Public – State of Florida  Personally Known OR Produced ID  OR Produced ID  OR Produced ID  OR Produced ID	CO ULT ORI	ONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, S T IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPER IDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTI	ECTION 713.13, FLORIDA STATUTES, AND CAN TY. A NOTICE OF COMMENCEMENT MUST BE ON. IF YOU INTEND TO OBTAIN FINANCING, CONSULT	
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