

The Florida Senate Local Funding Initiative Request Fiscal Year 2025-2026

LFIR # 2267

1. Pr	oject Title	Waves at Pineap	ple Cove			
2. Se	nate Sponsor	Randy Fine				
3. Da	te of Request	1/31/2025				
4. Pr	oject/Program De	escription				
city	y of Palm Bay. In a pool to the comm	addition to providing	student athlete SCUBA lessons	s a place to compete wi	thin their home city,	ips with residents of the PCCA seeks to open ge. We seek to provide
5. Sta	ate Agency to red	ceive requested fu	n ds Depar	tment of Commerce		
Sta	ate Agency conta	acted? No				
		recurring Request	for Fiscal Year	2025-2026		
Ту	pe of Funding			Amo	ount	
Op	erating				0	
Fix	ced Capital Outlay	1			2,000,000	
To	tal State Funds I	Requested			2,000,000	
	tal Project Cost f	or Fiscal Year 2025	5-2026 (includir	ng matching funds ava	ilable for this proj	ect)
		equested (from que	stion #6)	2,000,000	100%	
	atching Funds	oquootou (mom quo		2,000,000	10070	
	deral			0	0%	
Sta	ate (excluding the	amount of this requ	est)	0	0%	
Lo	cal			0	0%	
Ot	her			0	0%	
То	tal Project Costs	for Fiscal Year 20	25-2026	2,000,000	100%	
		eviously received s most recent instan	_	No		
	Fiscal Year	Amo	unt	Specific	Vetoed	
	(уууу-уу)	Recurring	Nonrecurring	Appropriation #		
	•	ing likely to be required		No]
a.	ıı yos, muloal e II	om counting annou	it per year.			I
h	•	irea of funding the	t can be used :	n liqu of state funding		
b.	•	urce of funding tha	t can be used i	n lieu of state funding]



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Status of Cons	uction					
a. What is the c	urrent phase of t	he project?				
Planning	O Design	Construction	O N/A			
b. Is the project	"shovel ready"	(i.e permitted)?		No		
. What is the e	stimated start da	te of construction?		10/01/2025		
d. What is the e	stimated comple	etion date of construc	ction?	03/31/2026		
e. What funding	stream will be ι	ised for ongoing ope	rations a	nd maintenance	of the project?	
Private funding	, operational reve	nue				
		o receive, directly or ers of the facility and			al outlay funding. Includ	de the
John Moran, F						

12. 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		
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	Planning, construction, and initial year one operation of pool.	2,000,000
Total State Funds Requested (m	ust equal total from question #6)	2,000,000

13. Program Performance

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

Increase the health, wellness, and physical activity of the Palm Bay community through the use of a community pool. Provide a safe environment for the community to come and enjoy splash pads, swimming, and family time under a shade structure. This will allow for competitive swim teams as well as water safety, lifeguard classes and SCUBA lessons.

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

Community swim, competitive swim, summer camps, water safety, lifeguarding, and SCUBA lessons

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



☐ No, but intends to apply

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	Community swim, competitive swim, summer camps, water safety, lifeguarding, and SCUBA lessons
	I. Who is the target population served by this project? How many individuals are expected to be served?
	Palm Bay community at large, approximately 135,000
	e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?
	Increased opportunities for students to compete in swimming competitions, increased opportunities for community for water safety, as measured by attendance and completion of certification courses
	. What are the suggested penalties that the contracting agency may consider in addition to its standard penaltic or failing to meet deliverables or performance measures provided for in the contract?
	In addition to standard contract penalties for missed deliverables or performance measures, a contracting agency might consider actions like: contract termination, delayed payments, liquidated damages, reduced future contract awards or suspension of work.
14. I	s this project related to mitigation, response, or recovery from a natural disaster? No
a.	If Yes, what phase best describes the project?
	Mitigation (reducing or eliminating potential loss of life or property)
	Response (addressing the immediate and short-term effects of a natural disaster)
	Recovery (assisting communities return to normal operations, including rebuilding damaged infastructure)
b	Name of the natural disaster (or Executive Order # for events not under a federal declaration):
15. I	las the entity applied for or received federal assistance for this project?
[Yes, Applied
[Yes, Received
[] No
[No, but intends to apply
a.	If yes, provide the FEMA project worksheet ID#:
b	Provide the total project cost listed on the FEMA project worksheet:
16. I	las the entity applied for or received state assistance for this project (other than this request)?
[Yes, Applied
[Yes, Received
[] No



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a. If yes, specify th Commerce):	e progran	ı and state ager	icy (ex. Loca	ai Governm	ent Emerger
Requester Contac	t Informat	ion			
. First Name	John		Last Name	Moran	
o. Organization	Classical	Education Mana	gement		
. E-mail Address	john@pir	eapplecoveacac	lemy.com		
. Phone Number	(321)890	-6050	Ext.		
Recipient Contact	Information	on			
. Organization	Pineappl	e Cove Classical	Academy		
. Municipality and	d County	Brevard			
Organization Ty	pe				
□For Profit Entity					
☑Non Profit 501(d	c)(3)				
□Non Profit 501(d	c)(4)				
□Local Entity					
□University or Co	llege				
□Other (please sp	pecify)				
d. First Name	Kelly		Last Name	Gunter	
. E-mail Address	gunterk@	pineapplecovec	lassicalacade	emy.com	
. Phone Number	(321)216	-4715	Ext.		
obbyist Contact l	nformatio	n			
ı. Name	None				
o. Firm Name					
c. E-mail Address					
d. Phone Number					

The information provided will be posted to the Florida Senate website for public viewing if sponsored by a Senator.