

**LFIR # 3041** 

1.	1. Project Title Lighthouse Vision Loss Center Mobility Studio								
2.	Senate Sponsor Jim Boyd								
3.	Date of Request	2/11/2025							
4.	4. Project/Program Description								
	Mobility Training Studio - Lighthouse Vision Loss Education Center intends to build a new, state of the art facility to house a Mobility Training Studio to provide Orientation & Mobility (O&M) and White Cane training to blind and visually impaired residents of all ages. The new Mobility Studio will serve as a statewide model as there is no other facility providing comprehensive services in Florida. With a new Mobility Studio built next to our existing Independent Living and Technology Training Center, the campus creates a one stop model for integrated vision rehabilitation services. Lighthouse currently provides O&M training to about 200 clients annually. A new Mobility Studio will allow Lighthouse to provide this vital training to more people in an indoor, comfortable and safe environment. With our current expansion initiatives and the new studio we anticipate growing our program to 800 - 1,000 clients annually.								
5.	State Agency to rec	eive requested fu	inds Depa	rtme	ent of Education				
	State Agency conta	cted? No							
6.	Amount of the Nonr	ecurring Request	for Fiscal Year	202	25-2026				
	Type of Funding				Amo				
	Operating					0			
	Fixed Capital Outlay								
	Total State Funds R	Requested			2,000,000 <b>2,000,000</b>				
7. Total Project Cost for Fiscal Year 2025-2026 (including matching funds available for this project)									
	Type of Funding				Amount	Percentage			
	Total State Funds Requested (from question #6)			2,000,000 50%					
	Matching Funds								
	Federal				0	0%			
	State (excluding the	amount of this requ	uest)		0	0%			
	Local				0	0%			
	Other				2,000,000	50%			
	<b>Total Project Costs</b>	for Fiscal Year 20	025-2026		4,000,000	100%			
8. Has this project previously received state funding?  If yes, provide the most recent instance:									
	Fiscal Year (yyyy-yy)		ount		Specific Appropriation #	Vetoed			
	(3333 331	Recurring	Nonrecurrin	g	, ppi opilation #		-		
9. Is future-year funding likely to be requested?							I		
	a. If yes, indicate no		•						
	•	_							
	b. Describe the sou	rce of funding the	at can be used i	in li	eu of state funding.				



10. Status of Construction

Planning

a. What is the current phase of the project?

O Design

b. Is the project "shovel ready" (i.e permitted)?

c. What is the estimated start date of construction?

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

N/A

No

01/01/2027

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2,000,000

#### Complete questions 10 and 11 for Fixed Capital Outlay Projects

Construction

d. What is the estimated complet	tion date of construction? 12/30/2027						
e. What funding stream will be us	sed for ongoing operations and maintenance of the project?						
40% comes from community phila	Lighthouse is funded 60% by the Department of Education for Blind Services. The remaining 40% comes from community philanthropic support throughout the five counties. This is primarily from private donors, Foundations and civic organizations.						
11. List the owners of the facility to relationship between the owner	o receive, directly or indirectly, any fixed capital outlay funding. In	clude the					
Manasota Lighthouse for the Blin	nd, Inc. dba Lighthouse Vision Loss Center.						
12. Details on how the requested sta							
Spending Category	Description	Amount					
Administrative Costs:							
Executive Director/Project Head Salary and Benefits		(					
Other Salary and Benefits							
Expense/Equipment/Travel/Supplies/ Other		(					
Consultants/Contracted Services/Study		(					
Operational Costs	Operational Costs						
Salary and Benefits							
Expense/Equipment/Travel/Supplies/ Other		(					
Consultants/Contracted Services/Study		(					
Fixed Capital Construction/Major	ixed Capital Construction/Major Renovation:						
Construction/Renovation/Land/ Planning Engineering	The new 6,000 sq ft, state of the art facility to house a Mobility Training Studio to provide Orientation & Mobility (O&M) and White Cane training to blind and visually impaired residents of all ages residing in Manatee, Sarasota, Charlotte, DeSoto and Highlands Counties. The Studio will serve as a statewide model as there is no other facility of its kind providing these comprehensive services in Florida. The balance of needed funds will come from local philanthropic support for construction.	2,000,000					

Total State Funds Requested (must equal total from question #6)

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

13. Program Performance



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Lighthouse Vision Loss Education Center intends to build a new, state of the art facility to house a Mobility Training Studio to provide Orientation & Mobility (O&M) and White Cane training to blind and visually impaired residents of all ages. The new Mobility Studio will serve as a statewide model as there is no other facility providing these comprehensive services in Florida. With a new Mobility Studio built next to our existing Independent Living and Technology Training Center, the campus creates a one stop model for integrated vision rehabilitation services.

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

Orientation and Mobility (O&M) is training specific to blindness and low vision that teaches safe, efficient, and effective travel skills to people of all ages with vision loss. "Orientation" refers to knowing where you are and where you want to go, and "Mobility" refers to the ability to move safely from one place to another, such as crossing streets or using public transportation. Orientation & Mobility Specialists are certified instructors who have received specialized training in teaching people who are blind or visually impaired to travel safely and to navigate their environments independently.

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

Lighthouse is the only source for these special services in our area. Lighthouse serves people of all ages who are blind or have low vision, which is vision loss that cannot be corrected with glasses, medications or surgery. Our services are available to residents of Manatee, Sarasota, Charlotte, DeSoto and Highlands Counties, as well as the state of Florida. We provide Counseling and Family Engagement, Adjustment to Vision Loss - daily skills, Job Training, Youth programing 12-21 to prepare for college or employment, Assistive Technology and this year are launching a children's program.

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

Residents of DeSoto, Charlotte, Hardee, Sarasota and Manatee with Vision Loss, an estimated population of 50,000 potential people with varying degrees of vision loss which impacts high numbers of our elderly.

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

All of our programs and initiatives track clients demographic information, measurable achievements and service usage through the use of the "Sales Force" CRM. This project will benefit thousands of individuals of all ages throughout our region in the coming years. Further, we anticipate this first of its kind Mobility Studio to serve others traveling for training from around the State. It will serve as a demonstration project for other Vision Loss Centers to model in their own local regions.

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 in the contract?

		e will request extensions if necessary and in the unlikely event we were unable to complete the project, return the					
	fur	nds.					
14.	. Is t	his 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. N	ame of the natural disaster (or Executive Order # for events not under a federal declaration):					
15	. Has	s the entity applied for or received federal assistance for this project?					
	□ \	es, Applied					
	□ <b>\</b>	es, Received					



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□ 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. Has the entity app	lied for or received state assistance for this project (other than this request)?								
☐ Yes, Applied									
☐ Yes, Received									
□ No									
☐ No, but intends to	o apply								
a. If yes, specify the	e program and state agency (ex. Local Government Emergency Bridge Loan, Department of								
Commerce):									
17. Requester Contact	t Information								
a. First Name	Alex Last Name Elman-Foley								
b. Organization	Lighthouse Vision Loss Center								
c. E-mail Address	alexef@lighthousevlc.org								
d. Phone Number	(941)231-0072 Ext.								
18. Recipient Contact	Information								
a. Organization	Lighthouse Vision Loss Center								
b. Municipality and	d County Manatee								
c. Organization Ty	pe								
□For Profit Entity									
☑Non Profit 501(c	;)(3)								
□Non Profit 501(c	<del>;</del> )(4)								
□Local Entity									
□University or Co	llege								
□Other (please sp									



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d. First Name	Alex	Last Name	Elman-Foley			
e. E-mail Address	alexef@lighthousevlc.org					
f. Phone Number	(941)231-0072	Ext.				
19. Lobbyist Contact Information						
a. Name	Jeffrey B Sharkey					
b. Firm Name	Capitol Alliance Group					
c. E-mail Address	jeffreyshark@gmail.com					
d. Phone Number	(850)224-1660					

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