

LFIR # 1715

1. Project Title	Lake County Ag	ricultural Educatio	on and Expo Center			
2. Senate Sponsor	Dennis Baxley					
3. Date of Request	11/09/2021					
4. Project/Program De	escription					
numerous events, ir per week, gun show In addition to its agriclassroom space for American Red Cross protective equipmen	ncluding the Lake C is, conventions, fest icultural and event of emergency resports, and others. The late (PPE) and medication in the event of a si	ounty Fair, Lake (tivals, agricultural uses, this facility v nders training led l building will also s al supplies during	ter on the new fairgrou County Farmers Marke exhibitions, and other will be hurricane-proof a by Lake Technical Coll serve as a Point of Distr disease outbreaks, wh s well as providing cold	t which features an state and regional lead include adminisege, the Departmentibution (POD) for notice functioning as a	average of 300 vendors evel events. strative offices with the offices with eccessary personal forward command	
5. State Agency to res State Agency conta 6. Amount of the Non	ceive requested fu		ment of Agriculture and	d Consumer Service	es	
Type of Funding			Amount			
Operations			0			
Fixed Capital Outlay			2,000,000			
Total State Funds Requested			2,000,000			
7. Total Project Cost f	or Figaal Vaar 202	2 2022 (includin	a matahina funda aya	ilabla for this proi	inat)	
-	Oi i iscai i eai 202	z-2023 (ilicidalii)]	
Type of Funding Total State Funds Requested (from question #6)			Amount	Percentage	4	
	equested (Irom que	estion #6)	2,000,000	100%	ī	
Matching Funds			0	0%	1	
Federal State (excluding the amount of this request)			0	0%	7	
Local			0	0%	1	
Other			0	0%	-	
	Total Project Costs for Fiscal Year 2022-2023			100%		
8. Has this project pro		•	2,000,000	10070	1	
Fiscal Year	Amount		Specific	Vetoed		
(уууу-уу)	Recurring	Nonrecurring	Appropriation #			
9. Is future funding lil a. If yes, indicate n b. Describe the so	onrecurring amou	int per year.	No lieu of state funding]	



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10. Has the e	ntity requesting this project received	l any federal assistanc	e related to the COVID-1	19 pandemic?
No				
If yes, ind	icate the amount of funds received a	nd what the funds were	e used for.	

11. Details on how the requested state funds will be expended

Spending Category	Description	Amount	
Administrative Costs:			
Executive Director/Project Head Salary and Benefits		0	
Other Salary and Benefits		0	
Expense/Equipment/Travel/Supplies/ Other		0	
Consultants/Contracted Services/Study		0	
Operational Costs: Other			
Salary and Benefits		0	
Expense/Equipment/Travel/Supplies/ Other		0	
Consultants/Contracted Services/Study		0	
Fixed Capital Construction/Majo	r Renovation:		
Construction/Renovation/Land/ Planning Engineering	The funding will be used for surveys and architectural and engineering services.	2,000,000	
Total State Funds Requested (must equal total from question #6) 2,000,000			

12. Program Performance

a. What specific purpose or goal will be achieved by the funds requested?

Design and planning of the Agricultural Education and Expo Center

b. What activities and services will be provided to meet the intended purpose of these funds?

Once the building has been completed, activities will include the Lake County Fair, Lake County Farmers Market which features an average of 300 vendors per week, gun shows, conventions, festivals, agricultural exhibitions, and other state and regional level events. In addition to its agricultural and event uses, this facility will be hurricane-proof and include administrative offices with classroom space for emergency responders training led by Lake Technical College, the Department of Health, the American Red Cross, and others. The building will also serve as a Point of Distribution (POD) for necessary personal protective equipment (PPE) and medical supplies during disease outbreaks, while functioning as a forward command center for the region in the event of a significant crisis, as well as providing cold weather sheltering.

c. What direct services will be provided to citizens by the appropriation project?

Agricultural education and numerous events, as well as training for emergency responders, emergency sheltering, and distribution site for PPE and medical supplies when needed

d. Who is the target population served by this project? How many individuals are expected to be served?

Lake County residents, as well as outside participants attending regional events. We currently serve over 117,000 local residents per year, and with the new building would have a much larger capacity.

e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?



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We expect to bring in more local and regional events and increased agricultural education opportunities with a larger and more modern building.

f. What are the suggested penalties that the contracting agency may consider in addition to its standard penalties for failing to meet deliverables or performance measures provided for the contract?

The County will return any funding received for the project to the contracting agency.

13. The owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owners of the facility and the entity.

Lake County Board of County Commissioners



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14.	Requestor Contact	Informat	ion				
	a. First Name	Nikki		Last Name	Booth		
	b. Organization	Lake County Board of County Commissioners					
	c. E-mail Address	nbooth@lakecountyfl.gov					
	d. Phone Number	(352)343-9849 Ext .					
15.	15. Recipient Contact Information						
	a. Organization	Lake County Board of County Commissioners					
	b. Municipality and	l County	Lake				
	c. Organization Type						
	□For Profit Entity	ofit Entity					
	□Non Profit 501(c	t 501(c)(3)					
	□Non Profit 501(c	ofit 501(c)(4)					
	☑Local Entity	у					
	□University or Co	□University or College					
	□Other (please specify)						
	d. First Name	Nikki		Last Name	Booth		
	e. E-mail Address		lakecountyfl.gov	, ————— <u>[</u>			
		TIDOOtiTee	iakecountyn.gov				
	f. Phone Number						
16.	6. Lobbyist Contact Information						
	a. Name	Christopl	ner L. Carmody				
	b. Firm Name	GrayRobinson PA					
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	d. Phone Number	(407)843-8880					