



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 2870

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

COA's Shelter & Shade project will raise the elevation of the building's entrance to improve accessibility, add a fixed canopy to provide shelter in inclement weather, and create a secure covered outdoor area to promote active living programming for participants in adult day care.

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	572,000
Total State Funds Requested	572,000

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)	572,000	30%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	1,316,245	70%
Total Project Costs for Fiscal Year 2025-2026	1,888,245	100%

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.

Complete questions 10 and 11 for Fixed Capital Outlay Projects

10. Status of Construction



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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?

03/24/2025

d. What is the estimated completion date of construction?

09/22/2025

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

COA will utilize general revenues for ongoing operations and maintenance of the project.

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.

St. Johns County owns the property and leases it to St. Johns County Council on Aging in a long term lease.

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	North porch covered area, patio, screen room enclosure, wood handrails, seating fixtures and all new doorways included to improve access to north patio.	572,000
Total State Funds Requested (must equal total from question #6)		572,000

13. Program Performance

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

The Shelter & Shade project will raise the elevation of the building's entrance to improve accessibility; add a fixed canopy to provide shelter in inclement weather; and create a secure covered outdoor area to promote active living program for participants in adult day care.

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

SJCCOA's headquarters at 180 Marine St., St. Augustine serves to create community, sustain nutrition, foster independence, provide mobility, strengthen memory, support dementia, and care for caregivers for adults aged 60 or better (and adults 18+ with specific cognitive diagnoses).



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

This project will allow a vehicle to navigate the rise in elevation from the street so seniors do not have to navigate the elevation. It will add a large awning to provide protection in inclement weather so seniors can enter/exit their transportation in more comfort and safety. It will provide people with dementia a secure covered and screened outdoor area to improve mental and physical health.

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

The Shelter & Shade project will serve elderly persons. The screened, covered patio portion of the project will serve elderly persons with dementia or other brain related diagnosis that required Adult Day Care. Approximately 200 individuals will use these capital improvements daily.

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

Improving accessibility to the main headquarters will promote socialization. The screened patio will expand outdoor programming year-round to Adult Day Care participants. These will improve physical and mental health. COA will continue to conduct annual assessments for senior center participants and quarterly surveys for case managed and Adult Day Care clients.

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?

COA will repay the funds should we fail to complete the deliverables.

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:

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



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- 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
- 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.