

LFIR # 1929

i. Project Title	wega workplace	30uiii - Agricui	ture rech wet Lab inno	valion hub		
2. Senate Sponsor	Keith Truenow					
3. Date of Request	11/20/2025					
4. Project/Program D	escription					
,	•					
coalition of Public-P Lake-Tech, Florida Agri-tech, plant scie biotech and mart-ag	Private Partnerships High Tech Corridor ence, food science, s g. Goal is to simulate I advance innovative	with regional bu and others. Foci soil, water syster e real-world agrid	first integrated AG-TEC siness and educational us on applied research, ms, growers, food producultural environments to nomic diversification, join	partners including IF training, R&D to incl icers and the study in improve life science	AS, Lake County ED, ude but not limited to nto Agri-aerospace commercialization	
5. State Agency to re	ceive requested fu	nds Depa	rtment of Agriculture an	d Consumer Service	S	
State Agency conta	acted? No					
6. Amount of the Non	recurring Request	for Fiscal Year	2026-2027			
Type of Funding				ount		
Operating			AIII	0		
Fixed Capital Outlag	· ×			2,000,000		
Total State Funds				2,000,000		
	•					
7. Total Project Cost	for Fiscal Year 202	6-2027 (includi	ng matching funds av	ailable for this proje	ect)	
Type of Funding			Amount	Percentage		
Total State Funds F	Requested (from que	estion #6)	2,000,000	30%		
Matching Funds						
Federal			0	0%		
State (excluding the amount of this request)			0	0%		
Local	Local			0%		
Othor			4,700,000	70%		
Other			.,. 55,555			
	s for Fiscal Year 20	026-2027	6,700,000			
Total Project Cost		state funding?				
Total Project Cost 8. Has this project pr If yes, provide the Fiscal Year	reviously received	state funding?	6,700,000 No Specific			
Total Project Cost 8. Has this project pr If yes, provide the	reviously received s most recent instar	state funding?	No Specific	100%		
Total Project Cost 8. Has this project pr If yes, provide the Fiscal Year	reviously received a most recent instar	state funding? nce:	No Specific	100%		
Total Project Cost 8. Has this project pr If yes, provide the Fiscal Year	reviously received a most recent instar Amo Recurring	state funding? nce: ount Nonrecurrin	No Specific	100%		
Total Project Cost 8. Has this project pr If yes, provide the Fiscal Year (уууу-уу) 9. Is future-year fund	reviously received a most recent instar Amo Recurring	state funding? nce: bunt Nonrecurring uested?	Specific Appropriation #	100%		
8. Has this project proof of the left yes, provide the Fiscal Year (yyyy-yy) 9. Is future-year fund a. If yes, indicate respectively.	reviously received a most recent instar Amorem Recurring ling likely to be requented a mounted to the received a mounted to the recurring amounted to the received a mounted to the received to the received a mounted to the received a most received	state funding? nce: Nonrecurring uested? nt per year.	Specific Appropriation #	Vetoed		



1

10. Status of Construction

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

LFIR # 1929

Complete questions 10 and 11 for Fixed Capital Outlay Projects

а	a. What is the current phase of the project?						
	Planning	O Design	Construction	O N/A			
b	b. Is the project "shovel ready" (i.e permitted)?						
c. What is the estimated start date of construction?				06/01/2026			
C	d. What is the estimated completion date of construction? 06/01/2028						
e	. What funding s	tream will be use	d for ongoing ope	rations a	nd maintenance of	the project?	
	The state operations and sponsorships and partnerships will be combined for operations and maintenance.						
1.			eceive, directly or of the facility and			outlay funding. Include the	
	Mega 2801 LLC	Mega 2801 LLC is the property owner, Mega Workplace South, LLC is operator tenant.					

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	Design, Engineering and Construction	2,000,000		
Total State Funds Requested (must equal total from question #6) 2,000,000				

13. Program Performance

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

To advance agriculture, life science, innovation and collaboration throughout the academic, economic development and workforce impacts in the Lake county and surrounding regions for food sciences, R&D to improve food safety, water, and plant sciences throughout the region.

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



LFIR # 1929

Collaborative and shared space, wet labs, regulatory oversight, wet labs and sharing opportunities with IFAS, UF/Lake Tech, High Tech Corridor, Bio Florida, producers and growers throughout the state of Florida to support

commercialization. c. What direct services will be provided to citizens by the appropriation project? Direct and indirect job growth, opportunities for startups, and advancements in R & D in each of these sciences, and new training and workforce trainings. d. Who is the target population served by this project? How many individuals are expected to be served? Agricultural sector, life sciences, manufacturing, growers, producers, researchers, logistics, lake county residents. e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured? Create 90-115 Direct jobs, start up and tenant companies, approximately 37 and indirect jobs, 63. Each direct job supports additional 1.8-2.2 jobs in local economy. 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? Suggested penalties are remediation of any failure and discontinuation of state funding when necessary. 14. Is 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. Has 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:

☐ Yes, Applied



LFIR # 1929

☐ Yes, Received						
□ No						
☐ No, but intends to	o apply					
a. If yes, specify the	e progran	n and state age	ncy (ex. Loca	al Government Em	ergency Bridge	Loan, Department of
Commerce):						· •
17. Requester Contact	Informat	ion				
a. First Name	Pam		Last Name	Rivas		
b. Organization	Mega Wo	orkplace South, I	LC			
c. E-mail Address	pam@me	egafl.com				
d. Phone Number	(407)462	-9821	Ext.			
18. Recipient Contact	Informati	on				
a. Organization	Mega Wo	orkplace South, I	LC			
b. Municipality and	d County	Lake				
c. Organization Ty	ре					
☑For Profit Entity						
□Non Profit 501(c	:)(3)					
□Non Profit 501(c	:)(4)					
□Local Entity						
□University or Co	llege					
□Other (please sp	pecify)					
	• •		1			
d. First Name	Cate		Last Name	Manley		
e. E-mail Address	-		7			
f. Phone Number	(816)591	-8066	Ext.			
19. Lobbyist Contact I		n				
a. Name	None					
b. Firm Name						
c. E-mail Address						
d Phone Number						



LFIR # 1929

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