



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2025-2026

LFIR # 1359

1. Project Title
2. Senate Sponsor
3. Date of Request

**4. Project/Program Description**

We believe that one of the best ways to help communities prosper is through entrepreneurship. Creating a business incubator in West Ocala will help residents create their own jobs and wealth generators. Utilizing the expertise of the Ocala Metro CEP team, the incubator will bring extensive entrepreneurial programming and support to this diverse, under-resourced community. It will also provide spaces for businesses to grow and thrive in a visible location known to the local community.

The funds will purchase up to 12 cottage-style shops, built off-site and transported, to create a vendor village. The site will need to be prepped with necessary electrical, fiber Internet, lighting, security cameras and hardscaping. Each shop will house a business in the incubator program. The City of Ocala will provide a central office for incubator services and a restroom.

5. State Agency to receive requested funds
- State Agency contacted?  Yes

**6. Amount of the Nonrecurring Request for Fiscal Year 2025-2026**

Type of Funding	Amount
Operating	0
Fixed Capital Outlay	600,000
<b>Total State Funds Requested</b>	<b>600,000</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)	600,000	86%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	100,000	14%
<b>Total Project Costs for Fiscal Year 2025-2026</b>	<b>700,000</b>	<b>100%</b>

8. Has this project previously received state funding?  No
- If yes, provide the most recent instance:

Fiscal Year (YYYY-YY)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		

9. Is future-year funding likely to be requested?  No
- a. If yes, indicate nonrecurring amount per year.
- b. Describe the source of funding that can be used in lieu of state funding.
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## Complete questions 10 and 11 for Fixed Capital Outlay Projects

### 10. Status of Construction

a. What is the current phase of the project?

- Planning    
  Design    
  Construction    
  N/A

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

No

c. What is the estimated start date of construction?

01/30/2026

d. What is the estimated completion date of construction?

06/30/2026

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

Funding received for the project from philanthropic donations to the Ocala Metro Chamber and Economic Partnership Foundation.

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.

Ocala Metro Chamber & Economic Partnership Foundation would be responsible for the construction and ongoing operations of the project.

### 12. Details on how the requested state funds will be expended

Spending Category	Description	Amount
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and Benefits		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Operational Costs</b>		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering	Planning, permitting and construction of business incubator village.	600,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>600,000</b>

### 13. Program Performance

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

The funds will purchase up to 12 cottage-style shops, built off-site and transported, to create a vendor village. The site will need to be prepped with necessary electrical, fiber Internet, lighting, security cameras and hardscaping. Each shop will house a business in the incubator program. The City of Ocala will provide a central office for incubator services and a restroom.



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

The incubator will provide office space with Internet and utilities included, one-on-one technical assistance, financial literacy programming, entrepreneurial mindset training, Kauffman FastTrac Program (10-week ideation to launch training), networking and mentorship opportunities. The site will be a vendor village of cottage-style shops, lending itself well to retail vendors & community events.

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

The incubator will provide office space with Internet and utilities included, one-on-one technical assistance, financial literacy programming, entrepreneurial mindset training, Kauffman FastTrac Program (10-week ideation to launch training), networking and mentorship opportunities. The site will be a vendor village of cottage-style shops, lending itself well to retail vendors & community events.

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

Jobless persons, economically disadvantaged persons, high school students, university/college students, currently or formerly incarcerated persons, Other - Supporting individuals interested in starting or growing a business.

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

Expect to serve 200-400 individuals. Registrations and survey mechanism to measure.

**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?**

Standard penalties per Florida Law should apply for failure to meet agreed upon program deliverables or performance measures. Return of funds to appropriate state agency.

**14. Is this project related to mitigation, response, or recovery from a natural disaster?**

**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 infrastructure)

**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:**



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**16. Has the entity applied for or received state assistance for this project (other than this request)?**

- Yes, Applied
- Yes, Received
- No
- No, but intends to apply

**a. If yes, specify the program and state agency (ex. Local Government Emergency Bridge Loan, Department of Commerce):**

**17. Requester Contact Information**

**a. First Name**  **Last Name**

**b. Organization**

**c. E-mail Address**

**d. Phone Number**  **Ext.**

**18. Recipient Contact Information**

**a. Organization**

**b. Municipality and County**

**c. Organization Type**

- For Profit Entity
- Non Profit 501(c)(3)
- Non Profit 501(c)(4)
- Local Entity
- University or College
- Other (please specify)

**d. First Name**  **Last Name**

**e. E-mail Address**

**f. Phone Number**  **Ext.**

**19. Lobbyist Contact Information**

**a. Name**



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b. Firm Name

c. E-mail Address

d. Phone Number

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