



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

PROJ. #: 26-06000009

RECEIVED 03/04/2026  
 PAID 03/06/2026

**SITE PLAN/DREDGE & FILL**

**ALL INFORMATION MUST BE PROVIDED FOR APPLICATION TO BE CONSIDERED COMPLETE**

**APPLICATION TYPES/FEEES**

<input type="checkbox"/> <b>SMALL SITE PLAN</b> (<2,500 SQUARE FEET IMPERVIOUS SURFACE AREA SUBJECT FOR REVIEW)	\$500.00
<input checked="" type="checkbox"/> <b>SITE PLAN</b> (>2,500 SQUARE FEET IMPERVIOUS SURFACE AREA SUBJECT FOR REVIEW)	SEE FORMULA BELOW
<input type="checkbox"/> <b>DREDGE &amp; FILL</b>	\$750.00
<input type="checkbox"/> <b>FILL ONLY</b> (≥100 CUBIC YARDS OF FILL AND/OR IN FLOOD PLAIN OR WETLAND PER SEC. 40.2)	\$500.00

**PROJECT**

PROJECT NAME: **Adult Toy Storage / Collection 674**

PARCEL ID #(S): 29-21-31-300-0140-0000

DESCRIPTION OF PROJECT: **Construct a 33,200 SF Warehouse Facility**

EXISTING USE(S): **Undeveloped** PROPOSED USE(S): **Warehouse**

ZONING: ~~GC~~ & **C3** FUTURE LAND USE: **IND** TOTAL ACREAGE: **2.98** BCC DISTRICT: **1**

WATER PROVIDER: **Seminole County** SEWER PROVIDER: **Seminole County**

ARE ANY TREES BEING REMOVED? YES  NO  (IF YES, ATTACH COMPLETED ARBOR APPLICATION)

IF DREDGE & FILL OR FILL PERMIT, CUBIC YARDS OF FILL PROPOSED: **N/A**

**SITE PLAN FORMULA (CALCULATE IN SQUARE FOOTAGE)**

EXISTING BUILDING AREA: 0 NEW BUILDING AREA: 33,200 TOTAL: 33,200

EXISTING PAVEMENT AREA: 0 NEW PAVEMENT AREA: 56,531 TOTAL: 56,531

TOTAL SQUARE FEET OF **NEW** IMPERVIOUS SURFACE AREA (ISA) SUBJECT FOR REVIEW: 89,731

(TOTAL SQUARE FEET OF **NEW** ISA 56,531 / 1,000 = 56.531) x \$25 + \$2,500 = **FEE DUE: 3,913.28**

(TOTAL SQUARE FEET OF **NEW** ISA SUBJECT FOR REVIEW/1,000)\* x \$25.00 + \$2,500.00 = FEE DUE

**EXAMPLE: 40,578 SQ FT OF NEW ISA SUBJECT FOR REVIEW = 40,578/1,000 = 40.58 X \$25 = \$1,014.50 + \$2,500 = \$3,514.50**

\*ROUNDED TO 2 DECIMAL POINTS \*\*Maximum fee for Site Plans is \$9,000.00\*\*

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

NAME: Ira Bellinkoff	COMPANY: Collection 674 Oviedo, LLC	
ADDRESS: 1950 Lee Road, Suite 1090		
CITY: Winter Park	STATE: FL	ZIP: 32789
PHONE: (407) 375-2036	EMAIL: [REDACTED]	

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

NAME: Bryan Potts	COMPANY: Tannath Design, Inc.	
ADDRESS: 2494 Rose Spring Drive		
CITY: Orlando	STATE: FL	ZIP: 32825
PHONE: 407-982-9878	EMAIL: [REDACTED]	

**OWNER(S)**

(INCLUDE NOTARIZED OWNER'S AUTHORIZATION FORM)

NAME(S): Ira Bellinkoff		
ADDRESS: 1950 Lee Road, Suite 1090		
CITY: Winter Park	STATE: FL	ZIP: 32789
PHONE: (407) 375-2036	EMAIL: [REDACTED]	

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

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.)

<u>TYPE OF CERTIFICATE</u>	<u>CERTIFICATE NUMBER</u>	<u>DATE ISSUED</u>
----------------------------	---------------------------	--------------------

VESTING:

_____	_____
-------	-------

TEST NOTICE:

_____	_____
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Concurrency Application and appropriate fee are 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.

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.



3/3/2026

SIGNATURE OF AUTHORIZED APPLICANT

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): \_\_\_\_\_

Collection 674 Oviedo LLC is the applicant.

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

(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
See attached sheet		

(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

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

Please specify any contingency clause related to the outcome of the consideration of the application.

6. 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.

7. 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.

3/3/26  
Date

[Signature]  
Owner, Agent, Applicant Signature

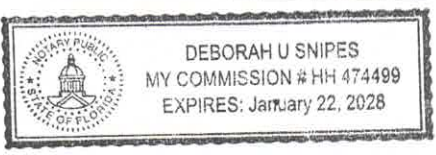
STATE OF FLORIDA  
COUNTY OF Orange

Sworn to (or affirmed) and subscribed before me by Ira Bellinkoff, on this 3rd day of March, 2026.  
Owner, Agent, Applicant Name

Deborah U Snipes  
Signature of Notary Public

Deborah U Snipes  
Print, Type or Stamp Name of Notary Public

Personally Known X OR Produced Identification \_\_\_\_\_  
Type of Identification Produced \_\_\_\_\_



**Collection 674 Oviedo LLC** is the applicant. The partnership information is summarized below:

Name	Partner Type	Address	Contact	Title	% Interest
Bellinkoff Family Revocable Trust	Limited Partner	958 Willow Gardens Ct, Lake Mary FL 32746	Debra Bellinkoff	Trustee	6.3%
Caryn Winter Revocable Trust	Limited Partner	615 Sheridan Blvd, Orlando, FL 32804	Caryn Winter	Trustee	10.4%
Sheldon Rubin	Limited Partner	16155 Via Monteverde, Delray Beach FL 33446	561-704-1959		20.8%
Don Langmo	Limited Partner	611 Dommerich Drive, Maitland FL 32751	407-963-1115		20.8%
RB Marks Construction, Inc.	Limited Partner	125 Excelsior Pkwy, Suite 101, Winter Springs FL 32708	Mark Zaremskas	COO	4.2%
			Russell Cammack	CFO	
High Five Capital LLC	Limited Partner	9218 Cromwell Park Place, Orlando, FL 32827	Robert Nejman	Authorized Member	20.8%
			Craig Coopersmith	Authorized Member	
			Lucas Marquez	Authorized Member	
			Richard Tanner	Authorized Member	
			Charles Ballew	Authorized Member	
Collection 674 LLC	General Partner	1950 Lee Rd, Suite 109, Winter Park FL 32789	Ira Bellinkoff	Manager	8.3%
			Lindsay Bellinkoff	Manager	8.3%

# 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, Ira Bellinkoff, Collection 674 Oviedo, LLC, the owner of record for the following described property (Tax/Parcel ID Number) 29-21-31-300-0140-0000 hereby designates Bryan Potts, P.E. to act as my authorized agent for the filing of the attached application(s) for:

<input checked="" type="checkbox"/> Arbor Permit	<input checked="" type="checkbox"/> Construction Revision	<input checked="" type="checkbox"/> Final Engineering	<input type="checkbox"/> Final Plat
<input type="checkbox"/> Future Land Use	<input type="checkbox"/> Lot Split/Reconfiguration	<input type="checkbox"/> Minor Plat	<input type="checkbox"/> Special Event
<input type="checkbox"/> Preliminary Sub. Plan	<input checked="" type="checkbox"/> Site Plan	<input type="checkbox"/> Special Exception	<input type="checkbox"/> Rezone
<input type="checkbox"/> Vacate	<input checked="" type="checkbox"/> Variance	<input type="checkbox"/> Temporary Use	<input type="checkbox"/> Other (please list):

**OTHER:**

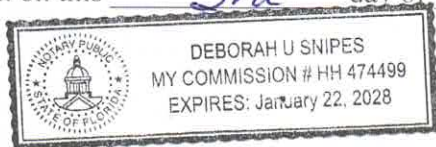
and make binding statements and commitments regarding the request(s). I certify that I have examined the attached application(s) and that all statements and diagrams submitted are true and accurate to the best of my knowledge. Further, I understand that this application, attachments, and fees become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

Date 3/3/26

  
 Property Owner's Signature  
Ira Bellinkoff  
 Property Owner's Printed Name

STATE OF FLORIDA  
 COUNTY OF Orange

**SWORN TO AND SUBSCRIBED** before me, an officer duly authorized in the State of Florida to take acknowledgements, appeared Ira Bellinkoff (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 3rd day of March, 2026



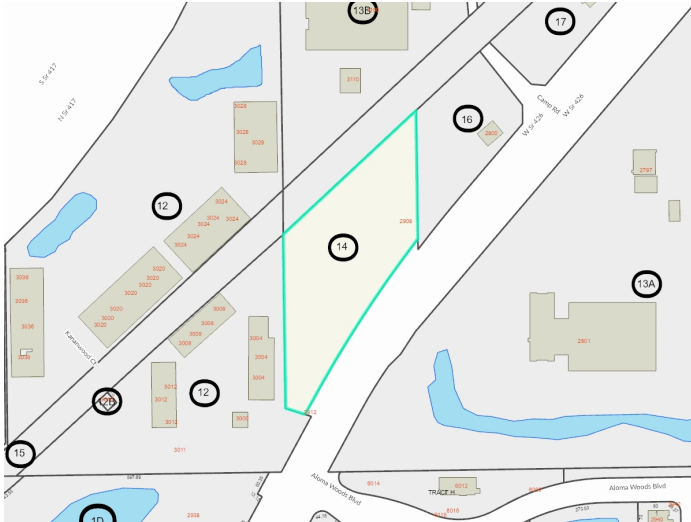
  
 Notary Public

# Property Record Card



Parcel: **29-21-31-300-0140-0000**  
 Property Address:  
 Owners: **COLLECTION 674 OVIEDO LLC**  
 2026 Market Value \$1,402,349 Assessed Value \$814,329 Taxable Value \$814,329  
 2025 Tax Bill \$13,601.65 Tax Savings with Non-Hx Cap \$5,581.08  
 Vac General-Commercial property has a lot size of 3.00 Acres

## Parcel Location



## Site View

## Parcel Information

Parcel	29-21-31-300-0140-0000
Property Address	
Mailing Address	1950 LEE RD STE 109 WINTER PARK, FL 32789-1859
Subdivision	
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)	\$1,402,349	\$1,402,349
Land Value Agriculture	\$0	\$0
Just/Market Value	\$1,402,349	\$1,402,349
Portability Adjustment	\$0	\$0
Save Our Homes Adjustment/Maximum Portability	\$0	\$0
Non-Hx 10% Cap (AMD 1)	\$588,020	\$662,050
P&G Adjustment	\$0	\$0
Assessed Value	\$814,329	\$740,299

## 2025 Certified Tax Summary

Tax Amount w/o Exemptions	\$19,182.73
Tax Bill Amount	\$13,601.65
Tax Savings with Exemptions	\$5,581.08

## Owner(s)

Name - Ownership Type  
 COLLECTION 674 OVIEDO LLC

Note: Does NOT INCLUDE Non Ad Valorem Assessments

## Legal Description

SEC 29 TWP 21S RGE 31E W 1/4 OF SW 1/4 OF  
SW 1/4 S OF SAL RR (LESS BEG SW COR RUN N  
156.5 FT S 71 DEG 20 MIN E 91.3 FT SWLY  
ALONG R/W TO S LI SEC W TO BEG & RD)

## Taxes

Taxing Authority	Assessed	Exempt Amount	Taxable
COUNTY GENERAL FUND	\$814,329	\$0	\$814,329
Schools	\$1,402,349	\$0	\$1,402,349
FIRE	\$814,329	\$0	\$814,329
ROAD DISTRICT	\$814,329	\$0	\$814,329
SJWM(Saint Johns Water Management)	\$814,329	\$0	\$814,329

## Sales

Deed Type	Date	Sale Amount	Book / Page	Sale Type	Qualified?
WARRANTY DEED	1/16/2026	\$2,100,000	10971/0694	Vacant	Yes
QUIT CLAIM DEED	5/4/2020	\$100	09600/0712	Vacant	No
WARRANTY DEED	2/1/2007	\$100	06614/1536	Vacant	No
WARRANTY DEED	9/1/2004	\$97,500	05467/1296	Improved	No
WARRANTY DEED	7/1/2003	\$100	05212/0356	Vacant	No
WARRANTY DEED	2/1/1989	\$100	02044/1912	Improved	No
WARRANTY DEED	7/1/1988	\$100	01977/1456	Improved	No
WARRANTY DEED	12/1/1987	\$100	01966/1550	Improved	No

## Land

Units	Rate	Assessed	Market
145,926 SF	\$9.61/SF	\$1,402,349	\$1,402,349

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
07560	BILLBOARD; PAD PER PERMIT 2908 W SR 426	\$0		8/15/2000
02070	DEMO; PAD PER PERMIT 2904 SR 426	\$0		3/1/1998

Extra Features				
Description	Year Built	Units	Cost	Assessed

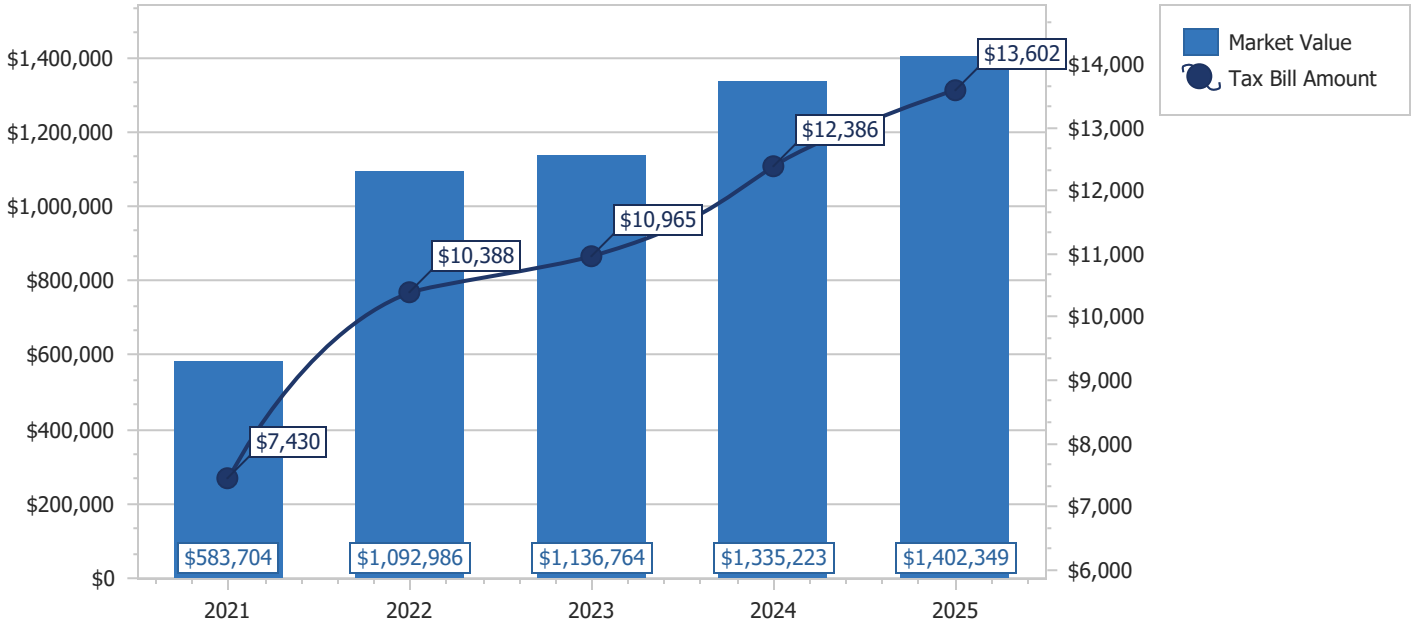
Zoning	
Zoning	C-3
Description	General Commercial & Wholesale
Future Land Use	IND
Description	Industrial

School Districts	
Elementary	Evans
Middle	Tuskawilla
High	Lake Howell

Political Representation	
Commissioner	District 1 - Bob Dallari
US Congress	District 7 - Cory Mills
State House	District 38 - David Smith
State Senate	District 10 - Jason Brodeur
Voting Precinct	Precinct 69

Utilities	
Fire Station #	Station: 29 Zone: 291
Power Company	DUKE
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  
COLLECTION 674 OVIEDO LLC

### Filing Information

<b>Document Number</b>	P25000062073
<b>FEI/EIN Number</b>	41-2815898
<b>Date Filed</b>	11/12/2025
<b>Effective Date</b>	11/11/2025
<b>State</b>	FL
<b>Status</b>	ACTIVE

### Principal Address

1950 LEE ROAD  
SUITE 109  
WINTER PARK, FL 32789

### Mailing Address

1950 LEE ROAD  
SUITE 109  
WINTER PARK, FL 32789

### Registered Agent Name & Address

PRINCIPAL REALTY ADVISORS LLC  
1637 HARMON AVENUE  
WINTER PARK, FL 32789

### Officer/Director Detail

#### **Name & Address**

Title MGR

BELLINKOFF, IRA S  
1637 HARMON AVE  
WINTER PARK, FL 32789 UN

Title MGR

BELLINKOFF, LINDSAY W  
1637 HARMON AVE  
WINTER PARK, FL 32789

### Annual Reports

<b>Report Year</b>	<b>Filed Date</b>
2026	02/16/2026

**Document Images**

[02/16/2026 -- ANNUAL REPORT](#)

[View image in PDF format](#)

[11/12/2025 -- Domestic Profit](#)

[View image in PDF format](#)

**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 [epandesk@seminolecountyfl.gov](mailto:epandesk@seminolecountyfl.gov) or call us at: (407) 665-7371.

**Receipt Details**

**Date:** 3/6/2026 10:31:16 AM  
**Project:** 26-06000009  
**Credit Card Number:** 37\*\*\*\*\*1003  
**Authorization Number:** 266725  
**Transaction Number:** 060326O13-A44017FF-DFF1-4136-9B78-2EED477065C0  
**Total Fees Paid:** 3983.35

**Fees Paid**

<b>Description</b>	<b>Amount</b>
CC CONVENIENCE FEE -- PZ	70.07
SITE PLAN	3913.28
Total Amount	3983.35