

LFIR # 2012

1. Project Title	Cape Coral YMCA Community Health & Youth Development Center						
2. Senate Sponsor	Jonathan Martin						
3. Date of Request	12/8/2025	12/8/2025					
4. Project/Program D	escription						
healthy living, and o	nstruct a new YMCA at Lake Meade community programs. The facility wi senior wellness, swim safety, fitned idents.	II provide childcare, after-	school and summer	learning, chronic			
5. State Agency to re	ceive requested funds Depa	artment of Education					
State Agency contact 6. Amount of the Non	acted? No recurring Request for Fiscal Yea	r 2026-2027					
Type of Funding		Amo	unt				
Operating			0				
Fixed Capital Outla	У		6,000,000				
Total State Funds	Requested		6,000,000				
7. Total Project Cost	for Fiscal Year 2026-2027 (includ	ing matching funds ava Amount	ilable for this proje Percentage	ct)			
Total State Funds F	Requested (from question #6)	6,000,000	15%				
Matching Funds							
Federal		0	0%				
, ,	e amount of this request)	0	0%				
Local		18,000,000	45%				
Other		16,000,000	40%				
Total Project Cost	s for Fiscal Year 2026-2027	40,000,000	100%				
	eviously received state funding? most recent instance:	No					
Fiscal Year	Amount	Specific Appropriation #	Vetoed				
(уууу-уу)	Recurring Nonrecurring	ng Appropriation #					
9. Is future-year fund	ing likely to be requested?	No					
a. If yes, indicate r	nonrecurring amount per year.						
b. Describe the so	urce of funding that can be used	in lieu of state funding.					



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10.	Status	of Con	struction

a. What is the cu	irrent phase of t	he project?		
Planning	O Design	Construction (N/A	
b. Is the project	"shovel ready" ((i.e permitted)?	No	
c. What is the es	timated start da	01/01/2027		
d. What is the es	timated comple	on? 08/31/2028		
e What funding	stream will be u	sed for ongoing opera	tions and maintenance	of the project

stream will be used for ongoing operations and maintenance of the project?

Ongoing operations and maintenance will be funded through YMCA membership fees, program revenue, local government support, private donations, and grants. These funding sources will ensure the long-term sustainability of the facility and its community programs.

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.

YMCA o	f Southwest	: Florida.	Inc.

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 Renovation:				
Construction/Renovation/Land/ Planning Engineering	Funds will be allocated for the design, planning, and construction of a YMCA facility in Cape Coral, FL. This includes site preparation, architectural design, engineering services, permitting, and construction of recreational facilities, community spaces, and related infrastructure.	6,000,000		
Total State Funds Requested (must equal total from question #6)				

13. Program Performance

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

The funds will support construction of a new YMCA at Lake Meade Park to expand access to youth, family, and community programs. The project will improve health, education, and quality of life by providing childcare, youth development, wellness programs, and community services, meeting the growing needs of Cape Coral residents and strengthening families.



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

The YMCA will provide childcare and early learning programs, after-school and summer youth development, chronic disease prevention and wellness classes, senior fitness and active-aging programs, swim lessons and water safety, family support services, and community outreach and education. These activities promote health, learning, and family stability for Cape Coral residents.

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

The project will provide direct services including affordable childcare, early learning, after-school and summer programs, chronic disease prevention classes, senior fitness and wellness activities, swim lessons and water safety, youth sports, family support services, and community education programs. These services will improve health, learning, and overall quality of life for Cape Coral residents.

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

The project will serve children, teens, families, working parents, seniors, and residents seeking health, wellness, and community programs. It will also support low- to moderate-income households needing affordable childcare and family services. The new YMCA is expected to serve several thousand Cape Coral residents annually through its programs and facilities.

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

The project will improve health, education, and family stability by expanding access to childcare, youth development, wellness, and community programs. Outcomes will be measured through program participation data, pre- and post-assessments for health and fitness, academic progress indicators, attendance records, and participant feedback to track measurable improvements for Cape Coral residents.

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?

Return of percentage of state funds until deliverables or performance measures are met.

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):

| Yes, Applied
| Yes, Received

a. If yes, provide the FEMA project worksheet ID#:

☐ No

□ No, but intends to apply



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h. Dunnisha tha tatal			- FFMA		
b. Provide the total	project c	ost listed on the	e FEMA proj	ect worksneet:	
16. Has the entity app	lied for or	received state	assistance f	for this project (other t	han this request)?
☐ Yes, Applied					
☐ Yes, Received					
□ No					
☐ No, but intends to	o apply				
a. If yes, specify the Commerce):	e program	n and state ager	ncy (ex. Loca	al Government Emerge	ncy Bridge Loan, Department o
17. Requester Contact	t Informati	ion	٦		
a. First Name	Gene		Last Name	Jones	
b. Organization		Southwest Flori	da, Inc.		
c. E-mail Address		ymcaswfl.org	7		
d. Phone Number	(941)375	-9101	Ext.		
I8. Recipient Contact	Information	on			
a. Organization		Southwest Flori	da, Inc.		
b. Municipality and	d County	Lee			
c. Organization Ty	ре				
□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	John		Last Name	Campbell	
e. E-mail Address	jcampbel	I@ymcaswfl.org			
f. Phone Number	(941)375	-9103	Ext.		



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a. Name	Edward (Eddie) L. Metzger III	
b. Firm Name	Coastline Strategies LLC	
c. E-mail Address	eddieplg@yahoo.com	
d. Phone Number	(850)545-8291	

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