

**Application For Rezoning To Conventional Zoning District****Planning and Development Department Info****Ordinance #** 2014-0529 **Staff Sign-Off/Date** ME / 07/18/2014**Filing Date** 06/17/2014 **Number of Signs to Post** 3**Hearing Dates:****1st City Council** 09/09/2014 **Planning Comission** 09/04/2014**Land Use & Zoning** 09/16/2014 **2nd City Council** 09/23/2014**Neighborhood Association****Neighborhood Action Plan/Corridor Study****Application Info****Tracking #** 546**Application Status** PAID**Date Started** 01/13/2014**Date Submitted** 06/17/2014**General Information On Applicant**

Last Name	First Name	Middle Name
PHIL	LANZA	R

**Company Name**  
MASTERFIT GOLF TEACHING AND FITTING ACADEMY, INC

**Mailing Address**  
14055 PHILIPS HWY

City	State	Zip Code
JACKSONVILLE	FL	32256

Phone	Fax	Email
9048864800	9048864805	MASTERFITGOLFLTD@YAHOO.COM

**General Information On Owner(s)**☐ Check to fill first Owner with Applicant Info

Last Name	First Name	Middle Name
LANZA	PHIL	R

**Company/Trust Name**  
MASTERFIT GOLF TEACHING AND FITTING ACADEMY, INC

**Mailing Address**  
14055 PHILIPS HWY

City	State	Zip Code
JACKSONVILLE	FL	32256

Phone	Fax	Email
9048864800	9048864805	MASTERFITGOLFLTD@YAHOO.COM

**Property Information****Previous Zoning Application Filed For Site?** ☒**If Yes, State Application No(s)** 2014-198

Map RE#	Council District	Planning District	From Zoning District(s)	To Zoning District
Map				

168124 0000 13 3 AGR CCG-1

Ensure that RE# is a 10 digit number with a space (##### #####)

**Existing Land Use Category**

Agriculture IV

**Land Use Category Proposed?** ☒**If Yes, State Land Use Application #**

5125

**Total Land Area (Nearest 1/100th of an Acre)** 19.13**Justification For Rezoning Application**

FOR POTENTIAL SALE

**Location Of Property****General Location**

MASTERFIT GOLF

House #	Street Name, Type and Direction	Zip Code
	PHILLIPS HY	32256

**Between Streets**

and

**Required Attachments For Formal, Complete application**

The following items must be attached to each application in the order prescribed below. All pages of the application must be on 8½" X 11" paper with provision for page numbering by the staff as prescribed in the application instructions manual. Please check each item below for inclusion of information required.

- Exhibit 1** ☒ A very clear, accurate and legible legal description of the property on the form provided with application package (Exhibit 1). The legal description (which may be either lot and block or metes and bounds) should not be a faint or distorted copy that is difficult to read or duplicate.
- Exhibit A** ☒ Property Ownership Affidavit – Notarized Letter(s).
- Exhibit B** ☒ Agent Authorization - Notarized letter(s) designating the agent.

**Supplemental Information**

Supplemental Information items are submitted separately and not part of the formal application

- ☐ One copy of the Deeds to indicate proof of property ownership.

**Public Hearings And Posting Of Signs**

No application will be accepted until all the requested information has been supplied and the required fee has been paid. Acceptance of a completed application does not guarantee its approval by the City Council. The applicant will be notified of public hearing dates on this application upon the filing of the application. The applicant or authorized agent MUST BE PRESENT at the public hearings. The required SIGN(S) must be POSTED on the property BY THE APPLICANT within 5 days after the filing of an application. The sign(s) may be removed only after final action of the Council and must be removed within 10 days of such action.

The applicant must also pay for the required public notice stating the nature of the proposed request which is required to be published in an approved newspaper AT LEAST 14 DAYS IN ADVANCE OF THE PUBLIC HEARING. (The Daily Record - 10 North Newnan Street, Jacksonville, FL 32202 • (904) 356-2466 • Fax (904) 353-2628) Advertising costs are payable by the applicant directly to the newspaper and the applicant must furnish PROOF OF

PUBLICATION to the Planning and Development Department, 214 North Hogan Street, Ed Ball Building, Suite 300, Jacksonville, Florida, 32202, prior to the public hearing.

**Application Certification**

I, hereby, certify that I am the owner or the authorized agent of the owner(s) of the property described herein, that all answers to the questions in this application and all information contained in the material attached to and made a part of this application, are accurate and true to the best of my knowledge and belief. I also attest by my signature that all required information for this rezoning application is completed and duly attached in the prescribed order. Furthermore, if the package is found to be lacking the above requirements, I understand that the application will be returned for correct information.

☒ Agreed to and submitted

**Filing Fee Information**

- 1) Rezoning Application's General Base Fee: \$2,000.00
- 2) Plus Cost Per Acre or Portion Thereof  
19.13 Acres @ \$10.00 /acre: \$200.00
- 3) Plus Notification Costs Per Addressee  
13 Notifications @ \$7.00 /each: \$91.00
- 4) Total Rezoning Application Cost: \$2,281.00

**NOTE: Advertising Costs To Be Billed to Owner/Agent**

# EXHIBIT A

## Property Ownership Affidavit

100 1514  
Jacksonville  
Planning and Development Department  
West Duval Street, 4<sup>th</sup> Floor / 128 East Forsyth Street, Florida Theatre Building, Suite 700  
Jacksonville, Florida 32202

### Property Ownership Certification

Gentleman:

Phil Lanza hereby certify that I am the  
Owner of the property described in the attached legal description, Exhibit 1 in connection with  
filing application(s) for Re zoning  
Submitted to the Jacksonville Planning and Development Department.



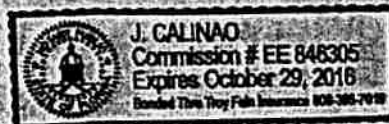
(Owner's Signature)

STATE OF FLORIDA  
COUNTY OF DUVAL

The foregoing affidavit was sworn and subscribed before me this 14<sup>th</sup> day of JANUARY  
(month), 2014 (year) by PHIL LANZA who is personally  
known to me or has produced DRIVERS LICENSE as identification.



(Notary Signature)



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The owner is representing this application. No agent is being used.

THE WEST ½ OF THE NORTHEAST ¼  
OF THE SOUTHWEST ¼ OF SECTION  
28, TOWNSHIP 4 SOUTH, RANGE 28  
EAST, JACKSONVILLE, DUVAL  
COUNTY, FLORIDA. EXCEPTING  
THEREFROM THE RIGHT OF WAY OF  
US HIGHWAY NO 1 AND FLORIDA  
EAST COAST RAILROAD RIGHT OF  
WAY CUTTING OFF THE SOUTHWEST  
CORNER OF SAID TRACT

RETURN TO:

Name: **Masterfit Golf Teaching and Fitting Academy, Inc.** **5 MIN. RETURN**

FOR RECORDER'S OFFICE

Address: 4128 S. 3rd Street  
Jacksonville Beach, FL 32250

PHONE # **280-5540**

THIS INSTRUMENT PREPARED BY:

Name: **Ponte Vedra Title, LLC**

Address: 115 Professional Drive, Ste 101  
Ponte Vedra Beach, Florida 32082

Property Appraisers Parcel Identification (Folio) Number(s):  
**168124-000**

Space above this line for processing data

Book 11546 Page 125

Doc# **2003416643**

Book: **11546**

Pages: **125 - 127**

Filed & Recorded

12/23/2003 01:57:28 PM

JIM FULLER

CLERK CIRCUIT COURT

DUVAL COUNTY

RECORDING \$ 13.00

TRUST FUND \$ 2.00

DEED DOC STAMP \$ 6,300.00

### WARRANTY DEED

(The terms "grantor" and "grantee" herein shall be construed to include all genders and singular or plural as the context indicates.)

**This Warranty Deed, made this**  
**Louella Harriett Bales, a single woman**

**18th day of December, 2003 BETWEEN**

whose post office address is: **947 Baymeadows Road., #207,**  
in the County of Duval, State of **Florida,**

**Jacksonville**  
hereinafter called GRANTOR,

and **Masterfit Golf Teaching and Fitting Academy, Inc., a Florida Corporation**

whose post office address is: **4128 S. 3rd Street,**  
in the County of Duval, State of **Florida,**

**Jacksonville Beach**  
hereinafter called GRANTEE.

WITNESSETH: That said grantor, for and in consideration of the sum of  
ten and no/10 Dollars, and other good and valuable consideration to said grantor in hand paid by said  
grantee, the receipt whereof is hereby acknowledged, by these presents has hereby granted, bargained, sold, remised,  
released, conveyed and confirmed unto said Grantee, and Grantee's heirs, successors and assigns forever, the following  
described land, situate, lying and being in **Duval** County, Florida, to wit:

### See Attached Exhibit "A"

SUBJECT TO covenants, conditions, restrictions, easements of record and taxes for the current year.

TOGETHER WITH all the tenements, hereditaments, and appurtenances thereunto belonging or in anywise  
appertaining, to have and to hold the same in fee simple forever.

The Grantor hereby covenants with said Grantee that, except as otherwise set forth herein, the Grantor is  
lawfully seized of said land in fee simple; that the Grantor has good right and lawful authority to sell and convey said  
land; that the Grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of  
all persons whomsoever; and that said land is free of all encumbrance except as specified herein.

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IN WITNESS WHEREOF, the Grantor has hereunto set grantor's hand and seal these presents the day and year first above written.

Signed, sealed and delivered in  
our presence:

"GRANTOR"

Witness Name:

Richard G. Hathaway  
RICHARD G. HATHAWAY

Witness Name:

A. Clay Reid  
A. CLAY REID

Louella Harriett Bales (SEAL)  
Louella Harriett Bales

STATE OF FLORIDA  
COUNTY OF DUVAL

The foregoing instrument was acknowledged before me this 18th day of December, 2003 by **Louella Harriett Bales, a single woman** who is personally known to me or has produced a valid driver's license as identification and who did not take an oath.

Notary Name: Richard G. Hathaway

My commission # CC 983395

Commission expires Dec. 8, 2004

(Notary Seal)





**Exhibit "A"**

The West 1/2 of the Northeast 1/4 of the Southwest 1/4 of Section 28, Township 4 South, Range 28 East, Jacksonville, Duval County, Florida. Excepting therefrom the right of way of U.S. Highway No. 1 and Florida East Coast Railroad right of way cutting off the Southwest corner of said Tract.

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000081434

**Entity Name:** MASTERFIT GOLF LTD FRANCHISING, INC.

**Current Principal Place of Business:**

14055 PHILIPS HWY  
JACKSONVILLE, FL 32256

**Current Mailing Address:**

14055 PHILIPS HWY  
JACKSONVILLE, FL 32256

**FEI Number:** 59-3409621

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LANZA, PHILLIP R  
161 NORTH COVE DR  
PONTE VEDRA BEACH, FL 32082 US

*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

Date

**Officer/Director Detail :**

Title D  
Name LANZA, PHILLIP R  
Address 161 NORTH COVE DR  
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title D  
Name SCHROEDER, JOHN  
Address 817 BROOKSTONE CT.  
City-State-Zip: JACKSONVILLE FL 32259

*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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** PHILLIP R. LANZA

**PRESIDENT**

**04/15/2013**

Electronic Signature of Signing Officer/Director Detail

Date