



SEMINOLE COUNTY  
PLANNING & DEVELOPMENT DIVISION  
1101 EAST FIRST STREET, ROOM 2028  
SANFORD, FLORIDA 32771  
(407) 665-7371 EPLANDESK@SEMINOLECOUNTYFL.GOV

PROJ. #: 25-20000010

RECEIVED AND PAID 12/15/2025

## REZONE/FUTURE LAND USE AMENDMENT

ALL INFORMATION MUST BE PROVIDED FOR APPLICATION TO BE CONSIDERED COMPLETE

### APPLICATION TYPES/FEEES

<input type="checkbox"/> LARGE SCALE FUTURE LAND USE AMENDMENT ONLY (>50 ACRES)	\$400/ACRE* (\$10K MAX. FEE)
<input type="checkbox"/> LARGE SCALE FLU AMENDMENT <u>AND</u> REZONE (>50 ACRES)	\$400/ACRE* (\$10K MAX. FEE) + 50% OF REZONE
LSFLUA FEE _____ + 50% OF REZONE FEE _____ = _____	TOTAL LSFLUA AND REZONE FEE
<input type="checkbox"/> SMALL SCALE FUTURE LAND USE AMENDMENT ONLY (≤50 ACRES)	\$3,500
<input type="checkbox"/> SMALL SCALE FLU AMENDMENT <u>AND</u> REZONE (≤50 ACRES)	\$3,500 + 50% OF REZONE FEE
SSFLUA FEE \$3,500 + 50% OF REZONE FEE _____ = _____	TOTAL SSFLUA AND REZONE FEE
<input type="checkbox"/> TEXT AMENDMENT (NOT ASSOCIATED WITH LAND USE AMENDMENT)	\$3,000
<input type="checkbox"/> TEXT AMENDMENT (ASSOCIATED WITH LAND USE AMENDMENT)	\$1,000
<input checked="" type="checkbox"/> REZONE (NON-PD)**	\$2,500 + \$75/ACRE* (\$6,500 MAX. FEE)
<input type="checkbox"/> PD REZONE**	
<input type="checkbox"/> PD REZONE	\$4,000 + \$75/ACRE* (\$10K MAX. FEE)
<input type="checkbox"/> PD FINAL DEVELOPMENT PLAN	\$1,000
<input type="checkbox"/> PD FINAL DEVELOPMENT PLAN AS AN ENGINEERED SITE PLAN	CALCULATED BELOW
(TOTAL SF OF <u>NEW</u> IMPERVIOUS SURFACE AREA SUBJECT FOR REVIEW/1,000)^ <sup>^</sup> x \$25 + \$2,500 = FEE DUE	
(TOTAL SF OF <u>NEW</u> ISA _____ /1,000 = _____)^ <sup>^</sup> x \$25 + \$2,500 = FEE DUE: _____	
<u>EXAMPLE:</u> 40,578 SF OF NEW ISA UNDER REVIEW = 40,578/1,000 = <u>40.58</u> x \$25 = <u>\$1,014.50</u> + \$2,500 = <u>\$3,514.50</u>	
<input type="checkbox"/> PD MAJOR AMENDMENT	\$4,000 + \$75/ACRE* <sup>^</sup> (\$10K MAX. FEE)
<input type="checkbox"/> PD MINOR AMENDMENT	\$1,000
<input type="checkbox"/> DEVELOPMENT OF REGIONAL IMPACT (DRI)	
<input type="checkbox"/> DETERMINATION OF SUBSTANTIAL DEVIATION (OR OTHER CHANGE)	\$3,500.00

\*PER ACRE FEES ARE ROUNDED UP TO THE NEAREST FULL ACRE

\*\*50% OF REZONE FEE IF REZONE IS CONCURRENT WITH A LAND USE AMENDMENT

^ACREAGE IS CALCULATED FOR THE AFFECTED AREA ONLY

^^ROUNDED TO 2 DECIMAL POINTS

**PROJECT**

PROJECT NAME: Henderson Hill	
PARCEL ID #(S): 30-19-30-514-0000-0020	
LOCATION: NWC W SR 46 & N Henderson Lane, Sanford, FL 32771	
EXISTING USE(S): Vacant Agriculture	PROPOSED USE(S): Commercial
TOTAL ACREAGE: 4.33	BCC DISTRICT: District 5 - Andria Herr
WATER PROVIDER: Seminole County Utilities	SEWER PROVIDER: Seminole County Utilities
CURRENT ZONING: A-1 (Agricultural)	PROPOSED ZONING: C-2 (General Commercial)
CURRENT FUTURE LAND USE: COM (Commercial)	PROPOSED FUTURE LAND USE: COM (Commercial)

**APPLICANT**EPLAN PRIVILEGES: VIEW ONLY ☒ UPLOAD ☐ NONE ☐

NAME: Andrew Hill		COMPANY: Hill / Gray Seven LLC	
ADDRESS: 415 S Orlando Avenue, Ste. 221			
CITY: Winter Park		STATE: FL	ZIP: 32789
PHONE: 407-365-5775 x1		EMAIL: drew@hillgrayseven.com	

**CONSULTANT**EPLAN PRIVILEGES: VIEW ONLY ☐ UPLOAD ☒ NONE ☐

NAME: Robert Ziegenfuss		COMPANY: Z Development Services	
ADDRESS: 1201 E Robinson Street			
CITY: Orlando		STATE: FL	ZIP: 32801
PHONE: 407-271-8910 x501		EMAIL: permits@zdevelopmentservices.com	

**OWNER(S)**

(INCLUDE NOTARIZED OWNER'S AUTHORIZATION FORM)

NAME(S): Namo Holdings Inc			
ADDRESS: 112 W Bonefish Circle			
CITY: Jupiter		STATE: FL	ZIP: 33477
PHONE:		EMAIL: josephkolomeir@hotmail.com	

**CONCURRENCY REVIEW MANAGEMENT SYSTEM (SELECT ONE)**

☒ I elect to defer the Concurrency Review that is required by Chapter 163, Florida Statutes, per Seminole County's Comprehensive Plan for the above listed property until a point as late as Site Plan and/or Final Engineering submittals for this proposed development plan. I further specifically acknowledge that any proposed development on the subject property will be required to undergo Concurrency Review and meet all Concurrency requirements in the future. **PD Final Development Plan as an Engineered Site Plan may not defer.**

☐ I hereby declare and assert that the aforementioned proposal and property described are covered by a valid previously issued Certificate of Vesting or a prior Concurrency determination (Test Notice issued within the past two years as identified below. Please attach a copy of the Certificate of Vesting or Test Notice.)

**TYPE OF CERTIFICATE****CERTIFICATE NUMBER****DATE ISSUED**

VESTING: \_\_\_\_\_

TEST NOTICE: \_\_\_\_\_

☐ Concurrency application has been submitted online and the appropriate fee is attached. I wish to encumber capacity at an early point in the development process and understand that only upon approval of the Development Order and the full payment of applicable facility reservation fees is a Certificate of Concurrency issued and entered into the Concurrency Management monitoring system.


By my signature hereto, I do hereby certify that the information contained in this application is true and correct to the best of my knowledge and understand that deliberate misrepresentation of such information may be grounds for denial or reversal of the application and/or revocation of any approval based upon this application.

I hereby authorize County staff to enter upon the subject property at any reasonable time for the purposes of investigating and reviewing this request. I also hereby agree to place a public notice sign (placard), if required, on the subject property at a location(s) to be determined by County staff.

I further acknowledge that Seminole County may not defend any challenge to my proposed Future Land Use Amendment/Rezoning and related development approvals, and that it may be my sole obligation to defend any and all actions and approvals, which authorize the use or development of the subject property. Submission of this form initiates a process and does not imply approval by Seminole County or any of its boards, commissions or staff.

I further acknowledge that I have read the information contained in this application pertaining to proposed amendments to the official Zoning map, official Future Land Use map and/or Comprehensive Plan and have had sufficient opportunity to inquire with regard to matters set forth therein and, accordingly, understand all applicable procedures and matters relating to this application.

I hereby represent that I have the lawful right and authority to file this application.

**SIGNATURE OF OWNER/AUTHORIZED AGENT**

(PROOF OF PROPERTY OWNER'S AUTHORIZATION IS REQUIRED  
IF SIGNED BY SOMEONE OTHER THAN THE PROPERTY OWNER)

**DATE**

**SEMINOLE COUNTY  
APPLICATION & AFFIDAVIT**

**Ownership Disclosure Form**

The owner of the real property associated with this application is a/an (check one):

- ☐ Individual                      ☒ Corporation                      ☐ Land Trust  
☐ Limited Liability Company                      ☐ Partnership                      ☐ Other (describe): \_\_\_\_\_

1. List all **natural persons** who have an ownership interest in the property, which is the subject matter of this petition, by name and address.

NAME	ADDRESS	PHONE NUMBER

(Use additional sheets for more space)

2. For each **corporation**, list the name, address, and title of each officer; the name and address of each director of the corporation; and the name and address of each shareholder who owns two percent (2%) or more of the stock of the corporation. Shareholders need not be disclosed if a corporation's stock are traded publicly on any national stock exchange.

NAME	TITLE OR OFFICE	ADDRESS	% OF INTEREST
Joseph Kolomeir	DPST	112 Bonefish Circle, Jupiter, FL 33477	100%

(Use additional sheets for more space)

3. In the case of a **trust**, list the name and address of each trustee and the name and address of the beneficiaries of the trust and the percentage of interest of each beneficiary. If any trustee or beneficiary of a trust is a corporation, please provide the information required in paragraph 2 above:

Trust Name: \_\_\_\_\_

NAME	TRUSTEE OR BENEFICIARY	ADDRESS	% OF INTEREST

(Use additional sheets for more space)

4. For **partnerships**, including limited partnerships, list the name and address of each principal in the partnership, including general or limited partners. If any partner is a corporation, please provide the information required in paragraph 2 above.

NAME	ADDRESS	% OF INTEREST

(Use additional sheets for more space)

5. For each **limited liability company**, list the name, address, and title of each manager or managing member; and the name and address of each additional member with two percent (2%) or more membership interest. If any member with two percent (2%) or more membership interest, manager, or managing member is a corporation, trust or partnership, please provide the information required in paragraphs 2, 3 and/or 4 above.

Name of LLC: \_\_\_\_\_

NAME	TITLE	ADDRESS	% OF INTEREST

(Use additional sheets for more space)

6. In the circumstances of a **contract for purchase**, list the name and address of each contract purchaser. If the purchaser is a corporation, trust, partnership, or LLC, provide the information required for those entities in paragraphs 2, 3, 4 and/or 5 above.

Name of Purchaser: \_\_\_\_\_

NAME	ADDRESS	% OF INTEREST

(Use additional sheets for more space)

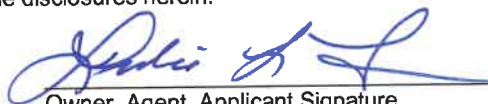
Date of Contract: \_\_\_\_\_

Specify any contingency clause related to the outcome for consideration of the application: \_\_\_\_\_

7. As to any type of owner referred to above, a change of ownership occurring subsequent to this application, shall be disclosed in writing to the Planning and Development Director prior to the date of the public hearing on the application.
8. I affirm that the above representations are true and are based upon my personal knowledge and belief after all reasonable inquiry. I understand that any failure to make mandated disclosures is grounds for the subject Rezone, Future Land Use Amendment, Special Exception, or Variance involved with this Application to become void. I certify that I am legally authorized to execute this Application and Affidavit and to bind the Applicant to the disclosures herein:

Date

12/15/25

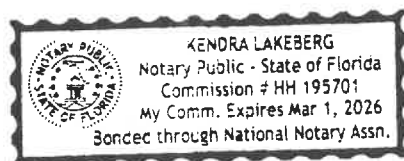


Owner, Agent, Applicant Signature  
Julie Farr (Agent)

**STATE OF FLORIDA  
COUNTY OF SEMINOLE**

Sworn to and subscribed before me by means of ☐ physical presence or ☐ online notarization, this 15th day of December, 2025, by Julie Farr, who is ☒ personally known to me, or

☐ has produced \_\_\_\_\_ as identification.



Signature of Notary Public

  
Print, Type or Stamp Name of Notary Public



# OWNER AUTHORIZATION FORM

An authorized applicant is defined as:

- The property owner of record; or
- An agent of said property owner (power of attorney to represent and bind the property owner must be submitted with the application); or
- Contract purchase (a copy of a fully executed sales contract must be submitted with the application containing a clause or clauses allowing an application to be filed).

I, Namo Holdings Inc, the owner of record for the following described property [Parcel ID Number(s)] 30-19-30-514-0000-0020 hereby designates Robert Ziegenfuss and/or Julie Farr to act as my authorized agent for the filing of the attached application(s) for:

<input type="checkbox"/> Alcohol License	<input type="checkbox"/> Arbor Permit	<input checked="" type="checkbox"/> Construction Revision	<input checked="" type="checkbox"/> Final Engineering
<input type="checkbox"/> Final Plat	<input checked="" type="checkbox"/> Future Land Use Amendment	<input type="checkbox"/> Lot Split/Reconfiguration	<input checked="" type="checkbox"/> Minor Plat
<input checked="" type="checkbox"/> Preliminary Subdivision Plan	<input checked="" type="checkbox"/> Rezone	<input checked="" type="checkbox"/> Site Plan	<input type="checkbox"/> Special Event
<input type="checkbox"/> Special Exception	<input type="checkbox"/> Temporary Use Permit	<input type="checkbox"/> Vacate	<input type="checkbox"/> Variance

OTHER: all permitting required for the development of this site

and make binding statements and commitments regarding the request(s). I certify that I have examined the attached application(s) and that all statements and diagrams submitted are true and accurate to the best of my knowledge. Further, I understand that this application, attachments, and fees become part of the Official Records of Seminole County, Florida and are not returnable.

Date

10/12/2025

Property Owner's Signature

Joseph Kolomeir

Property Owner's Printed Name

Province of Ontario  
STATE OF FLORIDA  
COUNTY OF Halton

SWORN TO AND SUBSCRIBED before me, an officer duly authorized in the State of Florida to take acknowledgements, appeared Joseph Kolomeir (property owner),

☒ by means of physical presence or ☐ online notarization; and ☐ who is personally known to me or ☐ who has produced

a Canadian Passport # AN177018 as identification, and who executed the foregoing instrument and sworn an oath on this 10th day of December, 2025

Nachia Law Office Professional Corporation  
242 Kerr Street, Unit 2  
Oakville, Ontario L6K 3B2  
905-290-1985

Notary Public

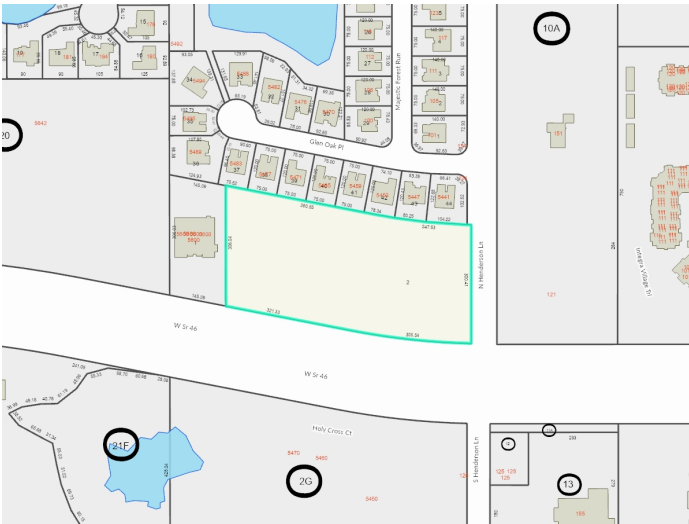
MARIA BENDERSKAYA  
LSO # P06103

# Property Record Card



Parcel: **30-19-30-514-0000-0020**  
 Property Address:  
 Owners: **NAMO HOLDINGS INC**  
 2026 Market Value \$2,701,500 Assessed Value \$2,701,500 Taxable Value \$2,701,500  
 2025 Tax Bill \$36,953.82  
 Vac General-Commercial property has a lot size of 4.29 Acres

## Parcel Location



## Site View

## Parcel Information

Parcel	30-19-30-514-0000-0020
Property Address	
Mailing Address	112 W BONEFISH CIR JUPITER, FL 33477-7233
Subdivision	C AND C PLAZA
Tax District	01:County Tax District
DOR Use Code	10:Vac General-Commercial
Exemptions	None
AG Classification	No

## Value Summary

	2026 Working Values	2025 Certified Values
Valuation Method	Cost/Market	Cost/Market
Number of Buildings	0	0
Depreciated Building Value	\$0	\$0
Depreciated Other Features	\$0	\$0
Land Value (Market)	\$2,701,500	\$2,701,500
Land Value Agriculture	\$0	\$0
Just/Market Value	\$2,701,500	\$2,701,500
Portability Adjustment	\$0	\$0
Save Our Homes Adjustment/Maximum Portability	\$0	\$0
Non-Hx 10% Cap (AMD 1)	\$0	\$0
P&G Adjustment	\$0	\$0
Assessed Value	\$2,701,500	\$2,701,500

## 2025 Certified Tax Summary

Tax Amount w/o Exemptions	\$36,953.82
Tax Bill Amount	\$36,953.82
Tax Savings with Exemptions	\$0.00

## Owner(s)

Name - Ownership Type  
 NAMO HOLDINGS INC

Note: Does NOT INCLUDE Non Ad Valorem Assessments

## Legal Description

LOT 2  
C & C PLAZA  
PB 68 PGS 28 & 29

## Taxes

Taxing Authority	Assessed	Exempt Amount	Taxable
COUNTY GENERAL FUND	\$2,701,500	\$0	\$2,701,500
Schools	\$2,701,500	\$0	\$2,701,500
FIRE	\$2,701,500	\$0	\$2,701,500
ROAD DISTRICT	\$2,701,500	\$0	\$2,701,500
SJWM(Saint Johns Water Management)	\$2,701,500	\$0	\$2,701,500

## Sales

Deed Type	Date	Sale Amount	Book / Page	Sale Type	Qualified?
WARRANTY DEED	1/8/2020	\$2,600,000	09515/1029	Vacant	Yes
QUIT CLAIM DEED	7/1/2014	\$100	08308/1033	Vacant	No
CORRECTIVE DEED	5/1/2007	\$100	06701/1156	Vacant	No
WARRANTY DEED	10/1/2005	\$500,000	06010/1365	Vacant	No

## Land

Units	Rate	Assessed	Market
186,955 SF	\$14.45/SF	\$2,701,500	\$2,701,500

## Building Information

#	
Use	
Year Built*	
Bed	
Bath	
Fixtures	
Base Area (ft <sup>2</sup> )	
Total Area (ft <sup>2</sup> )	
Constuction	
Replacement Cost	
Assessed	

Building

\* Year Built = Actual / Effective



Permits				
Permit #	Description	Value	CO Date	Permit Date

Extra Features				
Description	Year Built	Units	Cost	Assessed

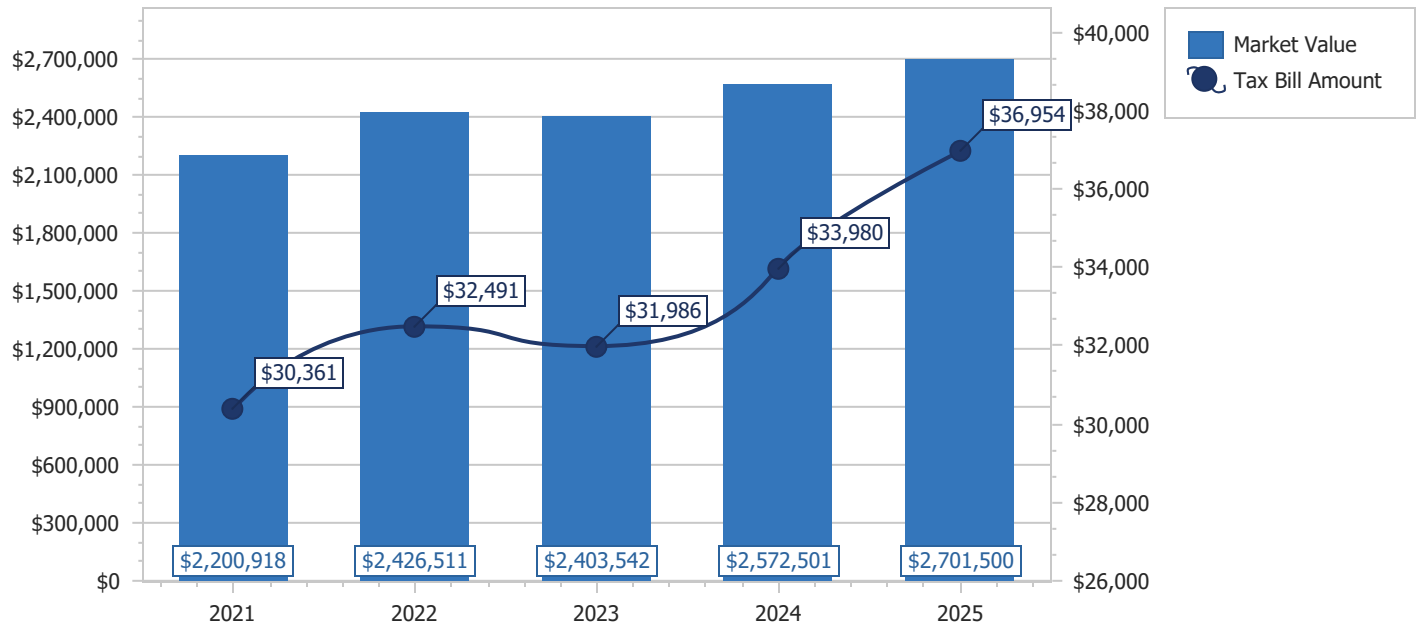
Zoning	
Zoning	A-1
Description	Agricultural-1Ac
Future Land Use	COM
Description	Commercial

Political Representation	
Commissioner	District 5 - Andria Herr
US Congress	District 7 - Cory Mills
State House	District 36 - Rachel Plakon
State Senate	District 10 - Jason Brodeur
Voting Precinct	Precinct 3

School Districts	
Elementary	Region 1
Middle	Sanford
High	Seminole

Utilities	
Fire Station #	Station: 34 Zone: 341
Power Company	FPL
Phone (Analog)	AT&T
Water	Seminole County Utilities
Sewage	Seminole County Utilities
Garbage Pickup	
Recycle	
Yard Waste	
Hauler #	

## Property Value History



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[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Search by Entity Name](#) /

## Detail by Entity Name

Florida Profit Corporation  
NAMO HOLDINGS INC.

### Filing Information

**Document Number** P19000067234  
**FEI/EIN Number** 61-1957836  
**Date Filed** 08/28/2019  
**State** FL  
**Status** ACTIVE

### Principal Address

112 BONEFISH CIRCLE  
JUPITER, FL 33477

### Mailing Address

112 BONEFISH CIRCLE  
JUPITER, FL 33477

### Registered Agent Name & Address

SG REGISTERED AGENT, LLC  
200 E PALMETTO PARK ROAD,STE 103  
BOCA RATON, FL 33432

Address Changed: 01/21/2020

### Officer/Director Detail

#### **Name & Address**

Title DPST

KOLOMEIR, JOSEPH  
112 BONEFISH CIRCLE  
JUPITER, FL 33477

### Annual Reports

Report Year	Filed Date
2023	04/07/2023
2024	03/18/2024
2025	04/08/2025

### Document Images

<a href="#">04/08/2025 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">03/18/2024 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">04/07/2023 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">04/16/2022 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">01/11/2021 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">01/21/2020 -- ANNUAL REPORT</a>	<a href="#">View image in PDF format</a>
<a href="#">08/28/2019 -- Domestic Profit</a>	<a href="#">View image in PDF format</a>

**Seminole County Government  
Development Services Department  
Planning and Development Division  
Credit Card Payment Receipt**

If you have questions about your application or payment, please email us [eplandesk@seminolecountyfl.gov](mailto:eplandesk@seminolecountyfl.gov) or call us at: (407) 665-7371.

**Receipt Details**

**Date:** 12/15/2025 10:12:19 AM  
**Project:** 25-20000010  
**Credit Card Number:** 55\*\*\*\*\*1553  
**Authorization Number:** 01502Q  
**Transaction Number:** 151225O10-A2963484-0D7E-4F91-90ED-4F060AB3BC55  
**Total Fees Paid:** 2916.00

**Fees Paid**

<b>Description</b>	<b>Amount</b>
CC CONVENIENCE FEE -- PZ	41.00
REZONE TO COM, IND, OP/RP 14	2875.00
Total Amount	2916.00