



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2025-2026

LFIR # 1481

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

This program's mission is to cultivate growth, advancement, and economic standing with a purchase of property and rebuilding the community. In the establishment of this resilience hub, our primary objective is to create a conducive space wherein individuals can effortlessly avail themselves of essential educational resources and other resources that will significantly contribute to their overall growth and prosperity. It will also help revitalize a property that currently blighted the entrance of the City of Kissimmee. The Resilience Hub will provide an assortment of academic programs specifically designed to cater to the needs and interests of multiple sectors in our community such as children and families, youth, seniors and small business owners.

5. State Agency to receive requested funds

State Agency contacted?

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

Type of Funding	Amount
Operating	0
Fixed Capital Outlay	500,000
<b>Total State Funds Requested</b>	<b>500,000</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)	500,000	80%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	125,000	20%
<b>Total Project Costs for Fiscal Year 2025-2026</b>	<b>625,000</b>	<b>100%</b>

8. Has this project previously received state funding?

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?

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)?

Yes

c. What is the estimated start date of construction?

01/01/2026

d. What is the estimated completion date of construction?

01/01/2027

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

For rebuilding and beautification of the property and neighborhood.

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.

City of Kissimmee and or Osceola County.

### 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	The building will be renovated to converted into a resilient hub for the community.	500,000
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>500,000</b>

### 13. Program Performance

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

Create a resilient and beautification building inside the City of Kissimmee. The property will be renovated.

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

The Resilience Hub will provide an assortment of academic programs specifically designed to cater to the needs and interests of multiple sectors in our community such as children and families, youth, seniors, natural disaster hub and small business owners.



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

Career trainings, Internship opportunities, governmental remote offices, education programs, and community outreach programs.

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

Hispanic Community of Kissimmee, Osceola, and Orange county.

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

The benefit of the project is to increase job hires, education, and knowledge about governmental programs. The outcome will be measure with data that will reflect job opening, new business owners, and event attendance. The project will provide guidance on how to reduce utility bills, increase values of properties, and beautification of neighborhood.

**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?**

Funding will need to be refunded.

**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):**

Depends on what Hurricanes arrives to the area

**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:**

**16. Has 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 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**

**b. Firm Name**

**c. E-mail Address**

**d. Phone Number**



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