

1. Project Title

The Florida Senate Local Funding Initiative Request Fiscal Year 2026-2027

Lake County Neighborhood Lakes Gateway Center

LFIR # 1918

. Senate Sponsor	Keith Truenow						
. Date of Request	12/1/2025						
. Project/Program D	escription						
convergence of Ora for the new facility a	inge, Seminole, and and will feature a full des, and outdoor sp	Lake counties -service library	s. This /, mee	ynamic entry point to funding request is fo ting spaces, bicycle native landscaping th	r the design, engin- concession, nature	eering and permitting center & museum,	
. State Agency to re	ceive requested fu	ı nds Dep	artme	nt of Environmental I	Protection		
State Agency conta	acted? No						
. Amount of the Non	recurring Request	for Fiscal Yea	ar 202	6-2027			
Type of Funding				Amo	unt		
Operating				0			
Fixed Capital Outlay	/			400,000			
Total State Funds	Requested			400,000			
Type of Funding	OI FISCAI TEAI 202	.0-2027 (IIICIUC		Amount	Percentage	æij	
Total State Funds R	Requested (from que	estion #6)		400,000	50%		
Matching Funds		,	•	, , , , , , , , , , , , , , , , , , ,			
Federal				0	0%		
State (excluding the amount of this request)				0 0%			
Local				400,000 50%			
Other				0	0%		
Total Project Costs	s for Fiscal Year 20	026-2027		800,000	100%		
B. Has this project pro If yes, provide the	most recent insta	nce:	?	No			
Fiscal Year (yyyy-yy)	Amount			Specific Appropriation #	Vetoed		
(3333 337	Recurring	Nonrecurri	ng	7 tpp: oprialion //			
o. Is future-year fund a. If yes, indicate n b. Describe the so	nonrecurring amou	int per year.		No eu of state funding.			



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Planning	Design	○ Construction ○ N/A		
o. Is the projec	ct "shovel ready"	(i.e permitted)?	No	
. What is the	estimated start da	ate of construction?	02/01/2027	
d. What is the	estimated comple	etion date of construction?	02/01/2028	
e. What fundin	g stream will be u	used for ongoing operations	and maintenance of the project?	
Discretionary	Infrastructure Sales	s Tax		
List the owne		o receive, directly or indirecers of the facility and the enti	ly, any fixed capital outlay funding. y.	Include the

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	Design, Engineering and permitting.	400,000		
Total State Funds Requested (n	nust equal total from question #6)	400,000		

13. Program Performance

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

The design, engineering and permitting for the new facility.

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

The Neighborhood Lakes Gateway Center will serve as a dynamic entry point to the regional trail system at the convergence of Orange, Seminole, and Lake counties.

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



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The new facility will feature a full-service library, meeting spaces, bicycle concession, nature center & museum, restrooms, staff offices, and outdoor spaces surrounded by native landscaping that blends the facility into the conservation area that surrounds it.

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

Residents, local community and visitors will be served by this facility and is expected to serve in excess of 800 people.

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

This project will improve the quality of life for participants and improve trail conne4ctivity at the convergence of Orange, Seminole and Lake counties. Designed as a joint initiative between Lake County parks and the County Library System, the new facility will feature a full-service library, community gather spaces, meeting rooms, concessions, and a bicycle repair shop. This will be measured through monitoring scheduled events, library usage, retail sales, in addition to data collected from counters.

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?

Lake County Office of Procurement Services in coordination with the Facilities Management contracting officer will include the appropriate penalties (financial penalties including bond forfeiture) to ensure quality.

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. Ha	s 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. P	rovide the total project cost listed on the FEMA project worksheet:					
 16. Ha	s the entity applied for or received state assistance for this project (other than this request)?					
.	Yes, Applied					
_ ·	Yes. Received					



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□ No					
☐ No, but intends to	o apply				
a. If yes, specify the Commerce):	e program and state ager	ncy (ex. Loca	I Government Emergend	ey Bridge Loan, Department of	
17. Requester Contact	t Information				
a. First Name	Bobby	Last Name	Bonilla		
b. Organization	Lake County Board of Co	unty Commis	sioners		
c. E-mail Address	roberto.bonillo@lakecoun	tyfl.gov			
d. Phone Number	(352)742-3863	Ext.			
18. Recipient Contact					
a. Organization	Lake County Board of Co	unty Commis	sioners		
b. Municipality and	d County Lake				
c. Organization Ty	ре				
□For Profit Entity					
□Non Profit 501(d	c)(3)				
□Non Profit 501(c	c)(4)				
☑Local Entity					
□University or Co	llege				
□Other (please sp	pecify)				
d. First Name	Misty	Last Name	Spahn		
e. E-mail Address	misty.spahn@lakecountyf	fl.gov			
f. Phone Number	(352)343-9888	Ext.			
19. Lobbyist Contact I	nformation				
a. Name	Christopher L. Carmody				
b. Firm Name	GrayRobinson PA				
c. E-mail Address	chris.carmody@gray-robinson.com				
d. Phone Number	(407)843-8880				



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