

The Florida Senate Local Funding Initiative Request Fiscal Year 2025-2026

LFIR # 3360

1. Project Title	Cecil Airport Taxi	way E Extension			
2. Senate Sponsor	Clay Yarborough				
3. Date of Request	3/12/2025				
4. Project/Program De	escription				
to the airport's easts competing for one o	side. With limited spa f several aircraft ass	ice remaining, thi embly projects, w	and construction of the s extension will open up hich requires large site etter position itself to at	o land for aviation d s with infrastructure	e. The funding will
5. State Agency to rec	ceive requested fur	nds Departr	nent of Transportation	·	
State Agency conta	•				
6. Amount of the Non	recurring Request f	or Fiscal Year 2	025-2026		
Type of Funding			Amo	unt	
Operating				0	
Fixed Capital Outlay	1			3,000,000	
Total State Funds I	Requested			3,000,000	
7. Total Project Cost f	or Fiscal Year 2025	-2026 (including	matching funds avai	lable for this proje	ect)
Type of Funding			Amount	Percentage	
	equested (from ques	stion #6)	3,000,000	15%	
Matching Funds					
Federal			0	0%	
, ,	amount of this reque	est)	0	0%	
Local			17,000,000	85%	
Other			0	0%	
Total Project Costs	:	00000			
Total i Toject Costs	s for Fiscal Year 202	25-2026	20,000,000	100%	
8. Has this project pro		tate funding?	20,000,000	100%	
8. Has this project pro If yes, provide the	eviously received s	tate funding?	No Specific	100%	
8. Has this project pro If yes, provide the	eviously received s most recent instand	tate funding?	No		
8. Has this project pro If yes, provide the	eviously received s most recent instand	tate funding? ce: unt	No Specific		
8. Has this project pro If yes, provide the	eviously received s most recent instance Amo Recurring	tate funding? ce: unt Nonrecurring	No Specific		
8. Has this project pro If yes, provide the Fiscal Year (уууу-уу)	eviously received s most recent instance Amore Recurring	tate funding? ce: unt Nonrecurring uested?	Specific Appropriation #		
8. Has this project prolif yes, provide the Fiscal Year (yyyy-yy) 9. Is future-year funding. If yes, indicate n	eviously received s most recent instance Amore Recurring ing likely to be requenced to the content of the cont	tate funding? ce: unt Nonrecurring uested? nt per year.	Specific Appropriation #		
8. Has this project prolif yes, provide the Fiscal Year (yyyy-yy) 9. Is future-year funding. If yes, indicate n	eviously received s most recent instance Amore Recurring ing likely to be requenced to the content of the cont	tate funding? ce: unt Nonrecurring uested? nt per year.	Specific Appropriation # Yes 10,000,000		



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10. Status of Construction			
a. What is the current phase of	the project?		
a. What is the current phase of			
Planning O Design	O Construction N/A		
b. Is the project "shovel ready"	(i.e permitted)?	No	
c. What is the estimated start da	ate of construction?	1/1/26	
d. What is the estimated comple	etion date of construction?	1/1/27	
e. What funding stream will be u	sed for ongoing operations	and maintenance of the project?	
Federal and local funds.			
 11. List the owners of the facility trelationship between the owners of the facility trelationship between the owners of the facility trelationship between the owners of the facility trelationship to the facility trelationship trelationship between the owners of the facility trelationship trelationship between the owners of the facility trelationship between the facility	ers of the facility and the enti	tly, any fixed capital outlay funding. Incluty.	ide the
Spending Category		Description	Amount
Administrative Costs:			
Executive Director/Project Head Salary and Benefits			C
Other Salary and Benefits			
Expense/Equipment/Travel/Supplies/Other			C
Consultants/Contracted Services/Study			C
Operational Costs			
Salary and Benefits			
Expense/Equipment/Travel/Supplies/Other			C
Consultants/Contracted Services/Study			C
Fixed Capital Construction/Major	or Renovation:		
Construction/Renovation/Land/ Planning Engineering		and development plan, data collection, nd specifications, bidding phase services on services.	3,000,000
Total State Funds Requested (m	nust equal total from questio	n #6)	3,000,000
13. Program Performance			
a. What specific purpose or go	al will be achieved by the fu	nds requested?	
Expanded use of the runway.			
b. What activities and services	will be provided to meet the	intended purpose of these funds?	
Design and Construction.			
c. What direct services will be	provided to citizens by the a	ppropriation project?	
Jobs will be created - Boeing ha	as already built two new facilitie	es and Boeing and others will continue grow	rth.



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d. Who is the target population served by this project? How many individuals are expected to be served?	
The Aerospace industry.	
e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome wibe measured?	i II
Job Growth. Job numbers will be documented.	_
f. What are the suggested penalties that the contracting agency may consider in addition to its standard penaltion for failing to meet deliverables or performance measures provided for in the contract?	tie
Withhold of future funding.	_
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:	
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):	



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. Requester Contact		ion	1			
a. First Name	Ashley		Last Name	Shorter		
b. Organization	Jacksonville Aviation Authority					
c. E-mail Address	ashley.shorter@flyjacksonville.com					
d. Phone Number	(904)741	-2004	Ext.	904		
. Recipient Contact						
a. Organization		rille Aviation Auth	nority		1	
b. Municipality and	d County	Duval				
c. Organization Ty	pe					
□For Profit Entity						
□Non Profit 501(c	;)(3)					
□Non Profit 501(d	;)(4)					
□Local Entity						
□University or Co	llege					
☑Other (please sp	pecify) aut	hority				
d. First Name	Ashley		Last Name	Shorter		
e. E-mail Address	ashley.sh	norter@flyjacksor	nville.com			
f. Phone Number	(904)741	-2004	Ext.	904		
. Lobbyist Contact I	nformatio	n				
a. Name	Joe Mob	ley				
b. Firm Name	The Fiorentino Group					
c. E-mail Address	joe@thef	iorentinogroup.c	om			
d. Phone Number	(904)358	-2757				

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