

**LFIR # 1174** 

1. Project Title	The Haven - Community Cente	er		
2. Senate Sponsor	Joe Gruters			
e. Condic Oponisor	occ Crutors			
3. Date of Request	11/3/2025			
4. Project/Program D	escription			
designed to promot vocational training,	munity center would provide people independence, social inclusion, a health and wellness services, culturent, supports physical and menta	and skill development. It of ural activities, and a hurrica	fers adaptive recreat ane shelter. The cent	ional progra er fosters
5 State Agency to re	ceive requested funds Age	ncy for Persons with Disal	nilities	
State Agency conta		•		
Type of Funding		Amo	unt	
Operating			0	
Fixed Capital Outla	V		1,500,000	
<b>Total State Funds</b>			1,500,000	
Type of Funding	Requested (from question #6)	Amount 1,500,000	Percentage 25%	
Matching Funds	requested (Ironi question #6)	1,500,000	25%	
Federal		0	0%	
	e amount of this request)	0	0%	
Local	s amount of this requesty	0	0%	
Other		4,500,000	75%	
	s for Fiscal Year 2026-2027	6,000,000	100%	
If yes, provide the	eviously received state funding most recent instance:  Amount	Specific Appropriation #	Vetoed	
(уууу-уу)	Recurring Nonrecurri	ng Appropriation#		
9. Is future-year fund				
a. If yes, indicate nonrecurring amount per year. 1,500,000				
b. Describe the so	urce of funding that can be used	d in lieu of state funding.		
Local grant and pri	ivate funding opportunities would s	sought for funding.		
	<u> </u>			

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



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10.	Status	of Co	nstruction	า

a. What is the current phase of the project?				
Planning	<ul><li>Design</li></ul>	OConstruction N/	A	
b. Is the project "shovel ready" (i.e permitted)?				
c. What is the es	12/01/2026			
d. What is the es	05/01/2025			
a. What funding stream will be used for engoing enerations and maintenance of the project				

e. What funding stream will be used for ongoing operations and maintenance of the project?

Through grants, donations, fundraising events, earned income (fees, rentals), endowment earnings, and government contracts.

11. List 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.

Community Haven for Adults and Children with Disabilities.

### 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/Major	or Renovation:	
Construction/Renovation/Land/ Planning Engineering	Capital funds for new construction will cover site preparation, building construction (foundation, framing, roofing), installation of electrical, plumbing, HVAC, and fire safety systems, interior finishes, equipment and furnishings, permits and professional fees, landscaping, parking, and signage.	1,500,000
Total State Funds Requested (must equal total from question #6) 1,500,000		

### 13. Program Performance

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

A community center on The Haven's 32-acre campus would provide hundreds of people with developmental disabilities a hub that supports the social, educational, recreational, and personal development needs of its participants. Its role is both practical and empowering—designed to help individuals live safe, fuller, more connected, and more independent lives.

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



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Activities and services provided include: Social Inclusion and Connection; Development of Practical and Vocational Skills; Improvement of Health and Well-Being; Empowerment and Advocacy; Family and Caregiver Support; Community Integration; Serve as a Special Needs Hurricane Shelter; A Theater for Creative Expression and Performance.

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

Direct services include life skills training, job readiness & vocational support, social & communication development, recreational & creative programs, educational & cognitive support, mental health & emotional wellness, health & nutrition education, self-advocacy & rights education, family & caregiver resource education, fine arts programs, emergency shelter.

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

Developmentally disabled, Elderly persons, Persons with poor mental health, Persons with poor physical health, Jobless persons, Economically disadvantaged persons, Physically disabled, Preschool students, Grade school students, High school students. Greater than 800 persons are expected to be impacted by services.

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

Benefits include enhancing skill development and independence, improving mental and emotional well-being, providing access to tailored resources and support, and offering relief and assistance to families and caregivers. Additionally, incorporating facilities such as a hurricane shelter ensures a safe, accessible space during emergencies, addressing a critical need for safety and security within this vulnerable population. Offering performing arts programs further enriches the centers impact by promoting creativity, self-expression, and confidence, while also providing enjoyable social and therapeutic activities. Methodology to measure outcomes would include use pre- and post-assessments, surveys, interviews, and attendance tracking to evaluate skill development, well-being, and satisfaction.

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?

for fa	illing to meet deliverables or performance measures provided for in the contract?
Failu	ure to meet deliverables would result in a return of funding to the state.
4. Is this	s project related to mitigation, response, or recovery from a natural disaster? No
a. If Ye	es, what phase best describes the project?
	ditigation (reducing or eliminating potential loss of life or property)
□ F	Response (addressing the immediate and short-term effects of a natural disaster)
□ F	Recovery (assisting communities return to normal operations, including rebuilding damaged infastructure)
b. Nan	ne of the natural disaster (or Executive Order # for events not under a federal declaration):
5. Has t	he entity applied for or received federal assistance for this project?
□ Ye	s, Applied
☐ Ye	s, Received
□ No	
□ No	, but intends to apply
a. If ye	es, provide the FEMA project worksheet ID#:



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b. Provide the total	project c	ost listed on the	e FEMA proj	ect worksheet:	
16. Has the entity app	lied for o	r received state	assistance	for this project (other than th	nis request)?
☐ Yes, Applied					
☐ Yes, Received					
□ No					
☐ No, but intends t	o apply				
		n and state ager	ncy (ex. Loca	al Government Emergency B	Bridge Loan, Department o
17. Requester Contac	t Informat	ion	-		
a. First Name	Brad		Last Name	Jones	
b. Organization	Commun	ity Haven for Ad	ults and Child	dren with Disabilities, Inc.	
c. E-mail Address	bjones@thehavensrq.org				
d. Phone Number	(941)355	-8808	Ext.		
18. Recipient Contact a. Organization		on ity Haven for Ad	ults and Chile	iren	
a. C. gaac	with Disal	oilities, Inc.			
b. Municipality and	d County	Sarasota			
c. 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	Brad		Last Name	Jones	
e. E-mail Address	bjones@	thehavensrq.org			
f. Phone Number	(941)355	-8808	Ext.		



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b. Firm Name	Corcoran Partners		
c. E-mail Address	jeff@corcoranpartners.com		
d. Phone Number	(813)527-0172		

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