PM: Doug



SEMINOLE COUNTY PLANNING & DEVELOPMENT DIVISION 1101 EAST FIRST STREET, ROOM 2028 SANFORD, FLORIDA 32771 PROJ. #: <u>23 - 060006</u> Meceived: 10/16/23 SANFORD, FLORIDA 32771 (407) 665-7371 EPLANDESK@SEMINOLECOUNTYFL.GOV PAid: 10/16/25

SITE PLAN/DREDGE & FILL

ALL INFORMATION MUST BE PROVIDED FOR APPLICATION TO BE CONSIDERED COMPLETE

APPLICATION TYPES/FEES	
SMALL SITE PLAN (<2,500 SQUARE FEET IMPERVIOUS SURFACE AREA SUBJECT FOR REVIEW)	\$500.00
■ FILL (≥100 CUBIC YARDS OF FILL AND/OR IN FLOOD PLAIN OR WETLAND PER SEC. 40.2)	\$500.00
DREDGE AND FILL	\$750.00
SITE PLAN (>2,500 SQUARE FEET IMPERVIOUS SURFACE AREA SUBJECT FOR REVIEW)	CALCULATED BELOW MAXIMUM \$9,000
NEW BUILDING SQUARE FOOTAGE: <u>9,000</u> + NEW PAVEMENT SQUARE FOOT TOTAL SQUARE FEET OF NEW IMPERVIOUS SURFACE AREA (ISA) SUBJECT FOR REVIEW: <u>54.55</u> (TOTAL NEW ISA <u>34.587</u> /1,000 = <u>40.578</u>)* x \$25 + \$2,500 = FEE EXAMPLE: 40,578 SF OF NEW ISA SUBJECT FOR REVIEW = 40,578/1,000 = <u>40.58*</u> x \$25 = <u>\$1,014.50</u> *ROUNDED TO 2 DECIMAL POINTS	34,587 1 3 3 75 . 5 DUE: <u>3</u> 36/,68

PROJECT
PROJECT NAME: Stone WALL PLACE (2846)
PARCEL ID #(S):
22-20-30-3000-0390-0000 Plin For had a produced
22-20-30-3000-0390-0000 DESCRIPTION OF PROJECT: PROPOSED SITE PIAN FOR WAVE house, PARKING SPIACES, DESCRIPTION OF PROJECT: ENCLUDING HANDCHP, LANDSCHPE, SIDE WALKS, DRAINAGE EXISTING USE(S): UNA NOT PROPOSED USE(S): IN A POLICIES
EXISTING USE(S): VACANT PROPOSED USE(S): WAREhouse
ZONING: M-1 FUTURE LAND USE: IND TOTAL ACREAGE: 4,41 ACRES BCC DISTRICT: 2-JAYZAMDOWCK
WATER PROVIDER: Seminole County SEWER PROVIDER: Seminole County
ARE ANY TREES BEING REMOVED? YES X NO (IF YES, ATTACH COMPLETED ARBOR APPLICATION)
IF DREDGE & FILL OR FILL PERMIT, CUBIC YARDS OF FILL PROPOSED:

APPLICANT	EPLAN PRIVILEGES: VIEW ONLY UPLOAD 🖄 NONE
NAME: SANDIZA L. COQUIN	COMPANY: Benchmittek Building Fue.
ADDRESS: 3126 WINDING PINE TR	AI (
CITY: S Longwood	STATE: FI, ZIP: 32779
PHONE: 321. 251-0996	EMAIL: SLCOGgina YALDO, COM
CONSULTANT	EPLAN PRIVILEGES: VIEW ONLY UPLOAD NONE
NAME: OREG CHATELAIN	COMPANY: LINN ENGENEERING
ADDRESS: PO Box 14004	
CITY: Winter PARK	STATE: F1, ZIP: 32.789
PHONE: 407-775-5194	EMAIL: arego (INNENGINEERING, COM
	1 10 1
OWNER(S)	(INCLUDE NOTARIZED OWNER'S AUTHORIZATION FORM)
NAME(S): KKNC PROPERTIES LLS	- RANDY BRYANT
ADDRESS: 3601 Celery Ave	
CITY: SAN-FORD	STATE: 17, ZIP: 32771-1093
PHONE: 407-330-7663	EMAIL: KIKNC properties@ qmAII. Com
CONCURRENCY REVIEW MANAGEMENT	
	nentioned proposal and property described are covered by a valid or Concurrency determination (Test Notice issued within the past two y of the Certificate of Vesting or Test Notice.)
TYPE OF CERTIFICATE CERTIFIC	ATE NUMBER DATE ISSUED
VESTING:	
TEST NOTICE:	
development process and understand that onl	are attached. I wish to encumber capacity at an early point in the y upon approval of the Development Order and the full payment of ificate of Concurrency issued and entered into the Concurrency
Not applicable	

I understand that the application for site plan review must include all required submittals as specified in Chapter 40, Part 4, of the Seminole County Land Development Code. Submission of incomplete plans may create delays in review and plan approval. The review fee provides for two plan reviews. Additional reviews will require an additional fee.

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

SIGNATURE OF AUTHORIZED APPLICANT

10/16/2023

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, Randy Bryant	, the owner of record for the following described
property [Parcel ID Number(s)] 22-20-30-300-0390-	hereby designates
Benchmark Building, Inc	to act as my authorized agent for the filing of the attached
application(s) for:	

Alcohol License	🗆 Arbor Permit	Construction Revision	□ Final Engineering	
🗆 Final Plat	□ Future Land Use Amendment	Lot Split/Reconfiguration	🗆 Minor Plat	
Preliminary Subdivision Plan	□ Rezone	□ Site Plan	Special Event	
Special Exception	Temporary Use Permit	□ Vacate	□ Variance	

OTHER: permits Required For warehouse site Plans, ANY/All related permits

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.

Property Owner's Signature

Property Owner's Printed Name

STATE OF FLORIDA COUNTY OF Seminole

SWORN TO AND SUBSCRIBED before me, an officer duly authorized in the State of Florida to take acknowledgements, appeared Kandy Bryant (property owner), □ by means of physical presence or □ online notarization; and ☑ who is personally known to me or □ who has produced as identification, and who executed the foregoing instrument and sworn an oath on this 54h day of Pother ,2023.



A year



Revised 5/17/23

Building Division

LIMITED POWER OF ATTORNEY

Date: 05/23/2023

I hereby name and appoint: Sandra L. Coggin

an agent of: Benchmark Building Inc.

(Name of Company)

to be my lawful attorney-in-fact to act for me to apply for, receipt for, sign for and do all things necessary to this appointment for (check only one option):

~

All permits and applications submitted by this contractor.

OR

The specific permit and application for work located at:

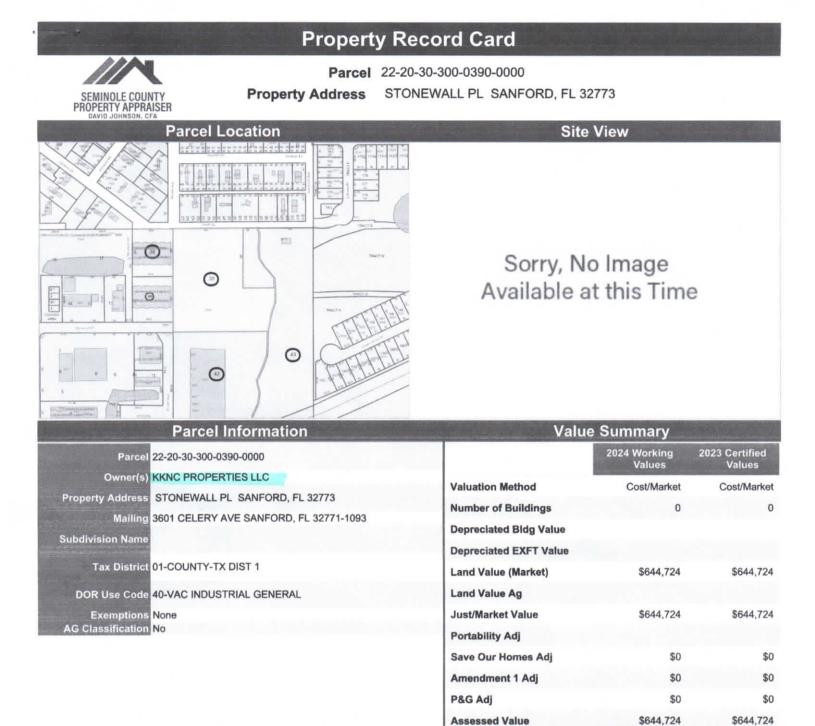
(Street Address)

A notarized completed form must be submitted with each application if the License Holder is not listed as the applicant. This form is valid for up to five (5) years from the notarized date unless specified differently below.

Expiration Date of this form if less than 5 years:

It is the License Holder's responsibility to make sure this form is kept up to date

License Holder Name: David A. Coggin	
State License Number: CGC1518505	
Signature of License Holder:	
STATE OF FLORIDA COUNTY OF Valuan	
The foregoing instrument was acknowledged before me	by means of [] physical presence or [] online
notarization, this 24th day of May	, 20 2.3 , by David
(name of person acknowledging), who is 🋱 personally known to me or 🗆 who has
	identification and who did (did not) take an oath.
DOREEN M SAMPSON Notary Public - State of Florida	Wareen M Signature of Notary
Commission # HH 174574 My Comm. Expires Sep 11, 2025	Notary Public - State of Alanda
my conint. Expires sep 11, 2023	Commission No. HH 144574
(Moter, Seel)	My Commission Expires: 9/11/2023
1101 EAST FIRST STREET SANFORD FL 32771-1468 bpcustomerservice@ser	



2023 Certified Tax Summary

2023 Tax Amount without Exemptions

2023 Tax Bill Amount

\$8,579.99

\$8,579.99

* Does NOT INCLUDE Non Ad Valorem Assessments

Legal Description

SEC 22 TWP 20S RGE 30E BEG 837 FT N OF SW COR OF E 1/2 OF NE 1/4 OF SE 1/4 RUN N TO N LI OF SE 1/4 E 332 FT S 283 FT E TO C/L SCOTH GIN CREEK SWLY ON CREEK TO A PT E OF BEG W TO BEG

Taxes		and the second second second	10.00% L 100			A Transmitter of the second second	
Taxing Authority			Assessme	ent Value	Exempt Valu	Jes	Taxable Value
ROAD DISTRICT				\$644,724		\$0	\$644,724
SJWM(Saint Johns Wate	er Management)			\$644,724		\$0	\$644,724
FIRE				\$644,724		\$0	\$644,724
COUNTY GENERAL FU	ND			\$644,724		\$0	\$644,724
Schools				\$644,724		\$0	\$644,724
Sales						and the second states and	
Description		Date	Book	Page	Amount	Qualified	Vac/Imp
SPECIAL WARRANTY	DEED	08/02/2022	10291	1406	\$600,000	No	Vacant
WARRANTY DEED		02/01/2001	04014	1439	\$240,000	No	Improved
Land			Circus Ser		and the second second		
Method		Frontage	D	epth	Units	Units Price	Land Value
ACREAGE					0.41	\$416.00	\$171
ACREAGE					0.21	\$10.40	\$2
SQUARE FEET					160736	\$4.01	\$644,551
Building Infor	mation						
Permits							
Permit # Description				Agency	Amount	CO Date	Permit Date
09227 SETTING MC	DULAR OFFICE BLDG; PAD	PER PERMIT 2840 ST	ONEWALL	County	\$5,000	12/9/2002	9/1/2002
	SYSTEM; PAD PER PERMIT	2846 STONEWALL PL		County	\$12,852		6/6/2008
10492 DEMOLITION	4			County	\$0		11/1/2001
Extra Features	5	A DECEMBER OF THE OWNER					
Description			Year	Built	Units	Value	New Cost
COMMERCIAL ASPHALT D	R 2 IN		02/01	/2002	63,000	\$0	
Zoning							and the first safe
Zoning	Zoning Desc	ription	Fut	ure Land Use	Futu	ire Land Use Des	cription
M-1	Industrial		IND		Indu	strial	
Utility Informa	tion						
Fire Station Power	Phone(Analog)	Water Provider	Sewer Pro	ovider Garbag	e Pickup Recyc	le Yard Was	te Hauler
35.00 DUKE	AT&T	SEMINOLE COUNTY UTILITIES	SEMINOLE UTILITIES	COUNTY NA	NA	NA	NA
Political Repre	esentation				The Color		
Commissioner	US Congress	State House		State Senat	e	Voting Precinc	t
Dist 2 - Jay Zembower	Dist 7 - Cory Mills	Dist 36 - RACHE	L PLAKON	Dist 10 - Jasor	Brodeur	23	
School Inform	ation						
Elementary School Dis	strict	Middle School Distri	ct		High School Di	strict	
Region 3		Millennium			Seminole		
Constanting	Сору	right 2023 © Semi	nole Cour	nty Property Ap	opraiser		

DIVISION OF CORPORATIONS



Department of State / Division of Corporations / Search Records / Search by Entity Name /

Detail by Entity Name Florida Limited Liability Company KKNC PROPERTIES, LLC **Filing Information** Document Number L19000130863 **FEI/EIN Number** 84-1860884 **Date Filed** 05/22/2019 **Effective Date** 05/22/2019 FL State Status ACTIVE Principal Address 3601 CELERY AVE SANFORD, FL 32771 Mailing Address 3601 CELERY AVE SANFORD, FL 32771 Registered Agent Name & Address PORTER, L. WILLIAM, III 2014 EDGEWATER DR, 119 ORLANDO, FL 32804 Authorized Person(s) Detail Name & Address Title MBMR Bryant, Randy 4971 Shoreline Cir Sanford, FL 32771 Title MBMR Moore, Randall B 5234 Forest Edge Ct. Sanford, FL 32771

Annual Reports

Report Year Fil

Filed Date

2021	02/04/2021
2022	01/11/2022
2023	01/19/2023

Document Images

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01/19/2023 ANNUAL REPORT	View image in PDF format
01/11/2022 ANNUAL REPORT	View image in PDF format
02/04/2021 ANNUAL REPORT	View image in PDF format
01/23/2020 ANNUAL REPORT	View image in PDF format
05/22/2019 Florida Limited Liability	View image in PDF format

Florida Department of State, Division of Corporations

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000130863

Entity Name: KKNC PROPERTIES, LLC

Current Principal Place of Business:

3601 CELERY AVE SANFORD, FL 32771

Current Mailing Address:

3601 CELERY AVE SANFORD, FL 32771

FEI Number: 84-1860884

Name and Address of Current Registered Agent:

PORTER, L. WILLIAM III 2014 EDGEWATER DR, 119 ORLANDO, FL 32804 US Certificate of Status Desired: No

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

Title	MBMR	Title	MBMR
Name	BRYANT, RANDY	Name	MOORE, RANDALL B
Address	4971 SHORELINE CIR	Address	5234 FOREST EDGE CT.
City-State-Zip:	SANFORD FL 32771	City-State-Zip:	SANFORD FL 32771

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATI	URE: R	ANDALL	MOORE
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MGR



Electronic Signature of Signing Authorized Person(s) Detail

Date

FILED Jan 19, 2023 Secretary of State 4777899393CC 10/16/23SEMINOLE COUNTY GOVERNMENT - PROJECT FEES RECEIPT09:55:54PROJ # 23-06000061RECEIPT # 0302748OWNER: KKNC PROPERTIES LLCLOT #: 0000JOB ADDRESS: 2846 STONEWALL PLLOT #: 0000

SITE PLAN	3375.00	3375.00	.00

* DEPOSITS NON-REFUNDABLE *

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** THERE IS A PROCESSING FEE RETAINAGE FOR ALL REFUNDS **

COLLECTED BY: DRHR01	BALANCE DUE:	.00
CHECK NUMBER:	00000001619	
CASH/CHECK AMOUNTS:	3375.00	
COLLECTED FROM:	KKNC PROPERTIES, LLC	
DISTRIBUTION:	1 - COUNTY 2 - CUSTOMER	3 - 4 - FINANCE