

Application Form

Organization Information

Compiled Committee Comments

Below is a compilation of committee member comments from your Letter of Intent. This feedback may be positive, neutral, or negative. It is provided in aim to be transparent and offer guidance on where you may be able to strengthen your full proposal.

- Excellent opportunity for this organization to continue needed services to disproportionately impacted groups and those who reside in QCT areas. Increase in service needs and increase in cost is experienced. Circumstances warrant the need rather than the validated economic loss.

An informational webinar about this proposal is available [here](#).

The rubric that will be used to score this proposal can be downloaded [here](#).

If you would like to complete this application first in Microsoft Word, you may download a Word version [here](#).

Brief Project Descriptor

Please briefly describe this organization's request.

Purchase and renovations of HQ/main service location

Organization Name

Florida Dream Center

Project Name*

Please choose a short name to identify this project within the grant portal:

Florida Dream Center Community Resources

EIN*

46-0663472

Incorporation Year*

What year did your organization incorporate? This will be the year listed on your determination letter from the Internal Revenue Service.

2012

Organizational Mission Statement

What is your organization's mission statement?

This has been copied from your Letter of Intent and cannot be changed.

Florida Dream Center is committed to inspiring self-sufficiency, by sharing faith through resources, and restoring hope in communities by providing human services that bridge the gap between vulnerable residents and social-economic equality.

Unique Entity ID (SAM)*

Please provide your organization's Unique Entity ID number. This is a specific number used by the federal government to identify your organization. **This is different from a DUNS number, which the federal government no longer uses.**

If you do not have a Unique Entity ID number, you can create an account on SAM.gov and apply for one here (it is free and may take 3-4 days for approval): <https://sam.gov/content/home>

This field is optional as to not stop a qualifying organization from applying. HOWEVER, a Unique Entity ID number will be required if your organization is approved for a grant. Your organization should apply for a number now if it does not yet have one.

Character Limit: 12

CJ4MS9DKYFB5

Annual Operating Budget Size

Please provide the amount of your annual operating budget (expenditures only) for your entire organization.

This has been copied from your Letter of Intent.

\$913,509.00

Amount Requested*

The maximum grant amount is \$5 million.

This has been copied from your Letter of Intent and should not be changed. If your project cost has changed since submitting your Letter of Intent, please contact Rose Cervantes at rcervantes@pinellascf.org.

\$1,825,998.00

Does the total project cost exceed the amount your organization is requesting?

Please note: Answering "Yes" will cause additional questions to load later in this application.

Examples

ABC Childcare is seeking funding for a new playground. ABC Childcare is asking PCF to fund \$150,000 for certain equipment, and will seek other funding and donations for the remaining \$20,000 of the playground. ABC Childcare would select "Yes" for this question.

Better Tomorrow, a mental health provider, is looking to expand their counseling center by two rooms to meet increased service demand arising from the pandemic. Better Tomorrow has secured \$25,000 in private contributions, and wants to request the remaining \$125,000 in this grant. Better Tomorrow would select "Yes" for this question.

DBE Food Pantry is seeking funding a new HVAC unit for their pantry, and is requesting \$40,000 from PCF to cover the entire cost. DBE Food Pantry would select "No" for this question.

Yes

Request Specifics

Organization Programming Background*

Please describe the programming your organization offers to the community and the length of time it has been doing so. That is, what does your organization **do** and **how long** has it been doing it?

This has been copied from your LOI.

Since the first Adopt-a-Block Saturday, on 11/01/2014, the Florida Dream Center (FLDC) has developed programs that serve at-risk and low-income communities. Our programs are designed to work collectively with internal and external partners and resources.

The Adopt-a-Block program promotes community revitalization in Lealman and East Tarpon Springs. Every Saturday morning we help residents age in place and remain in their homes through code violation relief and hefty fines. The program utilizes volunteers to deliver nutritional food boxes to our elderly and homebound residents. The Mobile Food Bank also provides immediate needs such as food, clothing, and hygiene by delivering bulk items to low-income/elderly mobile home parks/apartments, family neighborhood centers, and smaller churches within low-income areas throughout the rest of Pinellas County.

A strategic review of the resources and needs in the community in late 2015 provided evidence that the residents needed additional support. The Work Readiness Training program was introduced to the community in 2017 and the Resident Advocacy program was introduced in 2018. Complementing our emergent services, the Resident Advocacy and Work Readiness programs were developed to provide self-sufficiency resources, strategies, and planning. These programs collaborate to enhance an individual's stability regardless of their current circumstances. In May of 2022, the Work Readiness Training Program became accredited through the National Center for Construction Education and Research. Through this accreditation, FLDC can certify individuals in the construction and warehouse trades; post-secondary education options are not readily available to our clientele elsewhere.

Resident Advocates and Work Readiness Advocates work with clients on real-life problem-solving skills. They help manage social service benefits/applications or help clients secure training or employment.

Community Need*

Please describe the community need that exists for your programming. If you are able to cite quantitative, local data, that will strengthen your proposal.

This has been copied from your LOI.

Our programs serve all of Pinellas County, having expanded our typical borders in response to the global pandemic and housing crisis over the last few years.

According to Data USA 2020 report, Pinellas poverty rate is 11.6%. The demographic we serve is congruent with the most at-risk population who are characterized by having two or more barriers to employment obtainment/retention: homelessness, unreliable or no transportation, fragiley housed, enrolled in government programs (SSI, Medicaid, SNAP benefits), and/or an extensive criminal history.

FLDC programs have successfully and consistently aided at-risk communities, within Pinellas County, where individuals are classified as chronically homeless to low-income/elderly/disabled, multigenerational-housed families. These communities share common characteristics: 22.7% of families with children under 5 live below the poverty level. 27% of households spend more than 30% of their income on housing. 16.7% of adults reported that their household had been authorized to receive WIC or Food Stamp benefits according to our case management software OASIS Insight.

Specific to Lealman, where our office is located, the United States Census shows the local poverty rate at 19.95%. Lealman is still categorized as one of the five pockets of poverty first confirmed in 2013 through the Pinellas County Lealman Economic Impact Report. Later in 2018 the Foundation for a Healthy St Pete also concluded that Lealman was still considered a pocket of poverty with significant health equity issues in the areas of housing, employment, transportation, nutritional food access, etc.

Additionally, Pinellas County plans to build low-income apartments within the vicinity of FLDC. Most of the residents going into these homes will need case management services and nutritional food access. FLDC and the Lealman and Asian Neighborhood Family Center are the only organizations that offer full case management wrap-around services.

Negative Economic Impact*

The following question is the keystone of a strong application in this process. If your organization cannot demonstrate a negative economic impact from the pandemic, your application will not qualify for committee review. If you are uncertain about what constitutes negative economic impact or how to demonstrate it, please contact PCF staff for technical assistance.

The more quantifiable your negative economic impact is, whether it be fiscal losses/pressures or increased service demand, the stronger your answer will be. The more specific your evidence, the better.

Describe your organization's negative economic impact arising from the COVID-19 pandemic. Examples could include:

- A reduction in revenue from 2019 to 2020

- Inflationary pressures
- Increases in demand for services that have not been compensated for through new revenue
- The use of reserves for unbudgeted expenses since the onset of the pandemic, and such use of reserves has prevented the purchase of capital assets
- A need for capital assets to offset community need for which your organization does not have the resources to purchase due to the negative economic harm from the pandemic
- A need for additional capital assets to adapt operations to accommodate health and safety guidelines by the CDC
- Growth in restricted pandemic-related revenue that does not permit capital asset acquisition

Note: If you are applying for both a Small Purchase and Large Project, you may reuse the answer for this question PROVIDED THAT the negative economic impact is relevant to both requests. This has been copied from your LOI.

Federal funding opportunities available to social service organizations ceased before the ramifications of the pandemic and related housing crisis could diminish. FLDC received \$603,979 through various local and CARES Act funding in 2020 and only \$382,731 through grants in 2021. This is a grant funding reduction of over 63% within a year.

Many of our previous donors not only canceled monthly donations but became clients. This reduced the amount of private donations received by over \$30,000.00. Larger corporations that were previously supporting our programs were reaching out for help to support their workers and families. For instance, Crown automotive group reached out in late 2020 requesting food, hygiene, and clothing support for spouses that were laid off. FLDC offered immediate needs and provided case management hours for social service benefits that were available to the newly struggling families.

Throughout the reduction of funding, there was a spike in client needs between March 2020 and July 2022. Over 1.4 million pounds of food was distributed in 2020 and over 1.5 million in 2021 with 1,063,834 already distributed to date in 2022. Our Resident Advocacy and Work Readiness Programs served 2,949 in 2020 with a jump to 5,368 in 2021 and already 5,293 to date in 2022. FLDC expects to supersede previous years' level of need that has increased over time.

Lastly, the inflation rate increased dramatically since the COVID pandemic began. According to tradingeconomics.com, the inflation rate has steadily been climbing, reaching 9.1% in June of 2022. Tampa Bay currently has the highest inflation rate in the entire country, per bloomberg.com. In February of 2022, real estate inflation caused FLDC leadership to move our Mobile Food Bank from its original rental property to our administrative office in Lealman. Before the move, FLDC was paying a lease of \$1,350. After new ownership, rent was increased to \$4925/month in 2022, \$5180/month in 2023, and \$5490/month in 2024 for a three-year lease. This is an initial increase of 365% and a long-term increase of 407% over the three years.

Moving the Mobile Food Bank, all its equipment, shelf-stable foods, and fresh foods and supplies within days cost over \$25,000.00. Service was never interrupted but costs were acquired through various electrical, HVAC, and plumbing modification completed to suit the needs of the Mobile Food Bank.

FLDC has established its offices and social services within the Lealman area for almost a decade (November 2014). Lealman's demographic struggles with reliable transportation, nutritional food, and socioeconomic and equitable opportunities. Moving the organization away from this underserved area would leave many without aid.

Negative Economic Impact - Uploads

You have the option to upload supporting documentation regarding negative economic impact. However, please limit your upload to no more than five pages. Word, Excel, JPG and PDF files are accepted.

Canceled events.pdf

Pandemic Relief Funding*

Please describe all government pandemic relief funding your organization has received since the onset of the pandemic. This includes but is not limited to the Pinellas CARES Nonprofit Partnership Fund, other ARPA funding, PPP (Paycheck Protection Program), and Community Block Development Grants specifically targeting COVID-19 relief.

Explain why or how this pandemic-relief funding has not alleviated the negative economic impact you have described above. Potential reasons include expiration dates on certain funding, inflationary pressures, restrictions prohibiting capital expenditures, or the funding simply not being enough to remedy the harm you've indicated above. **The more concrete your numbers, the better.**

If you have not received government relief funding for your organization since the onset of the pandemic, write "No pandemic relief funding received" below.

In 2020 FLDC received a Pinellas County CDBG grant (\$50,102) Pinellas County CDBG-COVID Funding (\$38,560.25), United Way COVID-19 funding (\$25,000), Community Foundation of Tampa Bay COVID Needs List (this was not an RFP but a non-profit needs list to help with the pandemic efforts, \$40,000), Paycheck Protection Funding (\$45,000), Tampa Bay Resiliency Fund through Pinellas Community Foundation (\$25,000), Tampa Bay Rays COVID Funding (\$5,000), WAWA COVID Emergency Fund (\$500), EFSP CARES Fund (\$9,945), Pinellas CARES Partnership FUND (\$63,229.24). Total pandemic funding in 2020 equaled \$302,336.49

In 2021 FLDC received SBA COVID Economic Injury Disaster Loan (\$10,000).

In 2022 FLDC received City of Largo COVID Funding (\$25,000) and the COVID Employee Retention Credit (which has been approved but the amount is TBD).

As seen in the summary of pandemic funding above, most funding concentrated on the first year of the COVID pandemic in 2020. The ramifications of the pandemic and recent inflation caused by the pandemic are lasting longer than just one year. While individuals, families, and businesses began to recuperate in 2022, our community was then faced with the struggles of inflation and real estate increases. Clients' rent tripled in costs, new home buyers were faced with house costs that were three times what they were six months prior.

The obstacles faced by Pinellas County residents lasted over years while funding opportunities expired and funding timeline restrictions diminished long-term impact through the pandemic ramifications.

Proposal Description*

The American Rescue Plan Act requires a request that is reasonable and proportional to the level of economic impact your organization experienced. This means the request you describe below should not be greater than the economic harm your organization has suffered.

Please describe your project proposal and address the following:

- What project will be undertaken with these funds?
- What is the estimated lifespan of the project/property improvement?
- How does it address the negative economic harm you described in the previous question?

This has been copied from your LOI. While you are able to update this field, YOU SHOULD NOT CHANGE THE NATURE OF YOUR REQUEST. That is, this field should only be updated for clarity, not changing what you are requested funding for.

FLDC has been on a lease at 4017 56th Ave N., St. Petersburg since 2017. In 2019, Pinellas County renewed the lease and offered the property at \$1.00 per year to help us continue our work in the community. The county then decided to parcel out various areas within Lealman for affordable housing in 2020. Our CEO, Steve Cleveland, and our Board of Directors sent an offer to the county at that time to purchase the building. This offer was denied, but extended support from county staff was provided to help find a suitable building. FLDC staff, along with the help of County staff, viewed over 15 buildings in 2020 and 2021; prior to the recent real estate inflation. However, the properties were too small, too far out of our direct service areas to be effective, or out of our cost range. FLDC also reached out to other partners for assistance in building acquisition, including Pinellas Community Foundation CEO, Duggan Cooley, and a local pantry that was on the verge of closing its doors. No successful outcomes were reached. Once the real estate inflation began (52.4% of properties overvalued since this time last year) our chances to find a suitable and affordable building disappeared. FLDC talks with the county continued and they considered offering us the building this year (2022) if the funding is secured.

In February of 2022, the units we were leasing for our Mobile Food Bank were purchased by a private developer. The developer chose to increase rent by 365% forcing our Mobile Food Bank to move into our administration offices. All programs currently share the same location. FLDC is requesting funding for the purchase of the current building and outside renovations to meet the requirements of the low-income housing residents moving in around our facility. We have been given 12 months from the purchase of the building to complete all exterior/structural renovations and feel this is an adequate time frame.

By purchasing the building our organization can remain in the heart of surrounding low-income homes where the need is evident. In addition, our purchase and the approved renovations will reduce the high rent costs that we would otherwise have to pay if we leave this building. Current electrical bills will decrease as renovations are completed on the building, reducing overhead.

Number Served

How many people will directly benefit from this capital purchase annually?

This has been copied from your LOI. It cannot be changed.

10340

Unduplicated vs. Duplicated

Is the number indicated above duplicated or unduplicated?

Duplicated: A client is counted each time they access services

Unduplicated: A client is counted once, regardless of the number of times they access services

Example: ABC Food Bank operates two mobile food pantries, one in Clearwater and one in St. Petersburg. Taylor, a Pinellas County resident, goes to both food pantries. If ABC Food Bank counts Taylor's visit TWICE, it is **duplicated**. If ABC Food Bank counts Taylor's visit ONCE, it is **unduplicated**.

This has been copied from your LOI and cannot be changed.

Unduplicated

Other (Explanation Required)

If you selected "Other" in the previous question, please explain how your organization determined the number of clients that will benefit from the proposed capital project.

This has been copied from your LOI and cannot be changed.

Unduplicated - 10,340

Duplicated - 50,920

Other (Explanation Required Below) - This does not include those clients served within their own neighborhoods through neighborhood clean-up, debris removal, etc.

Rent vs. Own

Does your organization rent or own the property for which you are proposing modifications?

Rent

Guiding Principles - Client Impact*

The American Rescue Plan Act, which provides the funding for this grant program, aims to ensure an equitable recovery from the COVID-19 pandemic. The term "equity" is defined as:

The consistent and systematic fair, just, and impartial treatment of all individuals, including individuals who belong to underserved communities that have been denied such treatment, such as Black, Latino, and Indigenous and Native American persons, Asian Americans and Pacific Islanders and other persons of color; members of religious minorities; lesbian, gay, bisexual, transgender, and queer (LGBTQ+) persons; persons with disabilities; persons who live in rural areas; and persons otherwise adversely affected by persistent poverty or inequality.

One of the guiding principles of this fund is that it will apply a lens of equity to ensure the needs of specified priority populations are met.

Will this project benefit the community members defined above that have experienced disproportionate negative impacts from the COVID-19 pandemic? If so, how?

This has been copied from your LOI.

FLDC has committed to serving neighbors in need within unincorporated and low-income pockets of poverty. It has been determined that there are 5 pockets of poverty within Pinellas County; Greenwood, South St. Petersburg, Highpoint, East Tarpon Springs, and Lealman. FLDC currently serves in East Tarpon Springs and Lealman. In addition, our Mobile Food Bank mobilizes and distributes thousands of pounds each month to elderly/low-income mobile home parks, veteran villages, ex-offender-based communities, small churches,

and neighborhood centers that also reside within low-income and at-risk communities. The focus demographic within this grant is represented within the communities our programs serve. These areas and communities are all considered vulnerable and underserved.

The purchase of the building, and the resulting ability to remain in Lealman, will benefit those demographics adversely affected by poverty and inequality. FLDC programs can continue to serve underserved populations, providing emergency and long-term aid toward equitable and sufficient living. Should funding not be provided, FLDC will be forced to relocate leaving many without essential services.

It should also be noted, to expand upon earlier inflation facts, that the regional housing affect Tampa Bay is experiencing is different in comparison to the rest of the nation. Individuals and families are flocking to Tampa Bay and Pinellas County from northeastern states daily. According to the Tampa Bay Economic Development Council, nearly 150 people move to Tampa Bay and Pinellas County on a daily basis. This influx only irritated the housing market further by creating an unrealistic demand for housing. Local social service organizations are serving Pinellas County residents as well as out-of-state residents that find themselves homeless and struggling to find housing away from their home states.

Organizational Sustainability*

How does this purchase contribute to the long-term sustainability of your organization and the work it does? That is, what impact will this project have on your organization and/or its clients over the long-term?

Examples include increased service capacity, reduced cost of delivering services over time, higher-quality or more equitable service delivery, and increased lifespan/quality of property.

Quantifiable numbers will strengthen your answer.

Acquiring funding for the purchase and exterior renovation of the FLDC property will increase the lifespan of the property and the services FLDC provides from this office. Consistency shapes the long-term impact of the clients we serve. By acquiring the property and renovating it to respect our neighbors while helping those less fortunate, the building and our organization become a stronger partner within Pinellas County. (Part of the renovations include a privacy fence that will allow for an in-take area that eliminates clients loitering outside the FLDC front door before business hours).

In addition, this funding will allow FLDC to remain in the same location; allowing services to be provided to the new residents that will be placed into the low-income apartments that will be built next to our facility. As previously explained, FLDC is one of two wrap-around/case management service providers in Lealman. Our services are needed in Lealman. We expect our services to increase from approximately 10,000 clients to 17,000 clients as Lealman expands its affordable housing availability.

Permits*

Please describe any permits necessary for the successful completion of this proposed project. Be sure to include any permits already obtained or in progress, and/or what the timeline is to acquire permits.

FLDC anticipates approximately four permits will be needed for this project. They are listed below:

Remodeling permit - this permit includes block work, stucco, and windows. This permit will be obtained during the Project Start period.

Roofing permit - for replacement of the flat and shingles roof. This permit will be obtained prior to Phase 3.

Air Conditioning permit - for the ductwork. This permit will be obtained prior to Phase 4.

Demo permit - anticipated for the tour demolition. This permit will be obtained during the Project Start period.

There is no need for a permit in the fence as we are in unincorporated Lealman, it is not required.

Plan Set*

Do you have a plan set for this project?

A plan set refers to the "batch" of plans, drawings, prints, files, etc., that you receive from an architect that explains what needs to be built, how, and where. **Not all qualifying projects in this process require a plan set.**

If you answer Yes, you will be required to upload the Plan Set later in the application.

No

Plan Set Upload*

If you answered "Yes" above, please upload the Plan Set here. If you have trouble with file size limitations, please reach out to Rose Cervantes at rcervantes@pinellascf.org. If you have any narrative to accompany the plan set, you may write it below.

PDF files are permitted.

Building Renderings.pdf

A before and after rendering of the exterior of the building was provided during the LOI process of this grant and has been uploaded here again.

The architect for this project has agreed to provide drawings and plans at an in-kind/donation cost. Due to the number of hours needed on this task, Sarah Lyons has agreed to donate the time once the funding has been approved. There is a letter of commitment from her attached to this grant package.

Timeline*

Given a spending deadline of December 31, 2026, give a detailed **and realistic** timeline as to how this large capital project will be executed and completed. If there are phases to this project, indicate so in the narrative below. If you specified that permits were needed for this project above, ensure you include the acquisition time in the timeline.

Please include the following:

1. **How the timeline was developed**
2. **Timeline of planning and execution. Please include start and end dates by month and year. For example, April 2023 - June 2023.**

Example

Better Tomorrow is proposing the expansion of their counseling center. This requires a 2-month planning phase, one month to obtain all necessary permits, and four months to build. Better Tomorrow would list each phase, a brief description of what takes place in each phase, and an estimated start and completion date for each phase.

Steve Cleveland has over 30 years of experience in commercial construction management. As a General Contractor, he took into account the information that is needed, the number of subcontractors, the in-kind hours of work, and the tasks that can be completed simultaneously.

ACTIVITY	START	END	NOTES
1. Project Start	04/01/2023	06/01/2023	- Construction drawings, permitting, termite tenting, building purchase & acquisition
2. Phase 2	06/01/2023	07/16/2023	- Demo Tower, door opening, block work
3. Phase 3	07/20/2023	08/22/2023	- Stucco, exterior windows and start the new roof
4. Phase 4	08/23/2023	10/02/2023	- Finish new roof, ac system, and front doors
5. Phase 5	10/05/2023	10/17/2023	- Paint building
6. Phase 6	10/17/2023	11/06/2023	- New garage doors
7. Phase 7	11/16/2023	12/20/2023	- New fencing
8. Phase 8	01/02/2024	01/30/2024	- Pavers and Landscaping
9. Phase 9	02/01/2024	03/02/2024	- Overlay and striping parking lot
10. Phase 10	03/12/2024	03/20/2024	- Signage and benches and cameras
11. Project End	03/22/2024	04/01/2024	- Punch out and final inspection

Team Leadership*

Please describe the following:

1. The team and leaders that will be overseeing this proposed project.
2. Their relationship to your organization
3. Their role in this project
4. Whether or not they have overseen similar projects

Steve Cleveland, President & CEO, is also a licensed General Contractor and will be the Construction Manager for this project. He will ensure proper coordination and supervision for those working within this project. He will also implement proper safety procedures and will manage the sub-contractors and supplies for this project. Steve has over 30 years of construction and project management experience.

Gary Webb, Director of Mobilization & Workforce Development, will be the Assistant Construction Manager. Gary will be responsible for work-crew management, task completion, and assisting with subcontractor communication and supply management. Gary has over 20 years of experience with construction supply management and over five years of experience with project planning and implementation.

Zelda O'Connell, Chief Operating Officer, will be the Grant Manager for this project. Zelda will manage the reporting, financial receipt management, and outcomes of this project. Zelda has over 20 years of experience in project management and implementation and grant management.

Ciro Esposito, FLDC bookkeeper, will be responsible for the managing and data collection of all financial expenditures within our Quickbooks software. He will work closely with Zelda O'Connell to supply all the financial information needed for grant reporting purposes.

Rented Property

Tenant Responsibility*

Please explain how your organization is responsible for modifying the building despite being rented. Be sure to describe the length of your organization's lease and to indicate whether or not you have obtained permission from the landlord for the proposed project.

This has been copied from your LOI.

Since 2019, FLDC has rented the property at 4017 56th ave N., St. Petersburg from Pinellas County at \$1.00 per year. We have recently been given the opportunity to purchase this property if we can obtain suitable funding. Without suitable funding, this building will no longer be available for rent, this funding is the only opportunity available to obtain this property and remain in Lealman.

As explained above in the section "Proposal Description", FLDC has been searching for property for years. The recent real estate inflation has made this impossible. The funding requested through this grant will support the purchase of the property and exterior/structural renovations; allowing us to remain in the area where our services are most needed.

Landlord*

Please enter the name and address of the property owner/landlord.

Pinellas County

Lease Upload*

Please upload the executed lease you currently have with your landlord. If there are any important circumstances to note, use the text box below.

FLDC Lease Agreement.pdf

This lease was extended by Pinellas County to give FLDC the time to purchase the current building or move into another building. There are currently no plans to renew if funding cannot be acquired.

Cost Difference

Estimated Total Project Cost*

Please specify the total cost of this capital project/purchase.

Example: ABC Childcare is seeking funding for a new playground. ABC Childcare is asking PCF to fund \$20,000 for certain equipment, and will seek other funding and donations for the remaining \$150,000 of the playground, for a total project cost of \$170,000. ABC Childcare would put \$170,000 below.

This has been copied from your LOI.

\$1,937,498.00

Cost Difference*

How does your organization plan to cover the cost of this project beyond the amount requested? Please also specify if your organization can carry out the potential ARPA-funded portion of this project without other funding being secured.

This has been copied from your LOI.

The cost difference is covered by the in-kind items provided in the final budget attached to this grant. In-kind commitment letters are also provided.

Written Justification - \$1m or Greater

You have requested more than \$1 million in capital expenditures. In order to comply with regulations and reporting requirements of the U.S. Treasury, the below questions are required as part of a Written Justification for the costs. The character limits in this section are set high, but do not feel you need to reach the character limit.

Capital Expenditure Need*

Please explain the following:

- Why are existing capital equipment, property, or facilities not sufficient to address the harm you explained above under "Negative Economic Impact?"
- Why would additional funding to relevant programs or services be insufficient without the corresponding capital expenditures being proposed by your organization?

The Florida Dream Center is currently leasing the building from Pinellas County. The County plans to redevelop the area around the building into low-income housing. If FLDC cannot purchase the building, our organization will have to relocate. There is no option available to continue leasing.

Without this capital expense, FLDC services will no longer be available in Lealman; we would be forced to move. Considering the current real estate inflation costs, not only would FLDC have to move, our services would need to be decreased to afford lease costs in Pinellas County.

The reduction of services and the conclusion of services in Lealman are extreme and negative community impacts that would result from the lack of capital funding.

Comparison of Alternatives*

According to U.S. Treasury guidance, ARPA-funded capital projects must be the most cost-effective and reasonable option to repair COVID-19's negative economic impact on your organization.

In order to do so, please provide a comparison of the proposed large capital project against two alternative capital projects, and explain why the one you are proposing is superior. When evaluating the superior option, please consider the following:

1. The effectiveness in addressing the harm identified in this application under “Negative Economic Impact” and in the previous question.
2. The total cost of the proposed project vs. the two alternatives

Alternatives are NOT multiple vendors or bids for this project. Rather, they would be entirely different capital project proposals. For example, rather than expanding a currently owned-property, an alternative could be purchasing a bigger property. This would potentially not be more cost-effective or reasonable due to high property costs and the need for additional construction.

The current square footage of the Florida Dream Center building is approximately 13,406. This building houses FLDC’s administrative offices and all four service programs.

Since 2020, FLDC (along with other partnering organizations and Pinellas County Staff) has been searching for other viable property options. There are no options in Pinellas County that will offer similar square footage within the critical area of need in Lealman. In fact, currently available for lease in the Lealman service area are only the three options below:

- 1 -- 15,000 square-foot building in Joe’s Creek Industrial Park - 5 miles from low-income housing - \$14,750.00 per month to lease. No purchase option
- 2 -- 9,540 square-foot building in Joes Creek Industrial Park - 5 miles from low-income housing - \$14,310.00 per month to lease. No purchase option and only 71% of the size of the current FLDC building.
- 3 -- 2,500 square-foot building near 28th St N - 6 miles from low-income housing - \$2,708 per month. No purchase option and 19% of the size of the current FLDC building.

Comparatively, the capital funding will allow for the purchase and exterior renovation of the current FLDC building. By purchasing the building, FLDC can continue to grow its services and impact while increasing organizational sustainability and community impact.

Community Connection

The American Rescue Plan Act (ARPA) prioritizes organizations that either have headquarters or carry out the majority of their operations inside Qualified Census Tracts (QCTs). QCTs are a standard method of identifying communities with a large proportion of low-income residents. The U.S. Department of Housing and Urban Development determines what areas qualify as QCT.

To assess if your organization serves or is headquartered in a QCT, use the following link:

https://www.huduser.gov/portal/sadda/sadda_qct.html

In the top right-hand corner, choose the state of Florida and Pinellas County. Then on the left-hand side of the screen, click the box next to “Color QCT Qualified Tracts.” The QCT zones are denoted in purple. You can also map your address by adding it into the address box at the top to see if your location is inside the zones.

Below, please provide the location of your operations and the location of your headquarters, if different.

Headquarters Location

Please provide your organization's headquarters address as it appears on your Sunbiz account. To check your Sunbiz registration, you may search here: <https://dos.myflorida.com/sunbiz/search/>

This has been copied from your LOI and cannot be changed.

4017 56th Ave N., St. Petersburg FL 33714

QCT Determination - Headquarters

Is this organization headquartered in a QCT?

Yes

Project Location

Please provide the address or intersection where the property being modified is.

This has been copied from your LOI and cannot be changed.

4017 56th Ave N., St. Petersburg FL 33714

QCT Determination - Project

Is this organization's project in a QCT?

Yes

QCT Impact*

PCF understands that just because a project may not be located in a Qualified Census Tract, those who reside in one may access your services and may come to the location where your organization's project will take place.

- If applicable, please describe if you have clients that reside in a QCT as indicated on the map linked above, and the proportion of your clients that come from these areas.
- If your organization does not serve clients from a QCT, you can write "Not Applicable" below.

This has been copied from your LOI.

All FLDC clients live within QCT areas. Most clients reside in Lealman and Tarpon Springs, while a smaller quantity resides in other QCT areas. The percentage breakdown includes 58% residing in Lealman, 25% residing in Tarpon Springs, and the remaining 17% residing in mobile home parks, churches, and low-income housing. Those areas are in Highpoint, Largo, Clearwater, and Dunedin; also reflected as QTC areas.

The FLDC building this packet is requesting to purchase falls within the QCT area.

QCT Determination - Clients

Does this organization's project benefit residents of QCTs?

Yes

This section aims to capture general demographic data about your organization and to see how you engage with and represent the community you serve. PCF has generalized the demographic data questions more than it has in other processes because of the public nature of this process. PCF understands that identity disclosure can be a sensitive matter, and wants to respect your organization's board and staff. If your organization feels comfortable sharing more detailed demographic information, it may do so in the "Community Representation and Connection" section.

Community Representation and Connection*

Describe how your organization is representative of, or has authentic connections to, the community your proposal seeks to serve. You can list other community-based organizations that work on programming with you and/or list examples of your work within this community.

This has been copied from your LOI.

FLDC has been serving the Lealman community since November 2014. Our Adopt-a-Block program goes out into the community every Saturday morning knocking on doors to better understand current needs and trends. This direct interaction with community residents validates the services we provide.

FLDC partners with multiple organizations to promote self-sufficiency. These organizations include Lealman and Asian Neighborhood Family Center, Pinellas Police Athletic League, Pinellas County Government, City of Tarpon, Shepherd's Center, Homeless Leadership Alliance, etc. FLDC has supported families in community events like Back to School, Turkey Giveaway and Christmas Festivals while supporting our unhomed communities through Point in Time Count and 4th of July BBQ and Resource Day.

FLDC has also helped develop an alliance with Lealman-based community partners and Pinellas County support to bring educational and cultural events to Lealman. As an unincorporated area, there has been no city government to head this responsibility. Lealman has never had a 4th of July parade or an arts & crafts fair. The Lealman Community Events Committee is currently composed of Pinellas County representation, Florida Dream Center leadership, Lealman Community District Services, Lealman Community Association, Lealman Fire Department, Memorial Park Cemetery, and the Lealman Exchange. The committee works diligently to expound upon partner events and the growth of new events.

The FLDC President & CEO has been on the Lealman CRA since its inception in 2016, serving as the President and VP. The COO is also the Executive Director of the Lealman Community District Services, a group committed to community engagement and partnership in Lealman. In addition, our staff participates in many committees such as Homeless Leadership Alliance, Family Services Initiative, Volunteer Organizations Active in Disaster, etc. Lastly, FLDC is proud to have a board presence within local communities, underserved groups, and leadership/educational institutions. For example, the FLDC board has a Lealman resident, military veteran, past provost of St. Pete College, and attorney on its current board to help bring perspectives and resources to the organization. In the past, our board has also been comprised of ex-offenders, past drug addicts, and law-enforcement representatives.

Increasing the depth of community cultivation within FLDC ranks only strengthens our understanding of the community we serve.

Leadership Demographics - Executive Level Leadership Team

Does your executive leadership team consider themselves a member of one or more of the following populations? Check all that apply.

- BIPOC defined as Black, Latino, and Indigenous and Native American persons, Asian Americans and Pacific Islanders and other persons of color

- LGBTQ+ (Lesbian, Gay, Bisexual, Transgender, Queer+)
- Neurodiverse/physically disabled

BIPOC

Neurodiverse/physically disabled

Leadership Demographics - CEO/Executive Director

Does your CEO/Executive Director consider themselves a member of one or more of the following populations?

Check all that apply.

- BIPOC defined as Black, Latino, and Indigenous and Native American persons, Asian Americans and Pacific Islanders and other persons of color
- LGBTQ+ (Lesbian, Gay, Bisexual, Transgender, Queer+)
- Neurodiverse/physically disabled

Neurodiverse/physically disabled

Leadership Demographics - Board Membership

Do your board members consider themselves a member of one or more of the following populations? Check all that apply.

BIPOC defined as Black, Latino, and Indigenous and Native American persons, Asian Americans and Pacific Islanders and other persons of color

LGBTQ+ (Lesbian, Gay, Bisexual, Transgender, Queer+)

Neurodiverse/physically disabled

BIPOC

Neurodiverse/physically disabled

Financial Overview

IF A CONTRACTOR HAS NOT BEEN SELECTED, BIDS MUST BE DATED AFTER 8/8/22. If you need assistance compressing files, please email Rose Cervantes at rcervantes@pinellascf.org.

The file attached below should contain current, verifiable bids, estimates, or price lists [from your potential vendor(s)]. Please ensure there is a date noted on the bid or some annotation as to when you obtained these estimates/bids.

- If your project costs **LESS** than \$75,000, you must upload TWO verifiable bids or estimates for the proposed project.
- If your project is **EQUAL TO** or **MORE THAN** \$75,000, you must upload THREE verifiable bids or estimates for your proposed project.

If you have already selected a contractor for this process and do not have multiple bids to upload, please ensure you answer the narrative question below thoroughly.

Bid/Estimate #1*

PDF files are accepted.

Bid_Estimate Packet.pdf

Bid/Estimate #2

PDF files are accepted.

Bid/Estimate #3

PDF files are accepted.

Selected Contractor*

If you have not yet selected a contractor and have uploaded multiple bids above, please write N/A below or you will not be able to submit your application.

If your organization has already selected a contractor for this proposed capital project, please describe the process through which this contractor was chosen, and be sure to answer:

1. Was there a competitive bid process? That is, were multiple bids collected in order to evaluate multiple contractors? Describe this process (names of contractors, number of bids collected, prices, and why the contractor was chosen).
2. What personnel members at your organization selected the contractor?
3. Has a contract been executed with this contractor? **If yes, upload the contract here. If no, please describe the status of contract.**

If a contractor has already been selected AND a competitive bidding process was not used, the project will lose points.

FLDC In-kind _ Cleveland Construction Services.pdf

As previously explained, the current FLDC President & CEO is a licensed contractor with over 30 years of experience. Steve Cleveland will manage this project and provide in-kind service through Cleveland Construction Services.

There was no competitive bid process. The FLDC board of directors discuss this option and is excited to move forward. A contract is being developed to determine the scope of work and in-kind description. This contract can be provided in its entirety once the funding is approved.

There is no contract, however, the commitment for in-kind construction management is uploaded here and along with all bids/quotes.

Minority/Woman-Owned Business

Is your selected contractor, or the bid you are going to choose if funded, one of the following:

- Small-business enterprise (SBE)

- Disadvantaged business enterprise (DBE)
- Minority and/or woman-owned business (MWBE)

No

Related Parties*

Are any of the contractors/vendors that have provided bids/estimates a related party to your organization?

Examples of Related Parties

- A board member that owns the contracting company that provided a bid
- The relative of a director, officer, or executive team member owns a company that provided an estimate
- The CEO of the applying organization has a financial interest in the construction company providing a bid

If **yes**, identify the vendor and describe the relationship.

If **no**, write "No related parties below."

Below is a summary of any related parties.

Cleveland Construction Services - Steve Cleveland is the President & CEO of the Florida Dream Center. This is further explained in this packet as he is also a General Contractor and will be managing this project. He also has committed to an in-kind amount for project management. The commitment letter is attached.

Sarah Lyons, Architect - Sarah was a previous board member who has offered her time and expertise in an in-kind capacity. She has since moved to Sarasota for business, as such resigned from the board of directors. Her commitment letter is attached to this grant.

Budget Detail*

Please upload a clear, easily readable budget that breaks out costs for this proposed project. Ensure that it is clear what portion would be paid for through this grant funding and what would be paid for from other sources. **Be sure that the budget includes 10-20% for contingencies and any costs related to performance and payment bonds for construction projects.**

If you are going to request the permitted indirect cost of up to 5%, please be sure this is represented in your budget.

An example budget is available here.

If you have additional notes to add to your budget summary, you may do so in the text box below.

PDF and Excel files are allowed.

ARPA Budget.pdf

Please note that in some cases estimates were created as official quotes could not be provided until funding is secured and complete plans and drawings are provided. Due to the number of hours needed for drawings and plans, they cannot be provided either until funding is acquired.

All estimates are based on current fair market values.

Other Funding Sources*

Please describe any other funding that your organization has applied for or obtained for this project. This includes but is not limited to Community Development Block Grants (CDBG), local government grants (including Tourist Development Council funding), foundation grants, and donors (you do not need to disclose donor identities, simply amount raised that is allocated to this project). This includes any matching grants or in-kind contributions you may have obtained.

If none, please explain why no additional funding sources have been pursued.

If this answer has changed since submitting your LOI, you may update it below. Please be sure all funding sources below are represented in the budget you have uploaded above.

\$111,5000.00 has been confirmed as in-kind items to date and detailed in the 'Budget Summary' section. FLDC is still continuing to reach out to partners and potential donors for other in-kind possibilities. FLDC will have all written agreements documented for final proposal submission.

Changes in Operating Costs*

Please answer this question based on the descriptions below:

- If this project **increases** ongoing operational costs (programmatic, operating maintenance or other costs), how will you compensate for the difference?
- If this project **decreases** ongoing operating costs, how will it do so?
- If this project **does not affect** operating costs, please note so below.

If this answer has changed since submitting your LOI, you may update it below.

The current building requires repairs that will occur with the renovations described in this funding. Once they are completed, there will be a decrease in monthly water and electrical costs. Rent costs will not increase since the need to lease or purchase another building will not be necessary. In addition, our current operating budget manages all operating expenses for this building. Since FLDC is already responsible for maintenance and utilities, there would be no increase in ongoing operating costs when the building is purchased.

This building is currently housing the administrative offices, social service staff, and Mobile Food Bank. By remaining in this building, operation costs will reduce.

Fund Management Capacity*

Please describe your organization's capacity to manage these potential ARPA funds in terms of fiscal management and financial infrastructure.

This includes, but is not limited to, the use of accounting software that can track a general ledger and multiple accounts and the ability to work on a reimbursement-basis.

The inability to handle a reimbursement-based grant does not disqualify your organization from applying.

This has been copied from your LOI.

Funding will flow from us to those who will work on this program through a bill-based system that is recorded in Quickbooks financial system. Contractors will be issued a subcontract agreement that will be signed prior to working on the project. We will ensure that all subcontractors are licensed and insured, acceptable work is conducted, and acceptable products are provided before invoices are paid and submitted to ARPA for reimbursement. The process will be performed through a collaborative effort between the CEO/General Contractor, FLDC fiscal agent, vendors, in-kind donors, and FLDC staff.

FLDC has been granted large federal, county, and local multi-year grants with award amounts up to \$1 million. FLDC is compliant with all funding requirements and has extensive experience with the management, oversight and reporting of this capacity. FLDC is fully capable of managing the project planning and implementation as well as the fiscal responsibilities and reporting of this grant.

Corrective and Investigative Action/Grant Recall*

In the past three (3) years, has your organization had any of the following occur:

1. Been under legal investigation by a local, state, or federal institution?
2. Been placed on a corrective action plan by a funder?
3. Had grant funding recalled by a funder?

If yes, please describe the investigation, corrective action plan and/or grant recall, and the current status of such incidents. If no, write "N/A"

N/A

Organization Documentation

Organization Budget*

Please upload your most recent, board-approved organizational budget for this fiscal year. PDF and Excel documents are accepted.

2023 Organizational Budget.pdf

Board of Directors List*

Please upload a current list of members of your organization's Board of Directors. Excel, Word, and PDF formats are acceptable.

Board Member List_2023.pdf

IRS Form 990*

Please upload a PDF copy of your most recently submitted IRS Form 990.

If Form 990 from your most recent fiscal year is delayed or you have received an extension, please explain in the text space below. You may also explain if you don't have a Form 990 due to organization type. You should still upload the most recent publicly available 990.

If you file a Form 990-EZ and do not have anything to attach, please note so below.

2021 FLDC 990.pdf

N/A

Most Recent Financial Statements

Upload a PDF version of your most recent financial statements. If you have audited financial statements, please upload the most recently conducted audit. If you do not have a recent audit, please explain why.

2021 FLDC Audit.pdf

N/A

Insurance

Evidence of Insurance Coverage*

Grantees of the ARPA Nonprofit Capital Project Fund will be required to maintain appropriate insurance related to your operations and this project. PCF will determine whether this coverage is appropriate.

Please upload evidence of insurance.

If your organization does not have evidence of insurance coverage, please provide an explanation as to why.

FLDC COI.pdf

N/A

Insurance Requirement*

If you are awarded a contract from the ARPA Nonprofit Capital Project Fund, you will be required to list Pinellas Community Foundation as an additional insured through your general liability insurance or other appropriate coverages for the duration of the contract. If you would like to check with your insurance carrier on how to do this, here is the information about PCF you will need:

Pinellas Community Foundation
17755 US Highway 19 N
Suite 150
Clearwater, FL 33764
727-531-0058

Please check the box below to indicate that you understand and will be able to comply with this requirement if you are awarded a contract.

PCF will not ask for a certificate naming us as additional insured until the contracting stage.

Yes, I understand and will comply with this requirement if awarded a contract.

Post-Grant Requirements

Reporting Requirements Acknowledgment*

Grantees will be required to submit a pre-award agreement within two weeks of receiving an award notice. In addition, grantees will be required to submit monthly expenditure reports until their project is completed and their contract is closed out.

Financial information justifying all expenditures will also need to be provided. This includes but is not limited to:

- Invoices
- Canceled checks
- Credit card statements, along with a record of paying the credit card.

If you have any questions, please contact Rose Cervantes, ARPA Program Officer at rcervantes@pinellascf.org.

Yes, I agree to submit this grant agreement and impact report within the specified timeframes.

Additional Information

Additional Upload

If you have something to share, you can upload it here in PDF format.

FLDC Project Timeline.pdf

Anything else to share?

Is there anything else that you would like Pinellas Community Foundation to know or other information your organization would like to share that isn't addressed elsewhere in this application?

While some of the estimates and quotes are generic please note that conversations were had with possible vendors. In today's inflation environment and without the presence of drawings many were not able to provide detailed quotes. The drawings were also not able to be completed until the grant was approved or funding was secure. However, FLDC and Steve Cleveland, are confident in the budget that was presented and the ability to adjust within the amount requested to complete this project.

File Attachment Summary

Applicant File Uploads

- Canceled events.pdf
- Building Renderings.pdf
- FLDC Lease Agreement.pdf
- Bid_Estimate Packet.pdf
- FLDC In-kind _ Cleveland Construction Services.pdf
- ARPA Budget.pdf
- 2023 Organizational Budget.pdf
- Board Member List_2023.pdf
- 2021 FLDC 990.pdf
- 2021 FLDC Audit.pdf
- FLDC COI.pdf
- FLDC Project Timeline.pdf

Canceled Florida Dream Center Events due to the Pandemic

EVENT	DATE	NOTES
Bowl-a-Rama	03/14/2020	This was the same weekend that areas began to close because of COVID-19. No one wanted to participate as there was fear of the unknown
Walk for Hunger	April 2020	Was canceled due to COVID. A portion of the sponsors remained but some of the money had to be returned
Masquerade Ball	September 2020	COVID was still prevalent, no one was attending galas.
Walk for Hunger	April 2021	Was not planned due to COVID
Masquerade Ball	September 2021	COVID was still a concern, this event was canceled.



Bowl-a-Rama

Saturday, March 14, 2020
12:00am – 2:30pm
Sponsorship Levels and Benefits

\$750 – Presenting Sponsor

- Sponsor 8 Children
- Name included on Trophies/Certificates
- Logo on event Tshirt to represent your company
- Logo recognition on e-blast FLDC friends, and on-site signage as well as social media
- Opportunity to distribute promotional material during the event
- Inclusion in the event reporting to funders and partners

\$500 – Supporting Sponsor

- Sponsor 5 Children
- Name included on Trophies/Certificates
- Logo on event Tshirt to represent your company
- Logo recognition on e-blast FLDC friends, and on-site signage as well as social media
- Opportunity to distribute promotional material during the event
- Inclusion in the event reporting to funders and partners

\$100- Single Bowler

- Sponsor 1 Child

T-Shirt Sponsor (Supplying all t-shirts for bowling participants)

- Logo recognition on e-blast FLDC friends as well as social media and Tshirts
- Opportunity to distribute promotional material during the event
- Inclusion in the event reporting to funders and partners

“Bowl for a Cause”
Knocking down pins, to knock down hunger!



FL
DC
Florida Dream Center



Southport Community Development



- **Development of an affordable rental housing apartment community**
- **Up to 86 one, two, and three-bedroom units**
- **Restricted to 60% of Area Median Income.**



SECOND AMENDMENT TO LEASE AGREEMENT

THIS SECOND AMENDMENT TO LEASE AGREEMENT ("Second Amendment") is made and entered into this 13th day of June, 2022, by and between PINELLAS COUNTY, a political subdivision of the State of Florida, hereinafter referred to as "**OWNER**" and the FLORIDA DREAM CENTER, INC., a Florida not-for-profit corporation hereinafter referred to as "**TENANT**", jointly referred to as the "PARTIES".

WITNESSETH

WHEREAS, the PARTIES entered into a Lease Agreement on the 17th of June 2017 for approximately 9,550 rentable square feet of a building located at 4017 56th Avenue North, St. Petersburg, Florida, 33714 (hereinafter the "Premises").

WHEREAS, the PARTIES entered into a First Amendment on June 1, 2019, to adjust the rental amount.

WHEREAS, the PARTIES mutually agree to enter into this Second Amendment to extend the term.

NOW, THEREFORE, in consideration of the promises hereinafter made and other good and valuable consideration, the receipt of which is hereby acknowledged, the PARTIES agree to the following modifications and amendments to the Lease Agreement:

1. Paragraph # 2 TERM, RENTAL, AND REDERTIMINATION: The Lease shall be extended for one (1) year from June 13, 2022, through June 12, 2023. This Lease shall be automatically renewed for successive additional terms of one (1) year each subject to review of the lease and possible amendment of terms and conditions. There will be no rent redetermination for this term of the Lease Agreement or with any successive additional renewal terms. Either Party may terminate this Agreement at any time with 120 days written notice to the other Party.

2. Except to the extent specifically modified herein, all other terms, conditions and provisions of the Lease Agreement shall remain in full force and effect. In the event of a conflict between the Lease Agreement, the First Amendment and the Second Amendment, this Second Amendment shall control.

IN WITNESS WHEREOF, the PARTIES hereto have caused this Second Amendment to Lease Agreement to be executed by their respective authorized officers and agents, and it shall be effective on the date and year of the last party's proper execution, as written below.

TENANT:

FLORIDA DREAM CENTER, INC.

By: 

Print Name: Steve Cleveland

Title: CEO/President

Date: June 13th 2022

OWNER:

PINELLAS COUNTY, FLORIDA

By: 

Joe Lauro, Director
Department of Administrative Services

Date: 7/6/2022

APPROVED AS TO FORM

By: Michael A. Zas
Office of the County Attorney

FIRST AMENDMENT TO LEASE AGREEMENT

THIS FIRST AMENDMENT TO LEASE AGREEMENT ("First Amendment") is made and entered into this 1st day of June, 2019, by and between PINELLAS COUNTY, a political subdivision of the State of Florida, hereinafter referred to as "OWNER" and the FLORIDA DREAM CENTER, INC., a Florida not-for-profit corporation hereinafter referred to as "TENANT", jointly referred to as the "PARTIES".

WITNESSETH

WHEREAS, the PARTIES entered into a Lease Agreement on the 17th of June, 2017 for approximately 9,550 rentable square feet of a building located at 4017 56th Avenue North, St. Petersburg, Florida, 33714 (hereinafter the "Premises").

WHEREAS, the PARTIES agree to enter into this First Amendment in order to adjust the rental amount.

NOW, THEREFORE, in consideration of the promises hereinafter made and other good and valuable consideration, the receipt of which is hereby acknowledged, the PARTIES agree to the following modifications and amendments to the Lease Agreement:

1. Paragraph # 2 TERM, RENTAL, AND REDERTIMINATION: For the remainder of the initial five year term of the Lease Agreement, the total amount of Rent due will be \$1.00 (one dollar), receipt of which is hereby acknowledged. For any successive additional renewal terms of one year, which are subject to mutual written agreement of the PARTIES, the Rent will be \$1.00 (one dollar) per renewal term. There will be no rent redetermination for the remaining term of the Lease Agreement or with any successive additional renewal terms.
2. Except to the extent specifically modified herein, all other terms, conditions and provisions of the Lease Agreement shall remain in full force and effect. In the event of a conflict between the Lease Agreement and this First Amendment, this First Amendment shall control.

IN WITNESS WHEREOF, the PARTIES hereto have caused this First Amendment to Lease Agreement to be executed by their respective authorized officers and agents, and it shall be effective on the date and year of the last party's proper execution, as written below.

WITNESSES:

Signature: [Signature]
Print Name: Zelda O'Connell
Signature: [Signature]
Print Name: Subrina Driggers

TENANT:

FLORIDA DREAM CENTER, INC.
By: [Signature]
Print Name: Steve Cleveland
Title: CEO
Date: 8/22/19

WITNESSES:

Signature: [Signature]
Print Name: SEAN GRIFFIN
Signature: [Signature]
Print Name: Mark EBY

OWNER:

PINELLAS COUNTY, FLORIDA
By: Joe Lauro CPPO/CPPB
Joe Lauro, Director of Purchasing
Date: 7/24/19

APPROVED AS TO FORM

By: [Signature]
Office of the County Attorney

Prepared by and return to:
Administrative Services/Real Property Division
Attn: Josh Rosado
509 East Avenue South
Clearwater, FL 33756

CONTRACT FOR SALE AND PURCHASE

This Real Property Contract for Sale and Purchase ("Contract") made and entered into this ____ day of _____, 2022 between PINELLAS COUNTY, a political subdivision of the State of Florida, whose address is 509 East Avenue South, Clearwater, Florida 33756 ("SELLER") and FLORIDA DREAM CENTER INC., whose address is 4017 56th Avenue North, Saint Petersburg, Florida 33714 ("BUYER") hereinafter jointly referred to as the "Parties".

WITNESSETH:

NOW, THEREFORE, in consideration of the mutual covenants, promises, terms and conditions set forth herein, the receipt and sufficiency of which are hereby acknowledged, the Parties agree as follows:

1. DESCRIPTION OF THE PROPERTY: In consideration of the payment hereinafter agreed to be paid by the BUYER to the SELLER, and in consideration of the covenants of the respective parties hereto, the SELLER does hereby agree to sell and the BUYER does hereby agree to buy, the following described property, the legal description of which is contained in Exhibit "A", attached hereto and fully incorporated herein, together with all development rights, littoral, riparian rights and subject to the restriction of use agreement contained in Exhibit "B", attached hereto and fully incorporated herein, and all easements, restrictions and zoning regulations of record, which is hereinafter referred to as the "Property".

2. PURCHASE PRICE: BUYER agrees to purchase the Property and the SELLER agrees to sell the Property for One Million One Hundred Ninety-five Thousand and 00/100 Dollars (\$1,195,000) subject to adjustment and proration upon closing as hereinafter provided, payable by certified funds or wire transfer funds at Closing ("Purchase Price").

3. EFFECTIVE DATE: The effective date of this Contract ("Effective Date") shall be the date when the contract is approved and executed by both Parties.

4. CLOSING DATE: This transaction shall be closed on or before thirty (30) days after the expiration of the Due Diligence Period as specified in Article 8 of this Contract, unless extended by mutual written agreement of the Parties ("Closing Date"). In the event BUYER is not able to close on the Property for any reason within this thirty (30) day period, BUYER may make a written request to have the Closing Date deferred for an additional forty-five (45) days. Such a request will be granted upon the sole and reasonable discretion of the SELLER.

5. CLOSING DOCUMENTS: Closing documents shall be available to the Parties for review ten (10) days prior to closing, including the County Deed to be executed by SELLER, conveying the Property to BUYER, subject to any and all easements and restriction of record, and any other documents necessary for the closing of this transaction.

6. PLACE OF CLOSING: Closing shall be held at a mutually agreeable date and time, at the County's Real Property Division location at 509 East Avenue South, Clearwater, Florida 33756, or other location in the county where the Property is located as designated by the SELLER.

7. TAXES, FEES, ASSESSMENTS, CLOSING COSTS: BUYER shall only be responsible for the payment of taxes, fees, and special assessments due on the Property from the Closing Date and subsequent years thereafter. Any outstanding taxes for prior years and pro-rated taxes for the current year in which this Contract is made shall be paid by the SELLER, by separate check at closing to "Pinellas County Tax Collector." Documentary stamp taxes at closing will be paid by the BUYER, together with the cost of recording any corrective instruments, as SELLER is exempt from paying State documentary stamps taxes pursuant to Florida Statutes §201.02. Values for recording purposes shall be the Purchase Price set out herein. Remaining closing costs shall be paid by BUYER.

8. DUE DILIGENCE/INSPECTION: BUYER shall have the right, prior to closing, to send or to come upon the Property at reasonable times, with its independent contractors, employees, engineers, and other personnel to inspect and conduct testing upon the Property to determine whether the Property is acceptable to BUYER. BUYER, in its reasonable discretion, may cancel this Contract at any time on or prior to the sixtieth (60th) day following the Effective Date, based upon the findings of any and all environmental inspections, reports, property assessments, or other such information to the extent that the same indicate an issue with or condition of the Property that has or could reasonably be expected to have a material adverse impact on the Property, or BUYER's interest therein. BUYER shall repair any damage to the Property caused by BUYER or its agents as a result of such inspections. Neither this provision, nor any other provision in this Contract, shall be construed as a waiver of SELLER's sovereign immunity pursuant to Florida Statutes § 768.28.

9. RIGHT TO CANCEL: If BUYER determines that the Property is not acceptable, BUYER shall notify the SELLER in writing of its intent to cancel the Contract on or before the expiration date of the due diligence period.

10. TITLE EVIDENCE: Ten (10) days prior to the Closing Date, BUYER may, at BUYER'S discretion and expense, obtain a title insurance commitment (the "Title Report") issued by a Florida licensed title insurer agreeing to issue to BUYER, an owner's policy of title insurance in the amount of the Purchase Price insuring BUYER'S good and marketable title to the Property, subject only to those standard exceptions appearing in the owner's title policy, which from the BUYER'S standpoint do not unduly affect title and those items which shall be discharged by SELLER at or before the Closing Date. If defect(s) render title uninsurable, SELLER will have ninety (90) days from receipt of notice within which to remove said defect(s), which shall automatically extend the Closing Date a like amount of time and if SELLER is unsuccessful in removing them, BUYER shall have the option of either accepting the title as it then is or BUYER and SELLER shall be released, as to one another, of all further obligations under this Contract.

11. SURVEY: BUYER may procure a survey at BUYER's sole expense.

12. TIME: Time is of the essence as to this Contract. Any reference herein to time periods shall refer to calendar days, and any time period provided for herein which shall end on a Saturday, Sunday or County or legal holiday shall extend to 5:00 p.m. of the next full business day.

13. RESTRICTIONS, EASEMENTS, AND LIMITATIONS: BUYER shall take title subject to any and all zoning regulations, restrictions, prohibitions and other requirements imposed by governmental authorities; plat or other subdivision restrictions; easements of record; and any permits to which the Property may be subject. Specifically, BUYER shall take title subject to the Restriction of Use Agreement attached hereto as Exhibit "B" and fully incorporated herein.

14. SUCCESSORS AND ASSIGNS: This Contract may not be assigned by BUYER without SELLER's prior written consent, which consent may be given or withheld by SELLER in its sole discretion. The covenants, provisions and agreements herein contained, shall in every case be binding on and inure to the benefit of the Parties and their respective heirs, executors, administrators, successors, and assigns, except that the BUYER's right to assign its interest under this Contract shall be subject to the written consent of SELLER as provided herein.

15. DEFAULT: Unless otherwise agreed to in writing the following applies 1) If BUYER fails to perform any of the covenants and agreements set herein, BUYER is in default, and SELLER may terminate this Contract, rendering it null and void, and the Parties shall be relieved of any and all further obligations and liabilities to each other under this Contract. 2) If SELLER fails to perform any of the SELLER's covenants and agreements set forth in this Contract as specified herein, SELLER is in default and BUYER may terminate this Contract, rendering it null and void, and the Parties shall be relieved of any and all further obligations and liabilities to each other under this Contract.

16. OTHER AGREEMENTS; CONSTRUCTION OF THIS CONTRACT: No other agreements or representations shall be binding upon BUYER or SELLER unless included in this Contract. No modification or change in this Contract shall be valid or binding upon the Parties unless in writing and executed by the Parties. Typewritten or handwritten provisions inserted

herein or attached hereto as addenda shall control all printed provisions of Contract in conflict therewith as long as both Parties agree in writing to same by initials of authorized agents. Whenever herein the singular number is used, the same shall include the plural, and the masculine gender shall include the feminine and neuter genders.

17. RELATIONSHIP OF THE PARTIES: Nothing contained herein shall be deemed or construed by the Parties, nor by any third party, as creating the relationship of principal and agent, or a partnership or joint venture between the Parties, and nothing contained herein shall be deemed to create any relationship other than the relationship of BUYER and SELLER.

18. NOTICES: Whenever any notice, demand or request is required or permitted hereunder, such notice, demand or request shall be in writing and shall be deemed to have been properly given and received when delivered in fact to the other proper party or when deposited if sent by United States mail, with adequate postage prepaid and sent by registered or certified mail with return receipt requested, or by air express mail, such as Federal Express, whether accepted or refused, to the address set out below or at such other address as is specified by written notice so given in accordance herewith. Notices may also be given by electronic transmission and shall be deemed to have been given and received on the date of such transmission. All notices and requests required or authorized hereunder shall be delivered as aforesaid to the representative Parties as follows:

As to SELLER:

Pinellas County Real Estate Division
Attn: Real Property Manager
509 East Avenue South
Clearwater, FL 33756
Telephone: (727) 464-3496
Fax: (727) 464-5251

As to BUYER:

Florida Dream Center Inc
4017 56th Avenue North
Saint Peterburg, FL 33714

19. BROKER: SELLER and BUYER warrants that it has not engaged a real estate broker with respect to the Property. SELLER nor BUYER shall not be responsible for any real estate commission or fees, which may be claimed to be due through the SELLER or BUYER or

pursuant to any acts of the SELLER. The obligations of SELLER and BUYER hereunder shall survive the closing.

20. SEVERABILITY: The invalidity, illegality, or unenforceability of any provision of this Contract shall in no way affect the validity of any other provision of this Contract, and the Contract shall be amended only to the extent necessary to bring it within the requirements of the law.

21. GOVERNING LAW: This Contract shall be governed by and construed in accordance with the laws of the State of Florida. Venue for resolution of all disputes, whether by mediation, arbitration, or litigation, shall be in Pinellas County, Florida, or the nearest location having jurisdiction.

22. WAIVER: The waiver or failure to enforce any provision of this Contract shall not operate as a waiver of any future breach of such provision or any other provision hereof. No waiver shall be binding unless executed in writing by the party making the waiver. The failure of either party to insist on strict compliance with any of the terms, covenants, or conditions of this Contract by the other party shall not be deemed a waiver of said term, covenant, or condition.

23. CONFIDENTIALITY: With the exception of disclosures required pursuant to Florida's Public Records Act, the Contract and the terms of the proposed transaction will be kept confidential to the extent permitted by law.

24. ENTIRE AGREEMENT: This Contract as hereinabove set forth, including all exhibits and riders, if any, incorporates all covenants, promises, agreements, conditions and understandings between the Parties, and no covenant, promise, agreement, condition or understanding, either written or oral, not specifically set forth herein shall be effective to alter the performance or the rights of the Parties as hereinbefore stated.

THE BALANCE OF THIS PAGE LEFT BLANK INTENTIONALLY
SIGNATURE PAGE FOLLOWS

IN WITNESS WHEREOF, the Parties have fully executed this Contract the day and year first above written.

SIGNED AND DELIVERED
IN THE PRESENCE OF:

Executed by BUYER on: _____

WITNESSES:

FLORIDA DREAM CENTER INC.

By: _____

Print Name: _____

Print Name: _____

Title: _____

Print Name: _____

Executed by SELLER on: _____

COUNTY:
PINELLAS COUNTY, FLORIDA, a
political subdivision of the State of
Florida.

ATTEST:

By: _____
Charlie Justice, Chairman

Print Name: _____

KEN BURKE
Clerk of the Circuit Court

By: _____
Deputy Clerk

January 13, 2023

Re: Florida Dream Center
In-Kind work

To Whom It May Concern,

I have partnered with Florida Dream Center (FLDC) for over three years. I served on the FLDC board from 01/2021 to 08/2022 and share the mission and vision of FLDC and believe in their work within Pinellas County. I understand that FLDC is submitting a funding grant application that will allow them to purchase the building they are currently serving out of.

I am committed to providing in-kind work in the way of additional building plans, drawings, prints, files, etc. I have already provided the initial rendering but plan to wait until funding approval before moving forward on the rest. The estimated value of my in-kind services will be \$12,000.00.

Please feel free to contact me at sarah.slyons@outlook.com with any additional questions you may have.

Sincerely

A handwritten signature in blue ink that reads "Sarah Lyons". The signature is written in a cursive, flowing style.

Sarah Lyons, AIA
AR98487



Subterranean Treatment / Spot Treatment / Tent Fumigation Contract

AGREEMENT made this 22 day of Feb, 2022

By and Between:

Buyer(s): Steve Cleveland

And Brantley Termite and Pest Control Services, Inc.

Agent Name: Ryan Helander

Billing Address: 4017 56th Ave. N.

Address: 2664 Enterprise Road, Unit # B-1

City/State/Zip: St. Pete, FL 33714

City/State/Zip: Clearwater, Florida 33763

Main Phone: 727-307-2741

Main Phone: (727) 541-5940

Phone/Email: Steven@hsard.net (hereinafter referred to jointly and severally as "Buyer")

Fax: (727) 799-4703 (hereinafter referred to as "Brantley")

WHEREFORE, in exchange for valuable consideration of the covenants contained in this Contract, the General Terms and Conditions on the reverse side of this Contract, and of those Addenda attached hereto, as listed below, delivered to and accepted by the Buyer, Brantley shall be hereby authorized to treat the premises described and in the manner as indicated below:

Treatment Address: 4017 56th Ave. N. St. Pete, FL 33714 Pinellas (Street Address, City, State, Zip Code, County)

Treatment Type: [X] Whole Structure Fumigation [] Article (Vault) Fumigation [] Spot Treatment Only [] Soil Treatment [] Tape-Seal
No Warranty on Spot Treatments or Article (Vault) Fumigations. Unless otherwise stated, treatment shall commence on the date listed herein below.

Total Number of Structures / # Total Size Under Seal
Total Area to be Treated: 1 183k slab
[] House [] Garage [] Mobile [] Commercial [] Multi-Unit
[X] Other: None Profit Warehouse

Brantley shall treat the premises for:
[] Prevention of: [X] Existing infestation of:
[] Presumptive evidence of: [] Pre-treatment for:
[] Subterranean Termites [] Old House Borers
[X] Drywood Termites [] German Roaches
[] Powder-post Beetles [] Bed Bugs
[] Formosan Termites [] Other:
Formosan Termites NOT covered unless indicated above.

Buyer shall pay as follows:
\$6,400.00 1. Initial Treatment
\$6,400.00 2. Other Fees and Costs for:
\$960.00 3. TOTAL PRICE
4. LESS Down Payment
5. Total Still Due
6. Annual Limited Lifetime/5 Year Warranty Renewal Fee
Payment due prior to service date and will be processed upon completion of service. Interest shall accrue on balances owed thereafter at a rate of 1.5% monthly.
Warranty Renewal Fee to be due in one full year after initial treatment date for warranties that qualify in accordance with Warranty Terms and Conditions on the reverse side of this contract. Warranty is subject to the Terms and Conditions on the reverse side of this contract.
WARRANTY LIMITED TO RETREATMENT ONLY.

Brantley has delivered and Buyer has accepted those Addenda attached hereto, as indicated below:

[] Fumigation Checklist [] Fact Sheet [] Disclosure / Occupant Notice [] Consumer Notice [] Graph [] Other:

Brantley Termite and Pest Control Services, Inc. and the undersigned "Buyer" shall be hereby bound by the terms of this Contract, the General Terms and Conditions on the reverse side of this Contract, and of those Addenda attached hereto and listed above. No other representations, oral or otherwise, have been made nor shall they be binding.

Proposal Only
*Quotes good for 30 Days.

Buyer or Buyer's Authorized Agent

Date of Above Described Treatment

Brantley Termite and Pest Control Services Inc.

"Notice of Treatment" Location

BUYER'S RIGHT TO CANCEL - If this is a home solicitation sale and you DO NOT want the goods or services offered, you may cancel this agreement by mailing written notice to the seller. This notice must indicate that you do not want the goods or services and must be postmarked before midnight on the third business day after signing this agreement OR before the goods are delivered or services are performed, whichever occurs first. If you cancel this agreement then the seller may keep all or part of any cash down payment not to exceed the lesser of 5% or \$50.00. If goods are delivered and accepted or initial services are performed prior to such cancellation, then the buyer shall be responsible for 100% of the amount due.

Do not sign this, or any contract, before you read it or if there are blank spaces. You are entitled to a complete copy of this contract.

"Celebrating Over 45 Years Serving Florida!"

January 17th, 2023

Florida Dream Center
Steve Cleveland
4017 56th Avenue North
St. Petersburg, FL 33714

Re: Rotary Donation

Dear Steve,

I know it has been a long time coming, but I'm glad we're finally here. The Rotary Clubs of District 6950 have partnered with the Dream Center over the years in varied projects and opportunities. The Rotary Club of Safety Harbor is committed to being the lead club in providing "in kind" and financial donations in excess of \$ 50,000.00 for construction, education and supplies needed to get the Center fully up to snuff over the next year.

We continue to share the mission and vision of the Dream Center and its commitment to Pinellas County. We are tickled to death that FLDC is finally submitting a funding grant application for the purchase of the building. We'll continue to be your partner through purchase, renovation and coming on line to fully serve the community as envisioned.

Should there be any additional information required regarding our commitment, please feel free to have folks contact me at jbxjr100@yahoo.com or on my personal mobile at (727)479-5176.

Again, congratulations on this monumental move forward.

Sincerely,

Jonathan Brewer



True-Line Coring & Cutting of Tampa Inc.

3919 W. South Avenue - Tampa, FL 33614
Office (813) 885-4401 Fax (813) 885-4812

www.sawconcrete.com

Quote 99684

QUOTED TO:	
COLLECT FROM CUSTOMER ON J 3919 W SOUTH AVE TAMPA ,FL 33614	<u>Cust #</u> FCOD01
(813) 885-4401 Fax:	
Ordered By: STEVE	

JOB INFORMATION	
Jobsite/Project: None	
PO #:	Job #:
FIRE TOWER 56TH AVE N	
ST PETE, FL	
Job Contact:	
Job Phone:	
Pager/Mobile:	Phone Type:
General Contractor: CLEVELAND CONST.	
Owner:	

Needed At Site	
Elevation 0	Distance To Site: 0

Quantity	Details Description	Unit	Price
1.00	HAND SAWING / CHAIN SAW / BOBCAT REMOVAL 8' X 11'4" X 40' TALL X 8" THICK WALL CUT INTO SECTIONS AND DROPPED TO GROUND. CUSTOMER TO PROTECT EXISTING ROOF AND WATER MAIN TRUE-LINE TO USE TORCH TO CUT STEEL PLATFORM AND LADDER	59,280.00	59,280.00
2.00	RENTAL 60' BOOM LIFT PER WEEK	1,650.00	3,300.00
	CALL DIGITAL CONCRETE IMAGING (813)927-0254 FOR LOCATES LAYOUT PROVIDED BY OTHERS PRIOR TO TRUE LINE ARRIVAL \$100 CHARGE PER MAN FOR ON-SITE SAFETY ORIENTATION (IF NECESSARY) TRUE-LINE TO SAW, SECTION, DROP AND HAUL DEBRIS. THIS IS FOR DAY WORK M-F AND ONE MOBILIZATION IF MORE THAN ONE MOB IS NEEDED IT WILL BE \$500.00 PER EXTRA RE-MOB. ALL AREAS TO REMAIN PROTECTED BY OTHERS. WORK BARRICADE BY OTHERS. \$500 ADMIN FEE WILL BE ADDED FOR OCIP/CCIP JOBS		<u>62,580.00</u>

- #1 HOLES TO BE DRILLED OR LINES TO BE SAWED MUST BE MARKED BY OTHERS. ALL HOLES DRILLED OR LINES SAWED WILL BE CHARGED WHETHER USED OR NOT.
- #2 DAMAGE TO UTILITIES OR OBJECTS WITHIN THE CONCRETE IS BEYOND OUR CONTROL. WE CANNOT ASSUME RESPONSIBILITY FOR DAMAGE TO SAME OR THE RESULTING DAMAGE THEREOF. DAMAGE TO PROPERTY OF OTHERS BY WATER TRAVELING THROUGH EXISTING CRACKS OR OPENINGS IN THE CONCRETE IS BEYOND OUR CONTROL.
- #3 REASONABLE AND SAFE ACCESS TO AND FROM WORK AREA GAURANTEED BY OWNER OR CONTACTOR
- #4 THIS COMPANY IS NOT RESPONSIBLE FOR THE PROTECTING OR BARRICADING OF OPENINGS AFTER CUTTING OR DRILLING
- #5 TERMS OF PAYMENT: NET 30 DAYS UPON RECEIPT OF INVOICE.
- #6 1.5% (ONE & ONE HALF PERCENT) PER MONTH WILL BE CHARGED ON PAST DUE ACCOUNTS
- #7 THIS AGREEMENT CONSTITUTES THE ENTIRE AGREEMENT OF THE PARTIES AND CANNOT BE ALTERED WITHOUT PRIOR WRITTEN CONSENT.
- #8 THICKER CONCRETE OR DIFFICULT SITE CONDITIONS WILL WARRANT A PRICE INCREASE.

Proposed by: Ben Hahn
Date: 10/27/22

Accepted By: _____
Date: _____



Custom Waterfall Services



Carlos Pavers Inc

Cost to Install a Concrete Block Wall

January 2023

Concrete Block Wall Installation Calculator

Zip Code

Square Feet*

33714

827

Update

Item details	Qty	Low	High
<input checked="" type="checkbox"/> Block Wall Cost Non-discounted retail pricing for: Concrete masonry block wall set with mortar on existing foundation. Quantity includes typical waste overage, material for repair and local delivery.	883 SF	\$3,057	\$4,613
<input checked="" type="checkbox"/> Concrete Block Wall Installation Labor, Basic Basic labor to install concrete block wall with favorable site conditions. Excavate up to 0.3m/1ft below grade. Layout pattern to minimize cuts. Set level concrete foundation. Lay courses up to 2m/6ft tall in mortar joints. Does not include top filling. Includes planning, equipment and material acquisition, area preparation and protection, setup and cleanup.	87.3 h	\$7,538	\$9,137
<input checked="" type="checkbox"/> Concrete Block Wall Installation Job Supplies Cost of related materials and supplies typically required to install concrete block wall including: cutting and grinding consumables, mortar and reinforcement.	883 SF	\$279	\$317
<input checked="" type="checkbox"/> Concrete Block Wall Installation Equipment Allowance Job related costs of specialty equipment used for job quality and efficiency, including: 115 V wet masonry saw, 5 cubic foot mortar box and small plate compactor. Daily rental. Consumables extra.	1 job	\$54	\$80
Totals - Cost To Install Concrete Block Wall	827 SF	\$10,928	\$14,148
Average Cost per Square Foot		\$13.21	\$17.11

Service Pros Edit, Print & Save this in Homewyse Lists

Create your own price list in Homewyse Lists



Custom Waterfall Services

Carlos Pavers Inc





More Home Care Clients — Today

We Know Home Care Marketing. Let's Fuel Your Sagapixel

Cost to Install Stucco

January 2023

Stucco Installation Calculator

Zip Code

Square Feet*

33714

3640

Update

Item details	Qty	Low	High
<input checked="" type="checkbox"/> Stucco Cost Non-discounted retail pricing for: 3 coat stucco applied over waterproof building paper and metal lathe. Quantity includes typical waste overage, material for repair and local delivery.	3886 SF	\$23,319	\$32,343
<input checked="" type="checkbox"/> Stucco Installation Labor, Basic Basic labor to install stucco with favorable site conditions. Install building paper, metal lathe and three coat (scratch, brown and finish) stucco. Basic float finish. Includes planning, equipment and material acquisition, area preparation and protection, setup and cleanup.	221.7 h	\$9,714	\$23,201
<input checked="" type="checkbox"/> Stucco Installation Job Supplies Cost of related materials and supplies typically required to install stucco including: corrosion resistant fasteners, flashing and exterior grade caulking, weather stripping and sealants.	3886 SF	\$1,566	\$1,781
<input checked="" type="checkbox"/> Option: Remove Siding Remove siding panels, fasteners and trim pieces - without damage to trim or adjacent surfaces. Remove loose or damaged building paper or wrap. Dispose of material responsibly. For vinyl, metal or wood siding. Material cost includes dump fee.	37.1 h	\$1,627	\$3,885
<input checked="" type="checkbox"/> Stucco Debris Disposal Costs to load and haul away old materials, installation waste and associated debris.	3640 SF	\$1,790	\$2,037
Totals - Cost To Install Stucco	3640 SF	\$38,016	\$63,247
Average Cost per Square Foot		\$10.44	\$17.38

Service Pros



Edit, Print & Save this in Homewyse Lists



Create your own price list in Homewyse Lists



Rollers Replacement St Pete - Door & Window Pinellas County

Windows Glass Replacement sliding-glass-door-window-repair.com





Window Cleaning Service

High Rise Window Cleaning



Fair Cost Guide - Aluminum Picture Windows

January 2023

Aluminum Picture Windows Calculator

Zip Code

33714

Update

Item details

Low

High

Material

13 unit

\$5,049.83

\$7,713.49

Includes basic coverage quantities and typical overage. Excludes sales tax, delivery upcharges, and items not included in the description and notes.

Labor

29.6 hrs

\$2,486.75

\$3,872.19

Includes on site setup, site preparation, job completion, trash removal and work area cleanup.

Supplies, Tools

\$397.67

\$452.37

Includes equipment allowance and supplies for preparation, job completion and site cleanup.

Total

\$7,934.24

\$12,038.05

Excludes sales tax, any applicable fees, dump charges, and costs for repair or remediation not mentioned in the work description.

Quantity

width	60"	72"	96"	120"
36"	1	6	0	0
height 42"	0	0	0	0
48"	0	6	0	0

Window/Door Quality Basic - builder grade



Labor Type Medium cost labor



High Rise Window Cleaning

High Rise Window Cleaning



MCMULLEN ROOFING, INC.

August 30, 2022

Florida Dream Center
4017 56th Ave North
St Petersburg FL 33714
Attn: Steve Cleveland

RE: Florida Dream Center - Re-roof proposal

Thank you for the opportunity to provide you with our estimate for the above referenced project. We propose to furnish all materials and perform all labor necessary to complete the following scope of work:

Scope of Work-flat roofs on south and north bldg:

- Tear off and dispose of the existing roof system down to the existing wood deck
- Re-nail the existing wood deck to meet current building codes
- Provide and install a 1/8" tapered insulation system to provided proper drainage
- Provide and install a 1/4" Dens Deck primed gypsum board, mechanically attached thru the insulation system to the wood deck
- Provide and install a Carlisle 60mil TPO (single ply) membrane, fully adhered to the gypsum cover board with Carlisle TPO membrane adhesive
- Provide and install a new 040 Kynar painted aluminum shop fabricated metal flashing, standard colors only
- Clean up and removal of all roofing related debris is included
- Manufacturer's 20 year No Dollar Limit warranty is included
- Contractor's 2 year workmanship warranty is included

Scope of Work-Shingle (east roof only):

- Tear off and dispose of the existing shingle roof system on south building mansard to a clean wood deck
- Re-nail the existing wood deck to meet current building codes
- Provide and install a GAF self adhering shingle underlayment directly to a clean wood deck
- Provide and install a GAF Timberline HD shingle, standard colors only
- Provide and instal a standard painted galvanized edge metal, standard colors only
- Clean up and removal of all roofing related debris is included
- Manufacturer's material warranty is included
- Contractor's 2 year workmanship warranty is included

Price: \$147,420.00

Exclusions & Clarifications:

- Since the roofing industry is experiencing some significant material shortages and unprecedented volatility in pricing, McMullen Roofing reserves the right to request a change order for the increase in materials based on the pricing of material at shipment date. Proof of pricing at time of proposal vs. time of shipment will be provided for any requested change order to cover material cost increase.
- We specifically exclude rotted wood replacement and hidden damages from the price below, as this amount is unknown. Any rotted wood found shall be replaced, and billed at a time and material rate of \$70.00 per man- hour plus materials.
- All permitting and inspection fees are included
- We specifically exclude any work or costs associated with the removal or installation of existing or new HVAC related equipment.

Price Provision:

Due to the extreme volatility of the marketplace with regards to the cost of roofing related products, the price quoted in this proposal is valid only for **30** days. Otherwise additional costs may be applied.

Payment Terms:

40% will be due upon material delivery and 60% due upon completion of project. The project schedule will be initiated upon receipt of a signed contract. Attachment "A" McMullen Roofing Conditions and Warranties is applicable and part of this proposal. Attachment "B" McMullen Roofing Contractor's Warranty is applicable and part of this proposal.

If you have any questions about this proposal, please feel free to contact me. Thank you again for the opportunity to provide you with our estimate. If you would like us to proceed with the work outlined above, please simply sign below and return to our office. Upon receipt we will obtain the necessary permits, and set up a project schedule. I look forward to working with you.

Sincerely,

Adam L. Smith

Adam L. Smith
President/Sr. Estimator

You are hereby authorized to furnish all materials and labor to complete the work for which we agree to pay the amounts listed above.

Owner/Owner's Representative

Date



Over 30 Years
Carlos Pave

Fair Cost Guide - High Efficiency

January 2023

High Efficiency Air Conditioning System Co

Zip Code

33714

Update

Item details

Material

Includes basic coverage quantities and items not included in the description

Low

\$23,025.80

High

\$26,870.71

Labor

Includes on site setup, site preparation

work area cleanup.

\$8,161.49

\$11,162.02

Supplies, Tools

Includes equipment allowance and supplies for preparation, job completion and site cleanup.

\$3,139.95

\$3,586.03

Total

Excludes sales tax, any applicable fees, dump charges, and costs for repair or remediation not mentioned in the work description.

\$34,327.24

\$41,618.76

Quantity

capacity (ton)	2 ton	3 ton	5 ton
13 SEER	0	0	0
16 SEER	0	0	0
20 SEER	0	0	1

Quality Premium grade



Labor High cost labor



Dive into video that rises above

[Learn more](#)

CBW PAINTING, LLC

Estimate for Exterior Painting

Location work to be performed: 4017 56th Ave. N.
St Petersburg, Fl.

Date of Bid: 8 Oct 2022

Scope of work:

1. Power wash entire exterior
2. Caulk as needed cracks in exterior
3. Patch areas where needed
4. Apply primer to any bare substrate or new wood or stucco
5. Apply two coats latex exterior paint to all areas:
 - a. Work is for up to 4 colors
 - b. Paint to be applied by spray & backroll and brush & roll
6. Clean up area

Bid for labor only.....In Kind: \$6,750.00

Overhead Door of Tampa Bay

Corporate Offices
 7701 Ann Ballard Rdd
 Tampa FL 33634
 (813) 885-3667 phone
 (813) 887-5341 fax

Pinellas County Certificate # C-10640
 Hillsborough County Certificate # 12600

Proposal #: RM-49964
 S 4850

PROPOSAL SUBMITTED TO: FLORIDA DREAM CENTER			Date 12/1/2022	Attention STEVE CLEVELAND
STREET 4017 56TH AVE N			Job Name CHI 12X12	
City ST PETE	State FL	ZipCode 33714	Job Location ST PETE	
Phone Number 727-307-2741	Fax Number		Job Phone 727-307-2741	

FURNISH AND INSTALL:

- (1) 10-0 x 9-0 CHI 2127 INSULATED IMPACT RATED WHITE LOW HEADROOM TRACK FRONT TORSION ASSEM NYLON ROLLERS SLIDE LOCK
- (1) 12-0 x 11-0 CHI 2127 INSULATED IMPACT RATED WHITE STD 15" TRACK FRONT TORSION ASSEM NYLON ROLLERS SLIDE LOCK
- (1) 12-0 x 12-0 CHI 2127 INSULATED IMPACT RATED WHITE LOW HEADROOM TRACK FRONT TORSION ASSEM NYLON ROLLERS SLIDE LOCK

REMOVE AND HAUL SECTIONAL DOORS

1-NEW LIFTMASTER 8365W ON 9' HIGH DOOR , 10' OPENER CHAIN DRIVE WITH PHOTO EYES, 2 REMOTES AND WALL CONSOLE

The terms for the job are C.O.D. which requires 50% down to order with the balance due the day of completion. We accept credit card or company check as payment.**Please note, we accept credit cards however there is a 3% convenience fee.**Lead time for the delivery of the above materials is approximately 4-6 weeks, after which installation will be scheduled by the dispatching department. We apologize for the extended lead times but please know we are doing our best to get product in a timely manner.

We hereby propose to complete in accordance with above specification, for the sum of:

Twenty Thousand Nine Hundred Ninety Six Dollars and No Cents

20,996.00

Signature _____

Richard Maslar

Direct Dial: (727) 503-4919

TERMS AND CONDITIONS

Payment to be made as follows: 50%DEP/BAL COD

Prices subject to change if not accepted in 15 days.

BY OTHERS: Jamb, spring pads, all wiring to motors and control stations, unless otherwise stated above, are not included. Permit is not included unless otherwise stated above. Claims are limited to the amount of contract only. Due to the nature of the product, minor dings, dents and scratches are common in door products. Purchaser agrees that doors shall remain in Seller's possession until paid in full. In the event Purchaser breaches or defaults under the terms and provisions of this Agreement, the Purchaser shall be responsible for the costs of collection, including reasonable attorneys' fees. (Agreements are contingent upon strikes, accidents, or delays beyond our control.) There will be a 3% additional charge for credit card payments.

ACCEPTANCE: Terms, Price, and specifications on all pages of this proposal are hereby accepted and the work authorized.

Purchaser: _____

Signature Title Date of Acceptance

FREE DELIVERY Over Two Million Online Items Eligible >

You're shopping
Pinellas Park
 OPEN until 9 pm

Delivering to
33781

tapcon screws

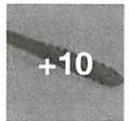
Cart | 0 items

Home / Hardware / Fasteners / Anchors / Masonry Anchors

Internet #314121510 Model #28390 Store SKU #1005752699

Tapcon
1/4 in. x 3-3/4 in. Star Flat-Head Concrete Anchors (25-Pack)
★★★★★ (351) Questions & Answers (4)

♥ Framing Supplies
overhead doors



20 boxes
\$399.40

Hover Image to Zoom

\$19.97

Bulk Savings

Buy 4 or More, Get 15% Off
Any combination

Add 4 to Qualify

Pinellas Park Store

✓ 9 in stock Aisle 19, Bay 013 Text to Me

FREE DELIVERY Over Two Million Online Items Eligible >

You're shopping
Pinellas Park
● OPEN until 9 pm

Delivering to
33781

2 x 6 x 10 pressure treated



Cart | 0 items

Home / Lumber & Composites / Decking / Deck Boards / Wood Decking Boards

Internet #206889247 Model #2311255 Store SKU #1001753877



WeatherShield

2 in. x 6 in. x 8 ft. #2 Prime Pressure-Treated Ground Contact Southern Pine Lumber

★★★★★ (111) Questions & Answers (19)



Hover Image to Zoom

20 each \$137.60

\$6⁸⁸

Pinellas Park Store

✓ 459 in stock Aisle 21, Bay 001 [Text to Me](#)

Delivering to: 33781 | [Change](#)

Store Pickup
Pickup Today
FREE

Ship to Home
Not available for this item

Express Delivery
Get it Tomorrow
\$79.00

459 in stock at Pinellas Park

Live Chat
Feedback



You're shopping
Pinellas Park
OPEN until 9 pm

Delivering to
33781

2 x 6 x 16 pressure treated



Cart | 0 items

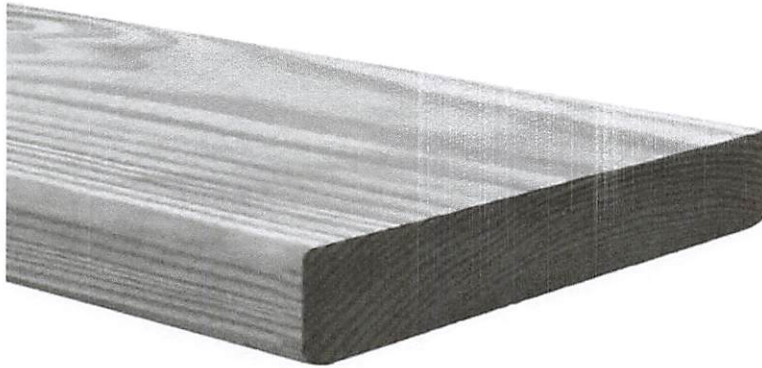
Home / Lumber & Composites / Decking / Deck Boards / Wood Decking Boards

Internet #206937122 Model #21216MGY2HD Store SKU #1001754119

208

2 in. x 12 in. x 16 ft. Prime Ground Contact Pressure-Treated Lumber

★★★★★ (39) Questions & Answers (9)



22 each

*~~\$31.76~~
79.156*

Live Chat

Feedback

Hover Image to Zoom

\$35.98

Pay \$10.98 after \$25 OFF your total qualifying purchase upon opening a new card. Apply for a Home Depot Consumer Card

Pinellas Park Store

30 in stock Aisle 28, Bay 001 Text to Me

Delivering to: 33781 | Change

Store Pickup
Pickup Today
FREE

Ship to Home
Not available for this item

Express Delivery
Get it Tomorrow
\$79.00

30 in stock at Pinellas Park

FREE DELIVERY Over Two Million Online Items Eligible >

You're shopping Pinellas Park
 OPEN until 9 pm

Delivering to 33781

sackrete

Cart | 0 items

Home / Building Materials / Concrete, Cement & Masonry / Concrete Mix & Aggregates / Concrete Mix

Internet #100318521 Model #100450 Store SKU #842303

8.9k

Quikrete 50 lb. Fast-Setting Concrete Mix

★★★★★ (1935) Questions & Answers (499)



162 BAGS
\$1,054.62

Hover Image to Zoom

BULK PRICE ELIGIBLE \$6⁵¹ Buy 64 or more \$5.86

Delivering to: 33781 | Change

<p>Buy in Store Limited stock at Northgate Check Nearby Stores</p>	<p>Ship to Home Not available for this item</p>	<p>Express Delivery Get it Tomorrow \$79.00</p>
---	--	---

1,059 ready for delivery to 33781. Schedule at checkout. How It Works

- 1 + **Add to Cart**

Live Chat
Feedback



Get a Free Estimate

Carlos Deyers Inc

Cost to Install an Asphaltic Concrete Driveway

January 2023

Asphaltic Concrete Driveway Installation Calculator

Zip Code

Square Feet*

33714

5220

Update

Item details	Qty	Low	High
<input checked="" type="checkbox"/> Asphaltic Driveway Cost Non-discounted retail pricing for: Hot mix asphalt and concrete aggregate surfacing. Quantity includes typical waste overage, material for repair and local delivery.	5573 SF	\$14,255	\$16,325
<input checked="" type="checkbox"/> Asphaltic Concrete Driveway Installation Labor, Basic Basic labor to install asphaltic concrete driveway with favorable site conditions. Layout driveway height and slope. Lightly grade and remove loose soil. Add gravel base layer. Apply and roll asphalt layer. Excavation not included. Includes planning, equipment and material acquisition, area preparation and protection, setup and cleanup.	425.3 h	\$36,717	\$44,505
<input checked="" type="checkbox"/> Asphaltic Concrete Driveway Installation Job Supplies Cost of related materials and supplies typically required to install asphaltic concrete driveway including: tool fuel and consumables and surface preparation materials.	5573 SF	\$1,290	\$1,467
<input checked="" type="checkbox"/> Asphaltic Concrete Driveway Installation Equipment Allowance Job related costs of specialty equipment used for job quality and efficiency, including: Slab perimeter form boards and stakes. 2 HP concrete vibrator. 48" Bull Float, reinforcing bar cutters, 5+ cubic foot mixing box with mortar hoe. Daily rental.	1 job	\$110	\$165
<input type="checkbox"/> Option: Slab Excavation Excavate with hand tools to a uniform depth below final surface level - to a maximum depth of 8 inches. For sidewalks, slabs and driveways. Distribute excavation material on site.	109.6 h	\$9,464	\$11,471
Totals - Cost To Install Asphaltic Concrete Driveway	5220 SF	\$52,372	\$62,463
Average Cost per Square Foot		\$10.03	\$11.97

Service Pros Edit, Print & Save this in Homewyse Lists

Create your own price list in Homewyse Lists



Pasco and Hillsborough County - Commercial Concrete Contractor Pinellas County

Commercial Concrete Subcontractor and Construction. cciconcrete.com



See How Shippabo Shipping Workflo

Fair Cost Guide - Vinyl Fencing

January 2023

Vinyl Fencing Calculator

Item details

Material

Includes basic coverage quantities and items not included in the description

Labor

Includes on site setup, site preparation

Supplies, Tools

Includes equipment allowance and supplies for preparation, job completion

Total

Excludes sales tax, any applicable fees, dump charges, and costs for items mentioned in the work description.

Serving Tampa Florida Area

Invisible Fence for Dogs

Zip Code
33714

Exclusive dealers of Contain Electronic

	Low	High
	\$16,109.11	\$20,383.13

safepetfer

	\$2,320.97	\$7,063.87
--	------------	------------

	\$984.12	\$1,148.69
--	----------	------------

	\$19,414.21	\$28,595.68
--	-------------	-------------

Fencing Perimeter 395 linear feet



Fencing Material 6' Contractor grade



Labor Type Medium cost labor



Site Conditions Moderate slope and soil



Rescreening Restoration Service Modern Pool Cage Painting LLC





Custom Waterfall Services



Carlos Pavers Inc

Fair Cost Guide - Interlocking Pavers

January 2023

Interlocking Pavers Calculator

Zip Code

33714

Update

Item details

Low

High

Material

855 sq ft

\$6,606.41

\$9,967.91

Includes basic coverage quantities and typical overage. Excludes sales tax, delivery upcharges, and items not included in the description and notes.

Labor

98.1 hrs

\$3,580.84

\$4,701.86

Includes on site setup, site preparation, job completion, trash removal and work area cleanup.

Supplies, Tools

\$2,038.33

\$2,338.30

Includes equipment allowance and supplies for preparation, job completion and site cleanup.

Total

\$12,225.59

\$17,008.06

Excludes sales tax, any applicable fees, dump charges, and costs for repair or remediation not mentioned in the work description.

Finished Area 800 square feet



Material Value grade



Labor Low cost labor



Site Conditions Moderate slope and soil



That incredible deal was just a click away!



ABOVE & BEYOND

TAKE ME BACK

Message

Original price is for a check. 3.5% more for card transactions on any service charge or third party product/service. Payment must be presented in full when ordered material has been installed and/or delivered. All sales are final. There will be a 10% charge for all bounced checks/card payments or stopped payments. We warranty all breaks to irrigation caused by digging. We do not fix or pay for any wires/cables of any kind.

It is not our responsibility for any products once installed. If ordering something by the sq ft. or by the yard, you are charged for what is ordered not what is to fill your space. Additional product may be needed to complete the project. If you would like supports for your trees/palms a fee can be added prior to installation day.

By accepting this estimate you are acknowledging to go ahead with the project and you agree to these terms. Thank you!

Mulch **\$136.00**

(\$34.00/yd) x 4.000 yd
Coco Brown yard

Foxtail Fern **\$112.50**

(\$12.50 ea.) x 9
Low maintenance
3Gallon

Thryallis **\$50.00**

(\$12.50 ea.) x 4
Yellow Blooms
3G Installed

Christmas / ADONIDIA Palm **\$300.00**

(\$150.00 ea.) x 2
30Gal

Dipladenia **\$148.00**
(\$18.50 ea.) x 8
3Gallon White
White/red

Dwarf Ixora **\$112.50**
(\$12.50 ea.) x 9
3Gal RED

Hibiscus **\$75.00**
(\$12.50 ea.) x 6
3Gal Painted Lady Pink

prep/install all sodcut
Mulch/plants/boarder/weedmatt

~~\$2,400.00~~

#LAC

A Delivery / Trip Fee **\$40.00**
Local

Haul Away
Minimum Dump Fee

~~\$55.00~~

FLDC

Apostle Iris **\$129.50**
(\$18.50 ea.) x 7
3Gallon

Subtotal	\$3,558.50
Sales Tax	\$74.44 <i>No</i>
Total	\$3,632.94

DK FARMS & NURSERY

1750 Lake Ave Se

Largo, FL 33778 United States

dklandscapingnursery@gmail.com

727-348-0818

Please contact DK FARMS & NURSERY about its privacy practices.



You're shopping
Seminole
● OPEN until 9 pm

Delivering to
33772

Search



Cart | 0 items

Home / Lumber & Composites / Woodshop Projects

Seminole #6304

Internet #312443768 Model #406723 Store SKU #1005143506

OPEN
Closes 9 pm
Curbside Available

10550 Park Blvd
Seminole, FL 33772
(727)399-9959
View Local Ad
View Store Details



Legs

264

Find Other Stores



Hover Image to Zoom

\$169 x 3

\$169⁰⁰

Pay \$144.00 after \$25 OFF your total qualifying purchase upon opening a new card.
Apply for a Home Depot Consumer Card

Delivering to: 33772 | [Change](#)

<p>Store Pickup Pickup Today FREE</p>	<p>Ship to Home Not available for this item</p>	<p>Express Delivery Get it Tomorrow \$79.00</p>
---	--	---

20 in stock at **Seminole**
[Check Nearby Stores](#)

- 1 +

Live Chat
Feedback

CLEVELAND CONSTRUCTION SERVICES LLC.

January 14, 2023

Florida Dream Center
4017 56th Ave N
Lealman, FL 33714

Reference: Renovations Old Fire Station (FLDC Building)

Cleveland Construction Services are pleased to provide in-kind services for the following scope of services.

Scope:

Construction management of the entire project, which shall include working with the architect on the design phase, submit construction drawings to Pinellas County Building Department for permitting, provide supervision during all phases of construction. This includes all inspections, construction material review, subcontractor oversight and project close-out.

The In-Kind donation for Construction Management is \$15,000.00.

If you should any further questions, please contact me.

Sincerely,

Steven J Cleveland
President
Cleveland Construction Services
727-307-2741
Steven@Ksands.net

704 23rd street sw Largo Florida 33770 • *727-307-2741 steven@ksands.net CGC1506389

CLEVELAND CONSTRUCTION SERVICES LLC.



Dun080778123



STATE OF FLORIDA DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

2601 BLAIR STONE ROAD
TALLAHASSEE FL 32399-0783

Congratulations! With this license you become one of the nearly one million Floridians licensed by the Department of Business and Professional Regulation. Our professionals and businesses range from architects to yacht brokers, from boxers to barbeque restaurants, and they keep Florida's economy strong.

Every day we work to improve the way we do business in order to serve you better. For information about our services, please log onto www.myfloridalicense.com. There you can find more information about our divisions and the regulations that impact you, subscribe to department newsletters and learn more about the Department's initiatives.

Our mission at the Department is: License Efficiently, Regulate Fairly. We constantly strive to serve you better so that you can serve your customers. Thank you for doing business in Florida, and congratulations on your new license!



**STATE OF FLORIDA DEPARTMENT
OF BUSINESS AND PROFESSIONAL
REGULATION**

CGC1506389 ISSUED: 08/29/2022
 CERTIFIED GENERAL CONTRACTOR
 CLEVELAND, STEVEN J
 CLEVELAND CONSTRUCTION SERVICES LL



Signature

LICENSED UNDER CHAPTER 489, FLORIDA STATUTES
 EXPIRATION DATE: AUGUST 31, 2024

Ron DeSantis, Governor

Melanie S. Griffin, Secretary

STATE OF FLORIDA DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION CONSTRUCTION INDUSTRY LICENSING BOARD

LICENSE NUMBER: CGC1506389

EXPIRATION DATE: AUGUST 31, 2024

THE GENERAL CONTRACTOR HEREIN IS CERTIFIED UNDER THE PROVISIONS OF CHAPTER 489, FLORIDA STATUTES

CLEVELAND, STEVEN J
CLEVELAND CONSTRUCTION SERVICES LLC
704 23TH ST SW
LARGO FL 33770



ISSUED: 08/29/2022

Always verify licenses online at MyFloridaLicense.com

Do not alter this document in any form.

This is your license. It is unlawful for anyone other than the licensee to use this document.

CLEVELAND CONSTRUCTION SERVICES LLC.

January 14, 2023

Florida Dream Center
4017 56th Ave N
Lealman, Fl 33714

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Sincerely,

Steven J Cleveland
President
Cleveland Construction Services
727-307-2741
Steven@Ksands.net

704 23rd street sw Largo Florida 33770 • *727-307-2741 steven@ksands.net CGC1506389

CLEVELAND CONSTRUCTION SERVICES LLC.



Dun080778123

**ARPA Nonprofit Capital Project Fund - Large Projects
Florida Dream Center Community Resources**

SUMMARY

<i>CATEGORY</i>		<i>GRANT FUNDS</i>	<i>IN-KIND FUNDS</i>	<i>TOTAL</i>	
ACQUISITION, DESIGN AND PLANNING		\$ 1,231,400.00	\$ 12,000.00	\$ 1,243,400.00	
CONSTRUCTION TASKS		\$ 528,072.61	\$ 49,750.00	\$ 577,822.61	
LANDSCAPING		\$ 39,537.39	\$ 34,400.00	\$ 73,937.39	
ADMINISTRATION		\$ 26,988.00	\$ 15,350.00	\$ 42,338.00	
TOTAL		\$ 1,825,998.00	\$ 111,500.00	\$ 1,937,498.00	

ITEMIZED ACQUISITION, DESIGN AND PLANNING

<i>DESCRIPTION</i>	<i>QUANTITY</i>	<i>UNITE PRICE</i>	<i>GRANT FUNDS</i>	<i>IN-KIND FUNDS</i>	<i>TOTAL</i>
Building acquisition	1	N/A	\$ 1,195,000.00	\$ -	\$ 1,195,000.00
Fair Market value variation	1	N/A	\$ 25,000.00	\$ -	\$ 25,000.00
Project drawings/plans	N/A	N/A	\$ -	\$ 12,000.00	\$ 12,000.00
Project permits	N/A	N/A	\$ 5,000.00	\$ -	\$ 5,000.00
Termite tenting	N/A	N/A	\$ 6,400.00	\$ -	\$ 6,400.00
AQUISITION, DESIGN AND PLANNING TOTAL			\$ 1,231,400.00	\$ 12,000.00	\$ 1,243,400.00

ITEMIZED CONSTRUCTION TASKS

<i>DESCRIPTION</i>	<i>QUANTITY</i>	<i>UNITE PRICE</i>	<i>GRANT FUNDS</i>	<i>IN-KIND FUNDS</i>	<i>TOTAL</i>
Rotary clearing and demolition labor	N/A	N/A	\$ -	\$ 25,000.00	\$ 25,000.00
FLDC cleaning, demolition and trash/debris handling	N/A	N/A	\$ -	\$ 10,000.00	\$ 10,000.00
Tower Demo	N/A	N/A	\$ 62,580.00	\$ -	\$ 62,580.00
Installation of concrete block - CMU	N/A	N/A	\$ 14,148.00	\$ -	\$ 14,148.00
Stucco exterior building	N/A	N/A	\$ 63,247.00	\$ -	\$ 63,247.00
Exterior windows - east side of bldg	N/A	N/A	\$ 12,038.05	\$ -	\$ 12,038.05
New shingled and flat roof system	N/A	N/A	\$ 147,420.00	\$ -	\$ 147,420.00
New A/C system on roof/duct work	N/A	N/A	\$ 41,618.76	\$ -	\$ 41,618.76
Front security doors - item and installation	3	\$ 14,798.64	\$ 30,137.28	\$ -	\$ 30,137.28
Painting of exterior building - labor only	N/A	N/A	\$ -	\$ 6,750.00	\$ 6,750.00
Paint for exterior building - supplies	N/A	N/A	\$ 3,000.00	\$ -	\$ 3,000.00
New garage doors - replacement	N/A	N/A	\$ 20,996.00	\$ -	\$ 20,996.00

Wood framing farage doors & windows supplies	N/A	N/A	\$ 2,383.18	\$ -	\$ 2,383.18
Wood framing farage doors & windows labor - FLDC	N/A	N/A	\$ -	\$ 8,000.00	\$ 8,000.00
Overlay parking lots (front & back)	N/A	N/A	\$ 62,463.00	\$ -	\$ 62,463.00
Striping parking lots (front & back)	N/A	N/A	\$ 6,612.50	\$ -	\$ 6,612.50
Exterior electrical upgrade - front & back	N/A	N/A	\$ 19,578.84	\$ -	\$ 19,578.84
Cost escalation - 10%	N/A	N/A	\$ 41,850.00	\$ -	\$ 41,850.00
CONSTRUCTION TASKS TOTAL			\$ 528,072.61	\$ 49,750.00	\$ 577,822.61

ITEMIZED LANDSCAPING

<i>DESCRIPTION</i>	<i>QUANTITY</i>	<i>UNITE PRICE</i>	<i>GRANT FUNDS</i>	<i>IN-KIND FUNDS</i>	<i>TOTAL</i>
White vinyl 6' fence - supplies	N/A	N/A	\$ 19,414.21	\$ -	\$ 19,414.21
White vinyl 6' fence - installation/labor	N/A	N/A	\$ -	\$ 7,000.00	\$ 7,000.00
Concrete for white vinyl fence	N/A	N/A	\$ 1,054.62	\$ -	\$ 1,054.62
Interlocking pavers	N/A	N/A	\$ 17,008.06	\$ -	\$ 17,008.06
Landscaping	N/A	N/A	\$ 1,103.50	\$ 2,400.00	\$ 3,503.50
lanscaping benches for unhomed clients	3	\$ 169.00	\$ 507.00	\$ -	\$ 507.00
Exterior security cameras for unhomed waiting area	3	\$ 150.00	\$ 450.00	\$ -	\$ 450.00
Rotary landscaping /clearing labor	N/A	N/A	\$ -	\$ 25,000.00	\$ 25,000.00
LANDSCAPING TASKS TOTAL			\$ 39,537.39	\$ 34,400.00	\$ 73,937.39

ITEMIZED ADMINISTRATION

<i>DESCRIPTION</i>	<i>QUANTITY</i>	<i>UNITE PRICE</i>	<i>GRANT FUNDS</i>	<i>IN-KIND FUNDS</i>	<i>TOTAL</i>
Construction management - Cleveland Construction Services	N/A	N/A	\$ -	\$ 15,000.00	\$ 15,000.00
Indirect cost - Project financial/fund management - Grant management & reporting	N/A	N/A	\$ 26,988.00	\$ 350.00	\$ 27,338.00
ADMINISTRATION TASKS TOTAL			\$ 26,988.00	\$ 15,350.00	\$ 42,338.00

Florida Dream Center
2023 Organizational Budget
(Operational AND all FOUR programs included)

Expense	2023 Monthly Budget	2023 Yearly Budget
Organizational Expenses		
Payroll	\$ 34,431.41	\$ 413,176.92
Wages	\$ 28,212.45	
Taxes	\$ 6,218.96	
Health Insurance (hlth, vision, dental)	\$ 2,500.00	\$ 30,000.00
Fundraising Cost	\$ 950.00	\$ 11,400.00
Management and General		
Advertising & Promotion	\$ 100.00	\$ 1,200.00
Auto		
Fuel & Tolls	\$ 1,100.00	\$ 13,200.00
Insurance	\$ 6,250.00	\$ 75,000.00
Taxes & Tags	\$ 200.00	\$ 2,400.00
Unscheduled Maintenance	\$ 500.00	\$ 6,000.00
Bank Charges	\$ 25.00	\$ 300.00
Dues & Subscriptions	\$ 500.00	\$ 6,000.00
Insurance (Property/Liability/DI)	\$ 500.00	\$ 6,000.00
Legal & Professional	\$ 500.00	\$ 6,000.00
Maintenance (non-auto)	\$ 500.00	\$ 6,000.00
Meals & Entertainment	\$ 100.00	\$ 1,200.00
Office Expenses		
Office Supplies	\$ 250.00	\$ 3,000.00
Postage & Delivery	\$ 50.00	\$ 600.00
Payroll Fees	\$ 730.00	\$ 8,760.00
Pest Control	\$ 135.00	\$ 1,620.00
Phone/Internet	\$ 275.00	\$ 3,300.00
Travel	\$ 50.00	\$ 600.00
Utilities	\$ 1,000.00	\$ 12,000.00
Admin - VISTA Allotment	\$ 249.34	\$ 2,992.08
AaB - VISTA Allotment	\$ 1,100.00	\$ 13,200.00
Food Bank - VISTA Allotment	\$ 1,300.00	\$ 15,600.00
RA - VISTA Allotment	\$ 1,300.00	\$ 15,600.00
AaB - Program supplies, material, Items, etc	\$ 500.00	\$ 6,000.00
FB- Program supplies, material, Items, etc	\$ 400.00	\$ 4,800.00
RA - Program supplies, material, Items, etc	\$ 167.00	\$ 2,004.00
WRT - Program supplies, material, Items, etc	\$ 10,463.00	\$ 125,556.00
HUD - Program supplies, material, Items, etc	\$ 10,000.00	\$ 120,000.00
Baseline Budget TOTAL	\$ 76,125.75	\$ 913,509.00



2023

Board of Directors Contact List

Name	Position	Term Start Date	Notes
Steve Cleveland 727-307-2741	Executive Director, Florida Dream Center	09/01/2014	4017 56 th Ave N. St. Petersburg FL 33714 sjcleveland@floridadreamcenter.org
Dan Graham 813-470-0091	Board Member Financial Advisor	05/02/2019	Principal Securities 4010 Boy Scout Blvd, Ste 750 Tampa, FL 33607 graham.dan@principal.com
Samantha Chechele 727-644-4482 727-381-6001	Board Chair Attorney	01/21/2015	Chechele Law – Owner 7127 1 st Ave S St. Petersburg, FL 33707 samantha@chechelelaw.com <i>(Please cc Samantha's assistant, Alexis - alexis@chechelelaw.com)</i>
Phil Palm 727-638-2207	Board Member Business Developer	04/15/2013	Business Developer 809 Camelia Dr. Largo, FL 33770 727-638-2207 phil@pfpalm.com
Clete Goddard 813-442-1516	Board Member HR Professional	01/01/2022	Modern Business Associates 9455 Koger Blvd N, #200 St. Petersburg, FL 33714 Cletegoddard@gmail.com
Dr. Scott Fronrath 561-262-7667	Board Member College Educator	01/01/2022	Nova Southeastern University 3301 College Ave Fort Lauderdale, FL 33314 fronrath@nova.edu
Jessie Bowden 727-204-7222	Board Member Attorney	01/01/2022	Bowden Barlow Law, P.A. 3845 5 th Ave N St. Petersburg, FL 33714 jbowden@bowdenbarlow.com
Danilo Felix 813-410-4228	Board Member Chaplain	03/01/2022	Athletes in Action, Tampa Bay Rowdies Chaplain 230 1 st SE St. Petersburg, FL 33701 danilo.felix@athletesinaction.org

FLDC is currently recruiting and interviewing potential board members.

Marsocci, Appleby and Company, PA
3815 West Humphrey Street, Suite 101
Tampa, FL 33614
813-932-2116

August 31, 2022

CONFIDENTIAL

FLORIDA DREAM CENTER INC
4017 56TH AVE N
ST PETERSBURG, FL 33714

Dear Client:

We have prepared the following returns from information provided by you without verification or audit.

Return of Organization Exempt From Income Tax (Form 990)

We suggest that you examine these returns carefully to fully acquaint yourself with all items contained therein to ensure that there are no omissions or misstatements. Attached are instructions for signing and filing each return. Please follow those instructions carefully.

Enclosed is any material you furnished for use in preparing the returns. If the returns are examined, requests may be made for supporting documentation. Therefore, we recommend that you retain all pertinent records for at least seven years.

In order that we may properly advise you of tax considerations, please keep us informed of any significant changes in your financial affairs or of any correspondence received from taxing authorities.

If you have any questions, or if we can be of assistance in any way, please call.

Sincerely,

Marsocci, Appleby + Company P.A
Marsocci, Appleby and Company, PA

Filing Instructions

FLORIDA DREAM CENTER INC

Exempt Organization Tax Return

Taxable Year Ended December 31, 2021

Date Due: November 15, 2022

Remittance: None is required. Your Form 990 for the tax year ended 12/31/21 shows no balance due.

Signature: You are using a Personal Identification Number (PIN) for signing your return electronically. Form 8879-TE, IRS *e-file* Signature Authorization for an Exempt Organization should be signed and dated by an authorized officer of the organization and returned to:

Marsocci, Appleby and Company, PA
3815 West Humphrey Street, Suite 101
Tampa, FL 33614

Important: Your return will not be filed with the IRS until the signed Form 8879-TE has been received by this office.

Other: Your return is being filed electronically with the IRS and is not required to be mailed. If you Mail a paper copy of your return to the IRS it will delay the processing of your return.

Forms 990 / 990-EZ Return Summary

For calendar year 2021, or tax year beginning _____, and ending _____

46-0663472

FLORIDA DREAM CENTER INC

Net Asset / Fund Balance at Beginning of Year 376,018

Revenue

Contributions	<u>4,053,450</u>
Program service revenue	_____
Investment income	_____
Capital gain / loss	_____
Fundraising / Gaming:	
Gross revenue	_____
Direct expenses	_____
Net income	_____
Other income	<u>11,284</u>

Total revenue 4,064,734

Expenses

Program services	<u>3,919,493</u>
Management and general	<u>192,685</u>
Fundraising	_____

Total expenses 4,112,178

Excess / (deficit) -47,444

Changes _____

Net Asset / Fund Balance at End of Year 328,574

Reconciliation of Revenue

Total revenue per financial statements	_____
Less:	
Unrealized gains	_____
Donated services	_____
Recoveries	_____
Other	_____
Plus:	
Investment expenses	_____
Other	_____
Total revenue per return	<u><u>4,064,734</u></u>

Reconciliation of Expenses

Total expenses per financial statements	_____
Less:	
Donated services	_____
Prior year adjustments	_____
Losses	_____
Other	_____
Plus:	
Investment expenses	_____
Other	_____
Total expenses per return	<u><u>4,112,178</u></u>

Balance Sheet

	Beginning	Ending	Differences
Assets	<u>384,632</u>	<u>335,319</u>	
Liabilities	<u>8,614</u>	<u>6,745</u>	
Net assets	<u><u>376,018</u></u>	<u><u>328,574</u></u>	<u><u>-47,444</u></u>

Miscellaneous Information

Amended return _____
 Return / extended due date 11/15/22
 Failure to file penalty _____

Form **8879-TE**

IRS e-file Signature Authorization for a Tax Exempt Entity

OMB No. 1545-0047

For calendar year 2021, or fiscal year beginning _____, 2021, and ending _____, 20

▶ Do not send to the IRS. Keep for your records.
▶ Go to www.irs.gov/Form8879TE for the latest information.

2021

Department of the Treasury
Internal Revenue Service
Name of filer

FLORIDA DREAM CENTER INC

EIN or SSN
46-0663472

Name and title of officer or person subject to tax
**STEVE CLEVELAND
CHIEF EXEC. OFFICER**

Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a Form 990 check here	<input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	<u>4,064,734</u>
2a Form 990-EZ check here	<input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check here	<input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here	<input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a Form 8868 check here	<input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b	
6a Form 990-T check here	<input type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4)	6b	
7a Form 4720 check here	<input type="checkbox"/>	b Total tax (Form 4720, Part III, line 1)	7b	
8a Form 5227 check here	<input type="checkbox"/>	b FMV of assets at end of tax year (Form 5227, Item D)	8b	
9a Form 5330 check here	<input type="checkbox"/>	b Tax due (Form 5330, Part II, line 19)	9b	
10a Form 8038-CP check here	<input type="checkbox"/>	b Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b	

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that I am an officer of the above entity or I am a person subject to tax with respect to (name of entity) _____, (EIN) _____ and that I have examined a copy of the 2021 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

I authorize MARSOCCI, APPELBY AND COMPANY, PA to enter my PIN 00088 as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax ▶ _____ Date ▶ 08/31/22

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

50324203815

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2021 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶  Date ▶ 08/31/22

**ERO Must Retain This Form — See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So**

Form **990**

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

2021
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2021 calendar year, or tax year beginning _____, and ending _____

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization: **FLORIDA DREAM CENTER INC**

Doing business as _____

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
4017 56TH AVE N

City or town, state or province, country, and ZIP or foreign postal code
ST PETERSBURG FL 33714

D Employer identification number: **46-0663472**

E Telephone number: **727-851-9074**

F Name and address of principal officer:
STEVE CLEVELAND
704 23RD STREET SW
LARGO FL 33770

H(a) Is this a group return for subordinates? Yes No
 H(b) Are all subordinates included? Yes No
 If "No," attach a list. See instructions.

G Gross receipts \$ **4,064,734**

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: **WWW.FLORIDADREAMCENTER.ORG**

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: **2012**

M State of legal domicile: **FL**

H(c) Group exemption number ▶

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O			
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
	3	Number of voting members of the governing body (Part VI, line 1a)	12	
	4	Number of independent voting members of the governing body (Part VI, line 1b)	12	
	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)	19	
	6	Total number of volunteers (estimate if necessary)	5660	
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	0	
7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	0		
Revenue	8	Contributions and grants (Part VIII, line 1h)	4,112,561	4,053,450
	9	Program service revenue (Part VIII, line 2g)		0
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	85	0
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		11,284
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,112,646	4,064,734
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	298,923	306,981
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0
	16b	Total fundraising expenses (Part IX, column (D), line 25) ▶	0	
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	3,619,696	3,805,197	
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	3,918,619	4,112,178	
19	Revenue less expenses. Subtract line 18 from line 12	194,027	-47,444	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	384,632	335,319
	21	Total liabilities (Part X, line 26)	8,614	6,745
	22	Net assets or fund balances. Subtract line 21 from line 20	376,018	328,574

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer: **STEVE CLEVELAND** Date: _____
 Type or print name and title: **CHIEF EXEC. OFFICER**

Paid Preparer Use Only

Print/Type preparer's name: **GERALD L APPELBY** Preparer's signature: *G Appelby* Date: **08/31/22** Check if self-employed PTIN: **P01057535**

Firm's name: **MARSOCCI, APPELBY AND COMPANY, PA** Firm's EIN: **46-3981960**
 Firm's address: **3815 WEST HUMPHREY STREET, SUITE 101 TAMPA, FL 33614** Phone no: **813-932-2116**

May the IRS discuss this return with the preparer shown above? See instructions Yes No

For Paperwork Reduction Act Notice, see the separate instructions.

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

1 Briefly describe the organization's mission:

SEE SCHEDULE O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ including grants of \$) (Revenue \$)

SEE SCHEDULE O

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

N/A

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

N/A

4d Other program services (Describe on Schedule O.)

(Expenses \$ **3,919,493** including grants of \$) (Revenue \$)

4e Total program service expenses **▶ 3,919,493**

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	<input type="checkbox"/>	<input checked="" type="checkbox"/>
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	<input type="checkbox"/>	<input checked="" type="checkbox"/>
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	<input type="checkbox"/>	<input checked="" type="checkbox"/>
14a Did the organization maintain an office, employees, or agents outside of the United States?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	<input type="checkbox"/>	<input checked="" type="checkbox"/>
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	<input type="checkbox"/>	<input checked="" type="checkbox"/>
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	<input type="checkbox"/>	<input checked="" type="checkbox"/>
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	<input type="checkbox"/>	<input checked="" type="checkbox"/>
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	<input type="checkbox"/>	<input checked="" type="checkbox"/>
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	<input type="checkbox"/>	<input checked="" type="checkbox"/>
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	<input type="checkbox"/>	<input type="checkbox"/>
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV		X
b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV		X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		X

1a	6
1b	0

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	19		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.	2b		X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a			X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			X
b	If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a			X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	Organizations that may receive deductible contributions under section 170(c).				
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8			
9	Sponsoring organizations maintaining donor advised funds.				
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b			
10	Section 501(c)(7) organizations. Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b			
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15			X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16			X
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17			

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	12		
Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
1b	12		
Enter the number of voting members included on line 1a, above, who are independent			
2			X
Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?			
3			X
Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?			
4			X
Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			
5			X
Did the organization become aware during the year of a significant diversion of the organization's assets?			
6			X
Did the organization have members or stockholders?			
7a			X
Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?			
7b			X
Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?			
8			
Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
8a		X	
a The governing body?			
8b		X	
b Each committee with authority to act on behalf of the governing body?			
9		X	
Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O			

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a			X
Did the organization have local chapters, branches, or affiliates?			
10b			
If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?			
11a		X	
Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?			
12a		X	
Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12b		X	
Did the organization have a written conflict of interest policy? If "No," go to line 13			
12c			X
Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?			
13			X
Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done			
14			X
Did the organization have a written whistleblower policy?			
15a			X
Did the organization have a written document retention and destruction policy?			
15b			X
If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a			X
Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
16b			
a The organization's CEO, Executive Director, or top management official			
b Other officers or key employees of the organization			
Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?			
If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?			

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed ► **FL**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records ►
STEVE CLEVELAND **4017 56TH AVE N**
ST PETERSBURG **FL 33714** **727-851-9074**

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) STEVE CLEVELAND CHIEF EXEC. OFFICER	40.00 0.00	X		X				94,527	0	0
(2) ZELDA O'CONNELL COO	40.00 0.00			X				59,700	0	0
(3) WILLIAM LOSASSO FOUNDER	20.00 0.00	X		X				12,762	0	0
(4) JESSIE BOWDEN BOARD MEMBER	10.00 0.00	X						0	0	0
(5) SAMANTHA CHECHELE BOARD CHAIR	10.00 0.00	X						0	0	0
(6) DANILO FELIX BOARD MEMBER	10.00 0.00	X						0	0	0
(7) DR. SCOTT FRONRATH BOARD MEMBER	10.00 0.00	X						0	0	0
(8) ERIC GIBSON ADVISORY BOARD	10.00 0.00	X						0	0	0
(9) CLETE GODDARD BOARD MEMBER	10.00 0.00	X						0	0	0
(10) DAN GRAHAM BOARD MEMBER	10.00 0.00	X						0	0	0
(11) SARAH LYONS BOARD MEMBER	10.00 0.00	X						0	0	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) PHILIP PALM	10.00									
BOARD MEMBER	0.00	X					0	0	0	
(13) PAIGE TUCKER	10.00									
BOARD SEC & TREAS	0.00	X		X			0	0	0	
1b Subtotal							166,989			
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)							166,989			

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **0**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	54,900				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	3,998,550				
	g Noncash contributions included in lines 1a-1f	1g	\$ 3,299,815				
	h Total. Add lines 1a-1f		4,053,450				
	Program Service Revenue	2a	Business Code				
b							
c							
d							
e							
f All other program service revenue							
g Total. Add lines 2a-2f							
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)						
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents	6a	(i) Real (ii) Personal				
		b Less: rental expenses	6b				
		c Rental inc. or (loss)	6c				
	d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory	7a	(i) Securities (ii) Other				
		b Less: cost or other basis and sales exps.	7b				
		c Gain or (loss)	7c				
	d Net gain or (loss)						
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	8a					
		b Less: direct expenses	8b				
	c Net income or (loss) from fundraising events						
	9a Gross income from gaming activities. See Part IV, line 19	9a					
b Less: direct expenses		9b					
c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances	10a						
	b Less: cost of goods sold	10b					
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11a T-SHIRT SALES	Business Code	10,273			10,273	
	b OTHER INCOME		1,011			1,011	
	c						
	d All other revenue						
	e Total. Add lines 11a-11d		11,284				
12 Total revenue. See instructions		4,064,734	0	0	11,284		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	166,990	155,166	11,824	
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	139,991	128,351	11,640	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees):				
a	Management				
b	Legal	10,776		10,776	
c	Accounting				
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion	690		690	
13	Office expenses	6,236		6,236	
14	Information technology	2,800		2,800	
15	Royalties				
16	Occupancy	31,530	26,800	4,730	
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	1,555		1,555	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	37,651	32,003	5,648	
23	Insurance	82,949	58,221	24,728	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a	IN-KIND	3,268,283	3,187,721	80,562	
b	SUPPLIES HOUSING	215,776	215,776		
c	AUTO EXPENSE	62,520	61,373	1,147	
d	UTILITIES	32,252	24,530	7,722	
e	All other expenses	52,179	29,552	22,627	
25	Total functional expenses. Add lines 1 through 24e	4,112,178	3,919,493	192,685	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year		
Assets	1	Cash—non-interest-bearing	169,795	1	126,417	
	2	Savings and temporary cash investments		2		
	3	Pledges and grants receivable, net	105,772	3	87,280	
	4	Accounts receivable, net		4		
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5		
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6		
	7	Notes and loans receivable, net		7		
	8	Inventories for sale or use		8		
	9	Prepaid expenses and deferred charges	3,077	9	3,077	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	311,016		
	b	Less: accumulated depreciation	10b	192,471	10c	118,545
	11	Investments—publicly traded securities		11		
	12	Investments—other securities. See Part IV, line 11		12		
	13	Investments—program-related. See Part IV, line 11		13		
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11		15		
16	Total assets. Add lines 1 through 15 (must equal line 33)	384,632	16	335,319		
Liabilities	17	Accounts payable and accrued expenses	8,614	17	6,745	
	18	Grants payable		18		
	19	Deferred revenue		19		
	20	Tax-exempt bond liabilities		20		
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21		
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22		
	23	Secured mortgages and notes payable to unrelated third parties		23		
	24	Unsecured notes and loans payable to unrelated third parties		24		
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25		
	26	Total liabilities. Add lines 17 through 25	8,614	26	6,745	
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.					
	27	Net assets without donor restrictions	376,018	27	328,574	
	28	Net assets with donor restrictions		28		
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.					
	29	Capital stock or trust principal, or current funds		29		
	30	Paid-in or capital surplus, or land, building, or equipment fund		30		
	31	Retained earnings, endowment, accumulated income, or other funds		31		
32	Total net assets or fund balances	376,018	32	328,574		
33	Total liabilities and net assets/fund balances	384,632	33	335,319		

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,064,734
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,112,178
3	Revenue less expenses. Subtract line 2 from line 1	3	-47,444
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	376,018
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	328,574

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

SCHEDULE A
(Form 990)

Public Charity Status and Public Support

OMB No 1545-0047

2021

Open to Public Inspection

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization

FLORIDA DREAM CENTER INC

Employer identification number

46-0663472

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)
- 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
- 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2,094,230	2,738,206	3,751,479	4,112,561	4,053,450	16,749,926
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	2,094,230	2,738,206	3,751,479	4,112,561	4,053,450	16,749,926
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						16,749,926

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4	2,094,230	2,738,206	3,751,479	4,112,561	4,053,450	16,749,926
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on	3,178				10,284	13,462
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						16,763,388
12 Gross receipts from related activities, etc. (see instructions)					12	4,504
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2021 (line 6, column (f) divided by line 11, column (f))	14	99.92%
15 Public support percentage from 2020 Schedule A, Part II, line 14	15	99.08%
16a 33 1/3% support test—2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>		
b 33 1/3% support test—2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

15 Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2020 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2020 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests—2021. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2020. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.		
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?	11a	
b	A family member of a person described on line 11a above?	11b	
c	A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>	11c	

Section B. Type I Supporting Organizations

		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>	1	
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>	2	

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>	1	

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>	2	
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>	3	

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
2	Activities Test. Answer lines 2a and 2b below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	2a	
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>	2b	
3	Parent of Supported Organizations. Answer lines 3a and 3b below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No," provide details in Part VI.</i>	3a	
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>	3b	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D – Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required—provide details in Part VI)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2021 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1 Distributable amount for 2021 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2021 (reasonable cause required—explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2021			
a From 2016			
b From 2017			
c From 2018			
d From 2019			
e From 2020			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2021 distributable amount			
i Carryover from 2016 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2021 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2021 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2021 Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2022. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2017			
b Excess from 2018			
c Excess from 2019			
d Excess from 2020			
e Excess from 2021			

**Schedule B
(Form 990)**Department of the Treasury
Internal Revenue Service**Schedule of Contributors**

OMB No. 1545-0047

2021

▶ Attach to Form 990 or Form 990-PF.

▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization

FLORIDA DREAM CENTER INC

Employer identification number

46-0663472

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

 501(c)(3) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization

Form 990-PF

 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

-
- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

-
- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33
- ¹
- /
- ₃
- % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

-
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000
- exclusively*
- for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

-
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions
- exclusively*
- for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an
- exclusively*
- religious, charitable, etc., purpose. Don't complete any of the parts unless the
- General Rule**
- applies to this organization because it received
- nonexclusively*
- religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2021)

Name of organization

FLORIDA DREAM CENTER INC

Employer identification number

46-0663472

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	PINELLAS COUNTY EX OFFENDER 128140 US HWY 19 CLEARWATER FL 33764	\$ 82,027	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	UW SUNCOAST OF FLORIDA 5201 W KENNEDY BLVD. TAMPA FL 33609	\$ 114,260	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	PINEALL COMMUNITY FOUNDATION 201 N FRANKLIN ST TAMPA FL 33602	\$ 87,212	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	PINEALL COUNTY BD OF COUNTY COMMI 315 COURT ST #501 CLEARWATER FL 33756	\$ 108,662	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	PUBLIX SUPER MARKET CORPORATE OFFICE LAKELAND FL 33802-0407	\$ 15,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization

FLORIDA DREAM CENTER INC

Employer identification number

46-0663472

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 2 columns: Description, Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year., 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?, 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 2 columns: Description, Amount. Rows include: 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items., 1b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1, (ii) Assets included in Form 990, Part X, 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1, b Assets included in Form 990, Part X

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment %
 - b Permanent endowment %
 - c Term endowment %
- The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) Unrelated organizations	3a(i)	
(ii) Related organizations	3a(ii)	
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b	

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		311,016	192,471	118,545
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				118,545

Part VII Investments – Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments – Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No 1545-0074

2021

**Open To Public
Inspection**

Department of the Treasury
Internal Revenue Service
Name of the organization

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

FLORIDA DREAM CENTER INC

Employer identification number
46-0663472

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods	X		263,967	
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory	X	1	2,679,262	
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ ()	X	5	356,586	
26 Other ▶ ()				
27 Other ▶ ()				
28 Other ▶ ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?

	Yes	No
30a		X

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

31		X
----	--	----------

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

32a		X
-----	--	----------

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

**SCHEDULE O
(Form 990)**Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2021Open to Public
Inspection

Name of the organization

FLORIDA DREAM CENTER INC

Employer identification number

46-0663472**FORM 990 - ORGANIZATION'S MISSION**

FLORIDA DREAM CENTER INSPIRES SELF-SUFFICIENCY BY SHARING FAITH THROUGH
RESOURCES AND RESTORING HOPE IN COMMUNITIES.

NEW VISION:

AN EMPOWERED COMMUNITY WHERE NEIGHBORS HELP NEIGHBORS.

FORM 990, PART III, LINE 4A - FIRST ACCOMPLISHMENT

THIS YEAR THE ADOPT-A-BLOCK PROGRAM REACHED OUT TO MULTIPLE POCKETS OF
POVERTY WITHIN PINELLAS COUNTY IN NEED OF ASSISTANCE. OVER 5,660 VOLUNTEERS
DONATED 19,013 HOURS TO AID COMMUNITIES, NEIGHBORHOODS, AND FAMILIES EVERY
SATURDAY. THIS AID INCLUDED IMMEDIATE NEEDS SUCH AS FOOD, CLOTHING AND
HYGIENE AS WELL AS CASE MANAGEMENT, STREET CLEAN-UP, HOME REPAIRS, AND LAWN
MAINTENANCE. A TOTAL OF 60 TONS OF DEBRIS WAS REMOVED FROM COMMUNITY
STREETS, ALLEYS AND LOTS. THROUGH THIS PROGRAM 58 HOMES WERE REVITALIZED;
35 ALLEYS WERE CLEARED AND 6 CODE ENFORCEMENT VIOLATIONS WERE RECTIFIED.
THERE WERE 5,365 TOTAL CASE MANAGEMENT ASSISTANCE PROVIDED, 767 PINELLAS
COUNTY CHILDREN GIVEN CHRISTMAS GIFTS, AND 1,962 THANKSGIVING AND CHRISTMAS
TURKEY BOXES DISTRIBUTED TO PINELLAS COUNTY RESIDENTS.

THIS YEAR THE MOBILE FOOD PANTRY PROGRAM COLLECTED 1,191,678 POUNDS OF FOOD
SET TO BE DISCARDED FROM LOCAL FOOD RETAILERS. THIS FOOD, AS WELL AS FOOD
DONATED FROM FOOD DRIVES AND PRIVATE DONORS, RESULTED IN A TOTAL OF
1,444,479 POUNDS BEING DISTRIBUTED TO INDIVIDUALS AND FAMILIES FACING
HUNGER DAILY. THIS DISTRIBUTION INCLUDED DIRECT CLIENTELE AS WELL AS

Name of the organization

FLORIDA DREAM CENTER INC

Employer identification number

46-0663472

SMALLER PANTRIES AND CHURCHES IN NEED OF SUPPORT.

THIS YEAR OUR WORK READINESS TRAINING PROGRAM REACHED ACCREDITATION STATUS THROUGH THE NATIONAL CENTER FOR CONSTRUCTION RESEARCH AND EDUCATION. THIS ACCREDITATION ALLOWED US TO PROVIDE 88 POST-SECONDARY TRADE CERTIFICATIONS, 34 OSHA-APPROVED FORKLIFT OPERATOR'S LICENSES, PLACE 40 INDIVIDUALS IN TRADE-CENTERED EMPLOYMENT, AND ASSIST 164 LOW-INCOME INDIVIDUALS WITH BASIC CAREER SERVICES.

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENTS
CHARITABLE AND SOCIAL SERVICES

FORM 990, PART VI, LINE 9 - OFFICERS WHO CANNOT BE REACHED
CLETE GODDARD
9455 KOGER BLVD
SAINT PETERSBURG, FL 33717

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
01. FORM 990 GOVERNING BODY REVIEW (PART VI, LINE 11) THE RETURN IS PROVIDED TO THE GOVERNING BOARD FOR REVIEW AND SIGNATURE OF CHAIR BEFORE FILING.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

Form **4562**

Depreciation and Amortization
(Including Information on Listed Property)

OMB No. 1545-0172

2021

Department of the Treasury
Internal Revenue Service (99)

▶ Attach to your tax return.

▶ Go to www.irs.gov/Form4562 for instructions and the latest information.

Attachment Sequence No **179**

Name(s) shown on return

FLORIDA DREAM CENTER INC

Identifying number

46-0663472

Business or activity to which this form relates

INDIRECT DEPRECIATION

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	1,050,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,620,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2020 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2022. Add lines 9 and 10, less line 12	▶ 13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2021	17	3,951
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here	▶ <input type="checkbox"/>	

Section B—Assets Placed in Service During 2021 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2021 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year			30 yrs.	MM	S/L	
d 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	3,951
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

DAA

Federal Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per Conv	Meth	Prior	Current
Prior MACRS:											
1	FORD E350	4/01/16	2,861		X		1,430	5	HY 200DB	2,779	82
2	RYDER BOX TRUCK	7/25/16	31,752		X		15,876	5	HY 200DB	30,772	980
3	MITSUBISHI BOX TRUCK	9/09/16	28,000		X		14,000	5	HY 200DB	27,194	806
4	SMALL TOOLS	9/09/16	4,180		X		2,090	7	HY 200DB	3,714	186
6	EQUIPMENT	5/25/16	15,500		X		7,750	7	HY 200DB	13,771	691
7	COMMERCIAL REFRIGERATOR	8/05/15	11,023		X		5,511	7	HY 200DB	10,285	492
8	CHEST FREEZER	12/27/15	520		X		260	7	MQ200DB	477	23
11	OFFICE FURNITURE	12/31/14	28,010		X		14,005	7	HY 200DB	27,385	625
12	JP DONATED VEHICLE	6/13/14	2,500		X		1,250	5	HY 200DB	2,500	0
13	EXPRESS TRAILERS	12/16/14	1,187		X		593	5	HY 200DB	1,187	0
14	SB DONATED VEHICLE	12/31/14	1,173		X		586	5	HY 200DB	1,173	0
17	REFRIGERATOR	5/31/17	460		X		230	7	MQ200DB	391	21
18	ICE MACHINE	11/25/17	826		X		0	7	MQ200DB	826	0
19	GATOR TRAILER	6/08/17	999		X		499	7	MQ200DB	849	45
20	2017 T-350 #6061	11/30/17	38,155		X		0	5	MQ200DB	38,155	0
21	FREEZER FOOD PANTRY	11/26/18	1,296		X		0	7	MQ200DB	1,296	0
22	WALK IN COOLER	4/01/18	4,100		X		0	7	MQ200DB	4,100	0
23	DELL COMPUTER OFFICE	6/15/18	1,099		X		0	7	MQ200DB	1,099	0
24	DELL COMPUTER STEVE	6/06/18	1,099		X		0	7	MQ200DB	1,099	0
25	TRAILER-GATOR TAIL	5/14/18	1,050		X		0	7	MQ200DB	1,050	0
26	2017 FORD TRANSIT VAN	10/25/18	26,950		X		0	5	MQ200DB	26,950	0
			<u>202,740</u>				<u>64,080</u>			<u>197,052</u>	<u>3,951</u>
Other Depreciation:											
27	Impact Capopis 2 New Tents	10/28/19	0				0	0	HY	0	0
28	2 New Freezers Food Pantry	10/21/19	0				0	0	HY	0	0
29	A/C Server Room	7/19/20	0				0	0	HY	0	0
30	Ice Machine	7/19/20	0				0	0	HY	0	0
31	Pallet Jack - Food Pantry	12/01/20	0				0	0	HY	0	0
32	Pallet Jack - Food Pantry	12/16/20	0				0	0	HY	0	0
33	Store Shelves	1/13/20	0				0	0	HY	0	0
34	Walkin Cooler - Aab Condensor	12/15/20	0				0	0	HY	0	0
35	Walkin Cooler - Alpha Foods	8/08/20	0				0	0	HY	0	0
36	2004 Ford Expedition	6/11/20	0				0	0	HY	0	0
37	2007 Chevy Avalanche	3/05/20	0				0	0	HY	0	0
38	JOHN DEERE Z930M ZTRAK	5/11/20	0				0	0	HY	0	0
39	ECHO BEARCAT CH5627	5/11/20	0				0	0	HY	0	0
40	WALK IN COOLER CONDENSOR AND	12/11/20	0				0	0	HY	0	0
41	Food Box Racks	12/02/21	0				0	0	HY	0	0
42	Computers	10/01/21	0				0	0	HY	0	0
43	14 Laptops	11/18/21	0				0	0	HY	0	0
44	Chevy Cargo Van 2021	7/28/21	0				0	0	HY	0	0
	Total Other Depreciation		<u>0</u>				<u>0</u>			<u>0</u>	<u>0</u>
	Total ACRS and Other Depreciation		<u>0</u>				<u>0</u>			<u>0</u>	<u>0</u>
	Grand Totals		202,740				64,080			197,052	3,951
	Less: Dispositions and Transfers		0				0			0	0
	Less: Start-up/Org Expense		0				0			0	0
	Net Grand Totals		<u>202,740</u>				<u>64,080</u>			<u>197,052</u>	<u>3,951</u>

AMT Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179B	Bonus	Basis for Depr	PerConv	Meth	Prior	Current
Prior MACRS:											
1	FORD E350	4/01/16	2,861			X	1,430	5	HY 200DB	2,779	82
2	RYDER BOX TRUCK	7/25/16	31,752			X	15,876	5	HY 200DB	30,772	980
3	MITSUBISHI BOX TRUCK	9/09/16	28,000			X	14,000	5	HY 200DB	27,194	806
4	SMALL TOOLS	9/09/16	4,180			X	2,090	7	HY 200DB	3,714	186
6	EQUIPMENT	5/25/16	15,500			X	7,750	7	HY 200DB	13,771	691
7	COMMERCIAL REFRIGERATOR	8/05/15	11,023			X	5,511	7	HY 200DB	10,285	492
8	CHEST FREEZER	12/27/15	520			X	260	7	MQ200DB	477	23
11	OFFICE FURNITURE	12/31/14	28,010			X	14,005	7	HY 200DB	27,385	625
12	JP DONATED VEHICLE	6/13/14	2,500			X	1,250	5	HY 200DB	2,500	0
13	EXPRESS TRAILERS	12/16/14	1,187			X	593	5	HY 200DB	1,187	0
14	SB DONATED VEHICLE	12/31/14	1,173			X	586	5	HY 200DB	1,173	0
17	REFRIGERATOR	5/31/17	460			X	230	7	MQ200DB	391	21
18	ICE MACHINE	11/25/17	826			X	0	7	MQ200DB	826	0
19	GATOR TRAILER	6/08/17	999			X	499	7	MQ200DB	849	45
20	2017 T-350 #6061	11/30/17	38,155			X	0	5	MQ200DB	38,155	0
21	FREEZER FOOD PANTRY	11/26/18	1,296			X	0	7	MQ200DB	1,296	0
22	WALK IN COOLER	4/01/18	4,100			X	0	7	MQ200DB	4,100	0
23	DELL COMPUTER OFFICE	6/15/18	1,099			X	0	7	MQ200DB	1,099	0
24	DELL COMPUTER STEVE	6/06/18	1,099			X	0	7	MQ200DB	1,099	0
25	TRAILER-GATOR TAIL	5/14/18	1,050			X	0	7	MQ200DB	1,050	0
26	2017 FORD TRANSIT VAN	10/25/18	26,750			X	0	5	MQ200DB	26,750	0
			<u>202,540</u>				<u>64,080</u>			<u>196,852</u>	<u>3,951</u>
Other Depreciation:											
27	Impact Capopis 2 New Tents	10/28/19	0				0	0	HY	0	0
28	2 New Freezers Food Pantry	10/21/19	0				0	0	HY	0	0
29	A/C Server Room	7/19/20	0				0	0	HY	0	0
30	Ice Machine	7/19/20	0				0	0	HY	0	0
31	Pallet Jack - Food Pantry	12/01/20	0				0	0	HY	0	0
32	Pallet Jack - Food Pantry	12/16/20	0				0	0	HY	0	0
33	Store Shelves	1/13/20	0				0	0	HY	0	0
34	Walkin Cooler - Aab Condensor	12/15/20	0				0	0	HY	0	0
35	Walkin Cooler - Alpha Foods	8/08/20	0				0	0	HY	0	0
36	2004 Ford Expedition	6/11/20	0				0	0	HY	0	0
37	2007 Chevy Avalanche	3/05/20	0				0	0	HY	0	0
38	JOHN DEERE Z930M ZTRAK	5/11/20	0				0	0	HY	0	0
39	ECHO BEARCAT CH5627	5/11/20	0				0	0	HY	0	0
40	WALK IN COOLER CONDENSOR AND	12/11/20	0				0	0	HY	0	0
41	Food Box Racks	12/02/21	0				0	0	HY	0	0
42	Computers	10/01/21	0				0	0	HY	0	0
43	14 Laptops	11/18/21	0				0	0	HY	0	0
44	Chevy Cargo Van 2021	7/28/21	0				0	0	HY	0	0
	Total Other Depreciation		<u>0</u>				<u>0</u>			<u>0</u>	<u>0</u>
	Total ACRS and Other Depreciation		<u>0</u>				<u>0</u>			<u>0</u>	<u>0</u>
	Grand Totals		202,540				64,080			196,852	3,951
	Less: Dispositions and Transfers		<u>0</u>				<u>0</u>			<u>0</u>	<u>0</u>
	Net Grand Totals		<u>202,540</u>				<u>64,080</u>			<u>196,852</u>	<u>3,951</u>

Bonus Depreciation Report**Form 990, Page 1**

Asset	Property Description	Date In Service	Tax Cost	Bus Pct	Tax Sec 179 Exp	Current Bonus	Prior Bonus	Tax - Basis for Depr
1	FORD E350	4/01/16	2,861		0	0	1,431	1,430
2	RYDER BOX TRUCK	7/25/16	31,752		0	0	15,876	15,876
3	MINI COOPER	9/09/16	28,000		0	0	14,000	14,000
4	SMALL TOOLS	9/09/16	4,180		0	0	2,090	2,090
6	EQUIPMENT	5/25/16	15,500		0	0	7,750	7,750
7	COMMERCIAL REFRIGERATOR	8/05/15	11,023		0	0	5,512	5,511
8	CHEST FREEZER	12/27/15	520		0	0	260	260
11	OFFICE FURNITURE	12/31/14	28,010		0	0	14,005	14,005
12	JP DONATED VEHICLE	6/13/14	2,500		0	0	1,250	1,250
13	EXPRESS TRAILERS	12/16/14	1,187		0	0	594	593
14	SB DONATED VEHICLE	12/31/14	1,173		0	0	587	586
17	REFRIGERATOR	5/31/17	460		0	0	230	230
18	ICE MACHINE	11/25/17	826		0	0	826	0
19	GATOR TRAILER	6/08/17	999		0	0	500	499
20	2017 T-350 #6061	11/30/17	38,155		0	0	38,155	0
21	FREEZER FOOD PANTRY	11/26/18	1,296		0	0	1,296	0
22	WALK IN COOLER	4/01/18	4,100		0	0	4,100	0
23	DELL COMPUTER OFFICE	6/15/18	1,099		0	0	1,099	0
24	DELL COMPUTER STEVE	6/06/18	1,099		0	0	1,099	0
25	TRAILER-GATOR TAIL	5/14/18	1,050		0	0	1,050	0
26	2017 FORD TRANSIT VAN	10/25/18	26,950		0	0	26,950	0
Grand Total			<u>202,740</u>		<u>0</u>	<u>0</u>	<u>138,660</u>	<u>64,080</u>

Depreciation Adjustment Report**All Business Activities**

<u>Form</u>	<u>Unit</u>	<u>Asset</u>	<u>Description</u>	<u>Tax</u>	<u>AMT</u>	<u>AMT Adjustments/ Preferences</u>
MACRS Adjustments:						
Page 1	1	1	FORD E350	82	82	0
Page 1	1	2	RYDER BOX TRUCK	980	980	0
Page 1	1	3	MITSUBISHI BOX TRUCK	806	806	0
Page 1	1	4	SMALL TOOLS	186	186	0
Page 1	1	6	EQUIPMENT	691	691	0
Page 1	1	7	COMMERCIAL REFRIGERATOR	492	492	0
Page 1	1	8	CHEST FREEZER	23	23	0
Page 1	1	11	OFFICE FURNITURE	625	625	0
Page 1	1	12	JP DONATED VEHICLE	0	0	0
Page 1	1	13	EXPRESS TRAILERS	0	0	0
Page 1	1	14	SB DONATED VEHICLE	0	0	0
Page 1	1	17	REFRIGERATOR	21	21	0
Page 1	1	18	ICE MACHINE	0	0	0
Page 1	1	19	GATOR TRAILER	45	45	0
Page 1	1	20	2017 T-350 #6061	0	0	0
Page 1	1	21	FREEZER FOOD PANTRY	0	0	0
Page 1	1	22	WALK IN COOLER	0	0	0
Page 1	1	23	DELL COMPUTER OFFICE	0	0	0
Page 1	1	24	DELL COMPUTER STEVE	0	0	0
Page 1	1	25	TRAILER-GATOR TAIL	0	0	0
Page 1	1	26	2017 FORD TRANSIT VAN	0	0	0
				<u>3,951</u>	<u>3,951</u>	<u>0</u>

Asset	Description	Date In Service	Cost	Tax	AMT
Prior MACRS:					
1	FORD E350	4/01/16	2,861	0	0
2	RYDER BOX TRUCK	7/25/16	31,752	0	0
3	MITSUBISHI BOX TRUCK	9/09/16	28,000	0	0
4	SMALL TOOLS	9/09/16	4,180	187	187
6	EQUIPMENT	5/25/16	15,500	692	692
7	COMMERCIAL REFRIGERATOR	8/05/15	11,023	246	246
8	CHEST FREEZER	12/27/15	520	20	20
11	OFFICE FURNITURE	12/31/14	28,010	0	0
12	JP DONATED VEHICLE	6/13/14	2,500	0	0
13	EXPRESS TRAILERS	12/16/14	1,187	0	0
14	SB DONATED VEHICLE	12/31/14	1,173	0	0
17	REFRIGERATOR	5/31/17	460	20	20
18	ICE MACHINE	11/25/17	826	0	0
19	GATOR TRAILER	6/08/17	999	44	44
20	2017 T-350 #6061	11/30/17	38,155	0	0
21	FREEZER FOOD PANTRY	11/26/18	1,296	0	0
22	WALK IN COOLER	4/01/18	4,100	0	0
23	DELL COMPUTER OFFICE	6/15/18	1,099	0	0
24	DELL COMPUTER STEVE	6/06/18	1,099	0	0
25	TRAILER-GATOR TAIL	5/14/18	1,050	0	0
26	2017 FORD TRANSIT VAN	10/25/18	26,950	0	0
			<u>202,740</u>	<u>1,209</u>	<u>1,209</u>

Other Depreciation:

27	Impact Capopis 2 New Tents	10/28/19	0	0	0
28	2 New Freezers Food Pantry	10/21/19	0	0	0
29	A/C Server Room	7/19/20	0	0	0
30	Ice Machine	7/19/20	0	0	0
31	Pallet Jack - Food Pantry	12/01/20	0	0	0
32	Pallet Jack - Food Pantry	12/16/20	0	0	0
33	Store Shelves	1/13/20	0	0	0
34	Walkin Cooler - Aab Condensor	12/15/20	0	0	0
35	Walkin Cooler - Alpha Foods	8/08/20	0	0	0
36	2004 Ford Expedition	6/11/20	0	0	0
37	2007 Chevy Avalanche	3/05/20	0	0	0
38	JOHN DEERE Z930M ZTRAK	5/11/20	0	0	0
39	ECHO BEARCAT CH5627	5/11/20	0	0	0
40	WALK IN COOLER CONDENSOR AND EVA	12/11/20	0	0	0
41	Food Box Racks	12/02/21	0	0	0
42	Computers	10/01/21	0	0	0
43	14 Laptops	11/18/21	0	0	0
44	Chevy Cargo Van 2021	7/28/21	0	0	0
	Total Other Depreciation		<u>0</u>	<u>0</u>	<u>0</u>
	Total ACRS and Other Depreciation		<u>0</u>	<u>0</u>	<u>0</u>
	Grand Totals		<u>202,740</u>	<u>1,209</u>	<u>1,209</u>

Form **990****Two Year Comparison Report****2020 & 2021**

For calendar year 2021, or tax year beginning , ending

Name

Taxpayer Identification Number

FLORIDA DREAM CENTER INC**46-0663472**

		2020	2021	Differences	
Revenue	1. Contributions, gifts, grants	1. 4,070,961	3,998,550	-72,411	
	2. Membership dues and assessments	2.			
	3. Government contributions and grants	3. 41,600	54,900	13,300	
	4. Program service revenue	4.			
	5. Investment income	5. 85		-85	
	6. Proceeds from tax exempt bonds	6.			
	7. Net gain or (loss) from sale of assets other than inventory	7.			
	8. Net income or (loss) from fundraising events	8.			
	9. Net income or (loss) from gaming	9.			
	10. Net gain or (loss) on sales of inventory	10.			
	11. Other revenue	11.		11,284	11,284
	12. Total revenue. Add lines 1 through 11	12. 4,112,646	4,064,734	-47,912	
Expenses	13. Grants and similar amounts paid	13.			
	14. Benefits paid to or for members	14.			
	15. Compensation of officers, directors, trustees, etc.	15. 166,150	166,990	840	
	16. Salaries, other compensation, and employee benefits	16. 132,773	139,991	7,218	
	17. Professional fundraising fees	17.			
	18. Other professional fees	18. 11,136	10,776	-360	
	19. Occupancy, rent, utilities, and maintenance	19. 30,608	31,530	922	
	20. Depreciation and Depletion	20. 40,584	37,651	-2,933	
	21. Other expenses	21. 3,537,368	3,725,240	187,872	
	22. Total expenses. Add lines 13 through 21	22. 3,918,619	4,112,178	193,559	
	23. Excess or (Deficit). Subtract line 22 from line 12	23. 194,027	-47,444	-241,471	
Other Information	24. Total exempt revenue	24. 4,112,646	4,064,734	-47,912	
	25. Total unrelated revenue	25.			
	26. Total excludable revenue	26. 85	11,284	11,199	
	27. Total assets	27. 384,632	335,319	-49,313	
	28. Total liabilities	28. 8,614	6,745	-1,869	
	29. Retained earnings	29. 376,018	328,574	-47,444	
	30. Number of voting members of governing body	30. 7	12		
	31. Number of independent voting members of governing body	31. 7	12		
	32. Number of employees	32. 22	19		
	33. Number of volunteers	33. 5053	5660		

Form **990****Tax Return History****2021**

Name

FLORIDA DREAM CENTER INC

Employer Identification Number

46-0663472

	2017	2018	2019	2020	2021	2022
Contributions, gifts, grants	2,094,230	2,738,206	3,751,479	4,112,561	4,053,450	
Membership dues						
Program service revenue						
Capital gain or loss		-5,188	36,195			
Investment income	21	12	9	85		
Fundraising revenue (income/loss)						
Gaming revenue (income/loss)						
Other revenue	4,178	2,286	2,091		11,284	
Total revenue	2,098,429	2,735,316	3,789,774	4,112,646	4,064,734	
Grants and similar amounts paid	331,785					
Benefits paid to or for members						
Compensation of officers, etc.	65,230	79,459	74,215	166,150	166,990	
Other compensation	122,227	172,899	157,237	132,773	139,991	
Professional fees	8,278	32,467	10,681	11,136	10,776	
Occupancy costs	26,608	31,039	30,429	30,608	31,530	
Depreciation and depletion	26,147	33,546	35,616	40,584	37,651	
Other expenses	1,957,810	2,494,478	3,495,226	3,537,368	3,725,240	
Total expenses	2,538,085	2,843,888	3,803,404	3,918,619	4,112,178	
Excess or (Deficit)	-439,656	-108,572	-13,630	194,027	-47,444	
Total exempt revenue	2,098,429	2,735,316	3,789,774	4,112,646	4,064,734	
Total unrelated revenue						
Total excludable revenue	4,199	-2,890	38,295	85	11,284	
Total Assets	436,726	222,136	228,274	384,632	335,319	
Total Liabilities	8,199	26,515	46,283	8,614	6,745	
Net Fund Balances	428,527	195,621	181,991	376,018	328,574	

Federal Statements

Form 990, Part IX, Line 24e - All Other Expenses

<u>Description</u>	<u>Total Expenses</u>	<u>Program Service</u>	<u>Management & General</u>	<u>Fund Raising</u>
MAINTENANCE	\$ 31,051	\$ 27,913	\$ 3,138	\$
DUES AND SUBS	8,200		8,200	
PHONE	5,034		5,034	
MEALS/ENTER	4,159	1,639	2,520	
COMPUTER EXPENSE	2,815		2,815	
MISCELLANEOUS	731		731	
BANK CHRAGES	189		189	
TOTAL	<u>\$ 52,179</u>	<u>\$ 29,552</u>	<u>\$ 22,627</u>	<u>\$ 0</u>

Federal Statements

Schedule A, Part II, Line 1(e)

Description	Amount
SBA PPP LOAN FORGIVENESS	\$ 54,900
FOOD	2,679,262
VOLUNTEERS	184,556
SANITATION	14,101
OFFICE VOLUNTEERS	79,889
GOODS	263,967
RENT	31,530
VOLUNTEERS HUMAN TRAFFICKING	46,510
VARIOUS	291,574
PINELLAS COUNTY EX OFFENDER CASH CONTRIBUTION	82,027
UW SUNCOAST OF FLORIDA CASH CONTRIBUTION	114,260
PINEALL COMMUNITY FOUNDATION CASH CONTRIBUTION	87,212
PINEALL COUNTY BD OF COUNTY COMMI CASH CONTRIBUTION	108,662
PUBLIX SUPER MARKET CASH CONTRIBUTION	15,000
TOTAL	<u>\$ 4,053,450</u>

Schedule A, Part II, Line 9(e)

Description	Amount
T-SHIRT SALES	\$ 10,273
OTHER INCOME	1,011
LESS: DEDUCTIONS	<u>-1,000</u>
TOTAL	<u>\$ 10,284</u>

FLORIDA DREAM CENTER, INC.

FINANCIAL STATEMENTS

DECEMBER 31, 2021 AND 2020

FLORIDA DREAM CENTER, INC.

FINANCIAL STATEMENTS

DECEMBER 31, 2021 AND 2020

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INDEPENDENT AUDITORS' REPORT

Board of Directors
Florida Dream Center, Inc.

Opinion

We have audited the accompanying financial statements of Florida Dream Center, Inc. (a nonprofit organization), which comprise the statements of financial position as of December 31, 2021 and 2020, and the related statements of activities and changes in net assets, functional expenses, and cash flows for the years then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Florida Dream Center, Inc. as of December 31, 2021 and 2020, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Florida Dream Center, Inc. and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Florida Dream Center, Inc.'s ability to continue as a going concern within one year after the date that the financial statements are available to be issued.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements, including omissions, are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audits in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Florida Dream Center, Inc.'s internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Florida Dream Center, Inc.'s ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audits, significant audit findings, and certain internal control related matters that we identified during the audits.

Marsocci, Appleby & Company P.A

Marsocci, Appleby & Company, P.A.
Tampa, Florida
August 10, 2022

**FLORIDA DREAM CENTER, INC.
STATEMENTS OF FINANCIAL POSITION
DECEMBER 31, 2021 AND 2020**

ASSETS	<u>2021</u>	<u>2020</u>
CURRENT ASSETS:		
Cash and cash equivalents	\$ 126,417	\$ 169,795
Pledge and program receivables	<u>87,280</u>	<u>105,772</u>
Total current assets	213,697	275,567
PROPERTY AND EQUIPMENT, net	118,545	105,988
SECURITY DEPOSITS	<u>3,077</u>	<u>3,077</u>
TOTAL ASSETS	<u><u>\$ 335,319</u></u>	<u><u>\$ 384,632</u></u>
LIABILITIES AND NET ASSETS		
CURRENT LIABILITIES:		
Accounts payable and accrued expenses	<u>\$ 6,745</u>	<u>\$ 8,614</u>
Total current liabilities	<u>6,745</u>	<u>8,614</u>
NET ASSETS:		
Without donor restrictions	313,574	376,018
With donor restrictions	<u>15,000</u>	<u>-</u>
Total net assets	<u>328,574</u>	<u>376,018</u>
TOTAL LIABILITIES AND NET ASSETS	<u><u>\$ 335,319</u></u>	<u><u>\$ 384,632</u></u>

See independent auditors' report and notes to the financial statements.

FLORIDA DREAM CENTER, INC.
STATEMENT OF ACTIVITIES AND CHANGES IN NET ASSETS
FOR THE YEAR ENDED DECEMBER 31, 2021

	Without Donor Restrictions	With Donor Restrictions	Total
REVENUES:			
Direct public support	\$ 412,466	\$ -	\$ 412,466
In-kind contributions	3,299,813	-	3,299,813
Grant income	271,271	15,000	286,271
Grant income - PPP	54,900	-	54,900
Other income	11,284	-	11,284
	4,049,734	15,000	4,064,734
Net assets released from restriction	-	-	-
TOTAL REVENUES	4,049,734	15,000	4,064,734
EXPENSES:			
Program services	3,919,493	-	3,919,493
Supporting services	192,685	-	192,685
	4,112,178	-	4,112,178
CHANGES IN NET ASSETS	(62,444)	15,000	(47,444)
NET ASSETS , beginning of year	376,018	-	376,018
NET ASSETS , end of year	\$ 313,574	\$ 15,000	\$ 328,574

See independent auditors' report and notes to the financial statements.

FLORIDA DREAM CENTER, INC.
STATEMENT OF ACTIVITIES AND CHANGES IN NET ASSETS
FOR THE YEAR ENDED DECEMBER 31, 2020

	Without Donor Restrictions	With Donor Restrictions	Total
REVENUES:			
Direct public support	\$ 503,586	\$ -	\$ 503,586
In-kind contributions	3,185,869	-	3,185,869
Grant income	381,506	-	381,506
Grant income - PPP	41,600	-	41,600
Interest income	85	-	85
	4,112,646	-	4,112,646
Net assets released from restriction	-	-	-
TOTAL REVENUES	4,112,646	-	4,112,646
EXPENSES:			
Program services	3,758,057	-	3,758,057
Supporting services	160,562	-	160,562
	3,918,619	-	3,918,619
CHANGES IN NET ASSETS	194,027	-	194,027
NET ASSETS, beginning of year	181,991	-	181,991
NET ASSETS, end of year	\$ 376,018	\$ -	\$ 376,018

See independent auditors' report and notes to the financial statements.

FLORIDA DREAM CENTER, INC.
STATEMENT OF FUNCTIONAL EXPENSES
FOR THE YEAR ENDED DECEMBER 31, 2021

	Program Services	Supporting Services			Total
		General and Administrative	Fundraising	Total	
In-kind expenses	\$ 3,187,721	\$ 80,562	\$ -	\$ 80,562	\$ 3,268,283
Salaries and payroll taxes	283,518	23,463	-	23,463	306,981
Supplies, housing, and service support	215,776	-	-	-	215,776
Insurance	58,221	24,728	-	24,728	82,949
Auto expense	61,372	1,147	-	1,147	62,519
Depreciation	32,003	5,648	-	5,648	37,651
Utilities	24,530	7,722	-	7,722	32,252
Rent	26,800	4,730	-	4,730	31,530
Maintenance	27,913	3,138	-	3,138	31,051
Legal and professional	-	10,776	-	10,776	10,776
Dues and subscriptions	-	8,200	-	8,200	8,200
Office expenses	-	6,236	-	6,236	6,236
Telephone expense	-	5,034	-	5,034	5,034
Meals and entertainment	1,639	2,520	-	2,520	4,159
Computer expense	-	2,815	-	2,815	2,815
Website	-	2,800	-	2,800	2,800
Interest expense	-	1,555	-	1,555	1,555
Miscellaneous expenses	-	732	-	732	732
Advertising and promotion	-	690	-	690	690
Bank and credit card fees	-	189	-	189	189
Total	\$ 3,919,493	\$ 192,685	\$ -	\$ 192,685	\$ 4,112,178

See independent auditors' report and notes to the financial statements.

**FLORIDA DREAM CENTER, INC.
STATEMENT OF FUNCTIONAL EXPENSES
FOR THE YEAR ENDED DECEMBER 31, 2020**

	Program Services	Supporting Services			Total
		General and Administrative	Fundraising	Total	
In-kind expenses	\$ 3,076,227	\$ 69,034	\$ -	\$ 69,034	\$ 3,145,261
Salaries and payroll taxes	277,720	21,203	-	21,203	298,923
Supplies, housing, and service support	163,370	-	-	-	163,370
Insurance	63,544	14,801	-	14,801	78,345
Rent	26,017	4,591	-	4,591	30,608
Depreciation	34,496	6,088	-	6,088	40,584
Legal and professional	-	11,136	-	11,136	11,136
Maintenance	50,899	5,458	-	5,458	56,357
Utilities	20,736	7,386	-	7,386	28,122
Office expenses	-	8,312	-	8,312	8,312
Interest expense	-	647	-	647	647
Bad debt	-	1,000	-	1,000	1,000
Telephone expense	-	4,647	-	4,647	4,647
Meals and entertainment	1,790	236	-	236	2,026
Dues and subscriptions	-	3,050	-	3,050	3,050
Advertising and promotion	-	200	-	200	200
Auto expense	43,258	2,766	-	2,766	46,024
Bank and credit card fees	-	7	-	7	7
Total	\$ 3,758,057	\$ 160,562	\$ -	\$ 160,562	\$ 3,918,619

See independent auditors' report and notes to the financial statements.

FLORIDA DREAM CENTER, INC.
STATEMENTS OF CASH FLOWS
FOR THE YEARS ENDED DECEMBER 31, 2021 AND 2020

	<u>2021</u>	<u>2020</u>
CASH FLOWS FROM OPERATING ACTIVITIES:		
Changes in net assets	\$ (47,444)	\$ 194,027
Adjustments to reconcile changes in net assets to net cash provided by operating activities:		
Depreciation	37,651	40,584
Changes in operating assets and liabilities:		
Pledges receivable	18,492	(104,772)
Accounts payable and accrued expenses	(1,869)	(169)
Deferred revenue	<u>-</u>	<u>(37,500)</u>
Net cash provided by operating activities	<u>6,830</u>	<u>92,170</u>
CASH FLOWS FROM INVESTING ACTIVITIES:		
Purchase of property and equipment, net	<u>(50,208)</u>	<u>(56,061)</u>
Net cash used in investing activities	<u>(50,208)</u>	<u>(56,061)</u>
NET (DECREASE) INCREASE IN CASH AND CASH EQUIVALENTS	(43,378)	36,109
CASH AND CASH EQUIVALENTS, beginning of year	<u>169,795</u>	<u>133,686</u>
CASH AND CASH EQUIVALENTS, end of year	<u><u>\$ 126,417</u></u>	<u><u>\$ 169,795</u></u>

See independent auditors' report and notes to the financial statements.

FLORIDA DREAM CENTER, INC.
NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED DECEMBER 31, 2021 AND 2020

NOTE A - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES:

Nature of Operations

Florida Dream Center, Inc. ("the Organization"), is a nonprofit corporation that is organized to provide services that address immediate and long-term needs in the areas of homelessness, human trafficking, hunger, poverty, addiction and community outreach.

Basis of Accounting

The Organization's financial statements have been prepared using the accrual basis of accounting and accordingly, reflect all significant receivables, payables, and other liabilities.

Basis of Presentation

The Organization has presented its financial statements in accordance with U.S. generally accepted accounting principles for not-for-profit organizations. Under this guidance, the Organization is required to report information regarding its financial position and activities according to two classes of net assets: net assets – without donor restrictions and net assets – with donor restrictions.

- Net assets – without donor restrictions are those amounts currently available at the discretion of the Board of Directors for use in the Organization's operations. These assets are not subject to donor-imposed restrictions, or the donor-imposed restrictions have expired.
- Net assets – with donor restrictions are restricted amounts which are restricted by donors for specific purposes that may become unrestricted by actions taken by the Organization or the passage of time. There were no net assets – with donor restrictions at December 31, 2020.

Functional Allocation of Expenses

The costs of providing various program and related supporting services have been summarized on a functional basis in the statement of activities and changes in net assets. Accordingly, certain costs have been allocated to the appropriate program and supporting services.

Use of Estimates

The preparation of financial statements, in conformity with GAAP requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

Cash and Cash Equivalents

The Organization considers all highly liquid investments with an original maturity of three months or less to be cash equivalents for the purpose of determining cash flows.

**FLORIDA DREAM CENTER, INC.
NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED DECEMBER 31, 2021 AND 2020**

NOTE A - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED):

Property and Equipment

Property and equipment is recorded at historical cost and includes expenditures which substantially increase the useful lives of existing property and equipment. The Organization follows the practice of capitalizing all expenditures for property and equipment in excess of \$500, or if donated, at fair market value at the date of acquisition. Maintenance and repairs are charged to operations when incurred. When property and equipment is sold or otherwise disposed of, the related asset account and related accumulated depreciation account are relieved, and any gain or loss is included in other income or expense.

Depreciation expense amounted to \$37,651 and \$40,584 for the years ended December 31, 2021 and 2020, respectively. Depreciation of property and equipment is computed using the straight-line method based on the estimated useful lives of the related assets.

<u>Assets</u>	<u>Years</u>
Vehicles and trailer	5-7
Office furniture	7
Equipment	7

Donated Materials and Services

All non-cash contributions are considered to be available for unrestricted use unless specifically restricted by the donor. Donated materials are reflected at their estimated fair market values at date of receipt. Donated services are recorded at values consistent with those amounts which would be paid to salaried personnel for similar service and comply with FASB recognition criteria of enhancing a nonfinancial asset or require specialized skills.

Income Taxes

The Organization is exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code and from state corporate income tax under applicable Florida Statutes. The Internal Revenue Code provides for taxation of unrelated business income under certain circumstances. The Organization has no unrelated business income; however, such status is subject to final determination upon examination of the related income tax returns by the appropriate taxing authorities.

The Organization has no uncertain tax positions that it has taken and believes that it can defend its tax return in any jurisdiction. With few exceptions, the Organization is no longer subject to income tax examinations by the U.S. federal, state or local tax authorities for years before 2018.

Concentration of Credit Risk

The Organization maintains deposits in a financial institution that at times may exceed amounts covered by insurance provided by the U.S. Federal Deposit Insurance Corporation (FDIC). The Organization believes that there is no significant risk with respect to these deposits. The Organization has not experienced any losses on its deposits with financial institutions.

Deferred Revenue

The Organization records grant awards accounted for as exchange transactions as deferred revenue until related services are performed, at which time they are recognized as revenue. There was no deferred revenue at December 31, 2021 and 2020, respectively.

**FLORIDA DREAM CENTER, INC.
NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED DECEMBER 31, 2021 AND 2020**

NOTE B - PROPERTY AND EQUIPMENT:

Property and equipment are summarized as follows:

	2021	2020
Vehicles and trailer	\$ 184,732	\$ 151,828
Office furniture	46,836	31,193
Equipment	79,448	77,787
	311,016	260,808
Less: accumulated depreciation	(192,471)	(154,820)
	\$ 118,545	\$ 105,988

Depreciation expense amounted to \$37,651 and \$40,584 for the years ended December 31, 2021 and 2020, respectively.

NOTE C - LEASE OBLIGATION:

The Organization entered into a new lease agreement in St. Petersburg, Florida beginning August 1, 2017. The lease term is sixty months, with one-year renewal options at market rental rates. The lease provides for increasing base monthly rental payments throughout the term of the lease. Rent expense recognized for the year ended December 31, 2021 amounted to \$31,530, all of which was recognized as in-kind rent. Rent expense recognized for the year ended December 31, 2020 amounted to \$30,608.

Future minimum lease payments under the non-cancellable operating lease are as follows for the years ended December 31,:

YEARS	AMOUNTS
2022	\$ 31,530
2023	18,711
	\$ 50,241

NOTE D - LIQUIDITY AND AVAILABILITY OF FINANCIAL ASSETS:

The following reflects the Organization's financial assets as of the balance sheet dates, reduced by amounts not available for general use because of contractual or donor-imposed restrictions within one year of the balance sheet dates:

	2021	2020
Financial assets at year-end, net	\$ 206,952	\$ 266,953
Donor-restricted for program services	(15,000)	-
Financial assets available to meet cash needs for general expenditure within one year	\$ 191,952	\$ 266,953

As part of the Organization's liquidity management, it maintains its available cash in a checking and savings accounts with financial institutions.

FLORIDA DREAM CENTER, INC.
NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED DECEMBER 31, 2021 AND 2020

NOTE E - PPP GRANT INCOME:

The Organization received a grant through the Small Business Administration's Paycheck Protection Program. The Organization met the program spending requirements and received official notification from the Small Business Administration that the Organization will not be required to repay the amounts advanced under the program. Total grant income recognized under this program amounted to \$54,900 and \$41,600 for the years ended December 31, 2021 and 2020, respectively, and is included in Grant income - PPP on the statement of activities.

NOTE F - COVID RESPONSE:

During March 2020, the COVID-19 virus was declared a global pandemic as it continued to spread rapidly. Business and Organization continuity, including supply chains and consumer demand across a broad range of industries and countries, have been impacted as governments and their citizens take significant and unprecedented measures to mitigate the consequences of the pandemic.

Because the Organization's business activities are considered "essential services," operations have not been suspended due to the pandemic. Management has made several significant adaptations to operations to keep the Organization functional while protecting their workforce and clients.

The Organization has encouraged those who are able to work from home to do so. The Organization is utilizing when possible, video conferencing systems in order to ease the transition to a mixed physical and virtual work environment. The Organization has adapted its facilities to allow for physical distancing between employees working on site and has also updated sanitation policies. The Organization has implemented policies to plan for and respond to COVID related staff illnesses.

As a result of new policies and procedures and federal support programs, the Organization has not experienced significant staffing disruptions or unfunded payroll costs that are attributable to the pandemic.

NOTE G - FASB ASC 606 NEW ACCOUNTING GUIDANCE IMPLEMENTATION:

The Financial Accounting Standards Board (FASB) issued new guidance that created Topic 606, Revenue from Contracts with Customers, in the Accounting Standards Codification (ASC). Topic 606 supersedes the revenue recognition requirements in FASB ASC 605, Revenue Recognition, and requires the recognition of revenue when promised goods or services are transferred to customers in an amount that reflects the consideration to which an entity expects to be entitled in exchange for those goods or services. We refer to the new Topic 606 as the "new guidance." The Organization adopted the requirements of the new guidance as of January 1, 2019.

NOTE H - SUBSEQUENT EVENTS:

Management has assessed subsequent events through August 10, 2022, the date on which the financial statements were available to be issued, for possible recognition or disclosure in the financial statements. There were no material subsequent events that require recognition or additional disclosure.

Florida Dream Center Building

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 Apr 2023

ACTIVITY	START	END	NOTES
Project Start	4/1/2023	6/1/2023	Construction drawings, permitting, termite tenting, building purchase & acquisition
Milestone 2	6/1/2023	7/16/2023	Demo Tower, door opening , block work
Milestone 3	7/20/2023	8/22/2023	Stucco, exterior windows and start new roof
Milestone 4	8/23/2023	10/2/2023	Finish new roof, ac system, front doors
Milestone 5	10/5/2023	10/17/2023	Paint building
Milestone 6	10/17/2023	11/6/2023	New garge doors
Milestone 7	11/16/2023	12/20/2023	New fencing
Milestone 8	1/2/2024	1/30/2024	Pavers and landscaping
Milestone 9	2/1/2024	3/2/2024	Overlay and striping parking lot
Milestone 10	3/12/2024	3/20/2024	Signage and benches and cameras
Project End	3/22/2024	4/1/2024	Punch out and final inspection