

PROJECT

PROJECT NAME:	#26-1000001		
PARCEL ID #(S):	18-21-30-515-0000-0010		
LOCATION:	7100 S. Hwy. 17-92		
EXISTING USE(S):	Office	PROPOSED USE(S):	Automotive -
TOTAL ACREAGE:	.34	BCC DISTRICT:	District 4
WATER PROVIDER:	Seminole County	SEWER PROVIDER:	Seminole County
CURRENT ZONING:	C-2	PROPOSED ZONING:	
CURRENT FUTURE LAND USE:	Automotive	PROPOSED FUTURE LAND USE:	Automotive

APPLICANT

EPLAN PRIVILEGES: VIEW ONLY UPLOAD NONE

NAME:	John A. Baldwin	COMPANY:	Attorney
ADDRESS:	2601 Wells Ave., Suite 161		
CITY:	Fern Park	STATE:	Florida ZIP: 32730
PHONE:	(407) 325-5113	EMAIL:	[REDACTED]

CONSULTANT

EPLAN PRIVILEGES: VIEW ONLY UPLOAD NONE

NAME:	None		
ADDRESS:			
CITY:	STATE:	ZIP:	
PHONE:	EMAIL:		

OWNER(S)

(INCLUDE NOTARIZED OWNER'S AUTHORIZATION FORM)

NAME(S):	John A. Baldwin		
ADDRESS:	2601 Wells Ave., Suite 161		
CITY:	Fern Park	STATE:	Florida ZIP: 32730
PHONE:	(407) 325-5113	EMAIL:	[REDACTED]

Proceeding before Seminole county relating to 7100 S. Hwy 17-92, Fern Park, Florida 32730

From:

To:

Cc:

Date: Tuesday, June 9, 2026 at 03:11 PM EDT

Mr. Hall,

This is in response to our phone conversation of June 9, 2026. During that phone conversation I verbally advised you that I was terminating you as my Agent for the Rezone/Future Land Use Amendment and Special Exception that has been filed with Seminole county relating to the property I own located at 7100 S. Hwy. 17-92, Fern Park, Florida 32730. This email is to reiterate the termination in writing. You are terminated. You are no longer to take any steps to represent me with regard to my property. This is effective with this letter and my prior phone call with you of this date.

Do not take any further steps regarding these applications to Seminole county.

John A. Baldwin, Owner



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

PROJ. #: 26-10000001

RECEIVED 04/15/2026
PAID 04/20/2026

REZONE/FUTURE LAND USE AMENDMENT

ALL INFORMATION MUST BE PROVIDED FOR APPLICATION TO BE CONSIDERED COMPLETE

APPLICATION TYPES/FEES

<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) LSFLUA FEE _____ + 50% OF REZONE FEE _____ = _____ TOTAL LSFLUA AND REZONE FEE	\$400/ACRE* (\$10K MAX. FEE) + 50% OF REZONE
<input checked="" 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) SSFLUA FEE \$3,500 + 50% OF REZONE FEE _____ = _____ TOTAL SSFLUA AND REZONE FEE	\$3,500 + 50% OF 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 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) ^{^^} x \$25 + \$2,500 = FEE DUE	
(TOTAL SF OF <u>NEW</u> ISA _____ /1,000 = _____) ^{^^} 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* [^] (\$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:	CSC Properties Fern Creek		
PARCEL ID #(S):	18-21-30-515-0D00-0010		
LOCATION:	7100 S US Fern Park, FL 32730		
EXISTING USE(S):	office building	PROPOSED USE(S):	auto maintenance
TOTAL ACREAGE:	0.34	BCC DISTRICT:	District 4
WATER PROVIDER:	Seminole County	SEWER PROVIDER:	Seminole County
CURRENT ZONING:	C-2	PROPOSED ZONING:	C-2
CURRENT FUTURE LAND USE:	Mixed Use	PROPOSED FUTURE LAND USE:	Commercial

APPLICANTEPLAN PRIVILEGES: VIEW ONLY UPLOAD NONE

NAME:	Jim Hall	COMPANY:	HDSi
ADDRESS:	1302 Osprey Avenue		
CITY:	Orlando	STATE:	Florida
		ZIP:	32803
PHONE:	407.257.9235	EMAIL:	

CONSULTANTEPLAN PRIVILEGES: VIEW ONLY UPLOAD NONE

NAME:	same as applicant above	COMPANY:	
ADDRESS:			
CITY:		STATE:	
		ZIP:	
PHONE:		EMAIL:	

OWNER(S)

(INCLUDE NOTARIZED OWNER'S AUTHORIZATION FORM)

NAME(S):	BALDWIN, JOHN A		
ADDRESS:	2601 Wells Avenue Fern Park, Florida 32730		
CITY:	Fern Park	STATE:	Florida
		ZIP:	32730
PHONE:	see applicant	EMAIL:	see applicant

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.

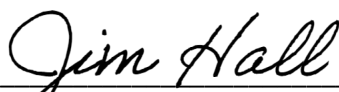
By my signature hereto, I do hereby certify that the information contained in this application is true and correct to the best of my knowledge and understand that deliberate misrepresentation of such information may be grounds for denial or reversal of the application and/or revocation of any approval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



3.23.26

SIGNATURE OF OWNER/AUTHORIZED AGENT

DATE

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

**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
John A. Baldwin	2601 Wells Avenue Fern Pasrk Florida 32730	see applicant

(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

(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:

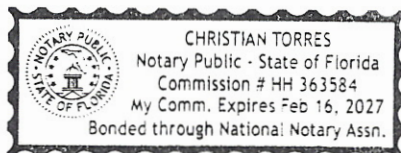
3.24.26
Date

Jim Hall
Owner, Agent, Applicant Signature

**STATE OF FLORIDA
COUNTY OF SEMINOLE**

Sworn to and subscribed before me by means of physical presence or online notarization, this 15 day of April, 2026, by Jim Hall, who is personally known to me, or has produced FL Driver's License as identification.

Christian Torres
Signature of Notary Public



CHRISTIAN TORRES
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, John A. Baldwin, the owner of record for the following described property [Parcel ID Number(s)] 18-21-30-515-0D00-0010 hereby designates Jim Hall 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 type="checkbox"/> Construction Revision	<input type="checkbox"/> Final Engineering
<input type="checkbox"/> Final Plat	<input checked="" type="checkbox"/> Future Land Use Amendment	<input type="checkbox"/> Lot Split/Reconfiguration	<input type="checkbox"/> Minor Plat
<input type="checkbox"/> Preliminary Subdivision Plan	<input type="checkbox"/> Rezone	<input type="checkbox"/> Site Plan	<input type="checkbox"/> Special Event
<input checked="" type="checkbox"/> Special Exception	<input type="checkbox"/> Temporary Use Permit	<input type="checkbox"/> Vacate	<input type="checkbox"/> Variance

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 April 14, 2026


 Property Owner's Signature

John A. Baldwin
 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 John A. Baldwin (property owner),
 by means of physical presence or online notarization; and who is personally known to me or who has produced F1 DL# B435-461-43-462-0 as identification, and who executed the foregoing instrument and sworn an oath on this 14th day of April, 2026.



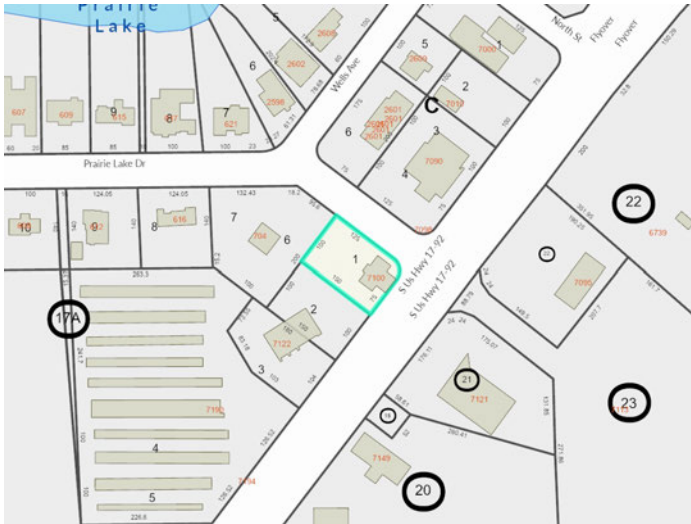

 Notary Public

Property Record Card



Parcel: **18-21-30-515-0D00-0010**
 Property Address: **7100 S US HWY 17-92 FERN PARK, FL 32730**
 Owners: **BALDWIN, JOHN A**
 2026 Market Value \$498,785 Assessed Value \$390,320 Taxable Value \$390,320
 2025 Tax Bill \$5,281.36 Tax Savings with Non-Hx Cap \$686.66
 Two Story Office Bldg property w/1st Building size of 3,132 SF and a lot size of 0.34 Acres

Parcel Location



Site View



Parcel Information

Parcel	18-21-30-515-0D00-0010
Property Address	7100 S US HWY 17-92 FERN PARK, FL 32730
Mailing Address	2601 WELLS AVE STE 161 FERN PARK, FL 32730-2000
Subdivision	PRAIRIE LAKE PARK
Tax District	01:County Tax District
DOR Use Code	1802:Two Story Office Bldg
Exemptions	None
AG Classification	No

Value Summary

	2026 Working Values	2025 Certified Values
Valuation Method	Cost/Market	Cost/Market
Number of Buildings	1	1
Depreciated Building Value	\$214,466	\$173,355
Depreciated Other Features	\$43,039	\$21,656
Land Value (Market)	\$241,280	\$241,280
Land Value Agriculture	\$0	\$0
Just/Market Value	\$498,785	\$436,291
Portability Adjustment	\$0	\$0
Save Our Homes Adjustment/Maximum Portability	\$0	\$0
Non-Hx 10% Cap (AMD 1)	\$108,465	\$81,455
P&G Adjustment	\$0	\$0
Assessed Value	\$390,320	\$354,836

2025 Certified Tax Summary

Tax Amount w/o Exemptions	\$5,968.02
Tax Bill Amount	\$5,281.36
Tax Savings with Exemptions	\$686.66

Owner(s)

Name - Ownership Type
 BALDWIN, JOHN A

Note: Does NOT INCLUDE Non Ad Valorem Assessments

Legal Description

LOT 1 BLK D PRAIRIE LAKE PARK PB 7 PG 64

Taxes

Taxing Authority	Assessed	Exempt Amount	Taxable
COUNTY GENERAL FUND	\$390,320	\$0	\$390,320
Schools	\$498,785	\$0	\$498,785
FIRE	\$390,320	\$0	\$390,320
ROAD DISTRICT	\$390,320	\$0	\$390,320
SJWM(Saint Johns Water Management)	\$390,320	\$0	\$390,320

Sales

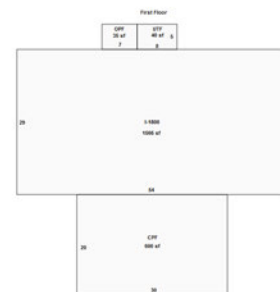
Deed Type	Date	Sale Amount	Book / Page	Sale Type	Qualified?
WARRANTY DEED	8/1/1982	\$10,000	01411/0962	Improved	No
WARRANTY DEED	1/1/1975	\$91,500	01073/0716	Improved	No
CERTIFICATE OF TITLE	1/1/1975	\$83,500	01067/0066	Improved	No

Land

Units	Rate	Assessed	Market
14,848 SF	\$16.25/SF	\$241,280	\$241,280

Building Information

#	1
Use	MASONRY PILASTER .
Year Built*	1946
Bed	
Bath	
Fixtures	0
Base Area (ft ²)	3132
Total Area (ft ²)	
Constuction	WOOD SIDING WITH WOOD OR METAL STUDS
Replacement Cost	\$536,166
Assessed	\$214,466



Building 1

* Year Built = Actual / Effective

Appendages

Description	Area (ft ²)
CARPORIT FINISHED	600

OPEN PORCH FINISHED	35
OPEN PORCH FINISHED	110
UTILITY FINISHED	40

Permits

Permit #	Description	Value	CO Date	Permit Date
02313	7100 S US HWY 17-92 : ELECTRICAL - COMMERCIAL-COMMERCIAL PROPERTY [PRAIRIE LAKE PARK]	\$8,068		2/20/2023
14498	7100 S US HWY 17-92 : REPLACE CARPORT PORTICO; REROOF CARPORT	\$47,282		11/21/2019
04867	REROOF	\$25,700		3/29/2018
03408	RE-CONSTRUCT FRONT CANOPY	\$18,000		3/1/2003
09869	STORAGE SHED	\$6,500		10/1/1993

Extra Features

Description	Year Built	Units	Cost	Assessed
COMMERCIAL ASPHALT DR 2 IN	1979	17830	\$59,731	\$35,839
CONC UTILITY BLDG	1993	240	\$12,000	\$7,200

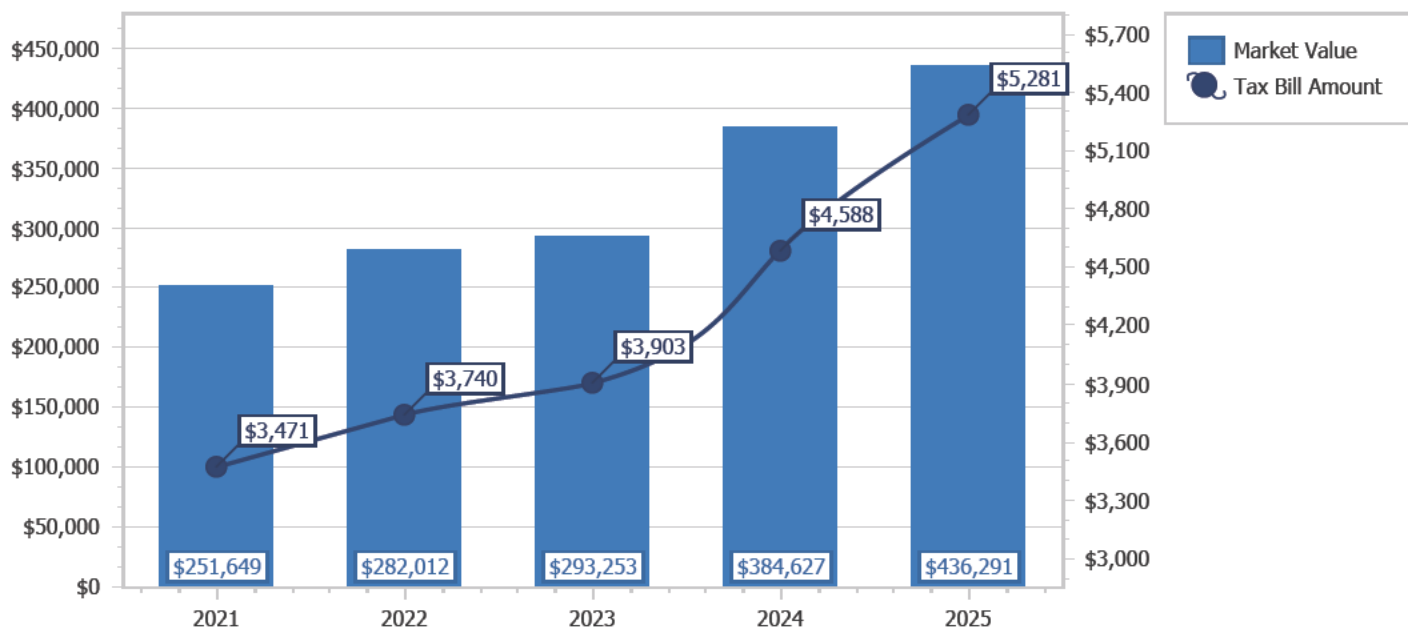
Zoning	
Zoning	C-2
Description	Retail Commercial
Future Land Use	MXD
Description	Mixed Development

School Districts	
Elementary	English Estates
Middle	South Seminole
High	Lyman

Political Representation	
Commissioner	District 4 - Amy Lockhart
US Congress	District 7 - Cory Mills
State House	District 38 - David Smith
State Senate	District 10 - Jason Brodeur
Voting Precinct	Precinct 56

Utilities	
Fire Station #	Station: 22 Zone: 221
Power Company	DUKE
Phone (Analog)	CENTURY LINK
Water	Seminole County Utilities
Sewage	Seminole County Utilities
Garbage Pickup	
Recycle	
Yard Waste	
Hauler #	

Property Value History



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**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 or call us at: (407) 665-7371.

Receipt Details

Date: 4/20/2026 11:29:46 AM
Project: 26-10000001
Credit Card Number: 55*****1143
Authorization Number: 02071Q
Transaction Number: 200426O2D-44E35D20-D766-46B0-92A0-EA075095A52F
Total Fees Paid: 3558.50

Fees Paid

Description	Amount
LUA - SMALL SCALE 14	3500.00
CC CONVENIENCE FEE -- PZ	58.50
Total Amount	3558.50