DRAFT

LAKE SHORE HOSPITAL AUTHORITY BOARD OF TRUSTEES

Regular Meeting – December 9, 2024, 5:15 p.m.

This meeting was conducted as a public meeting and a virtual meeting.

Present: Stephen Douglas, Chair

Brandon Beil, Vice-Chair

Jerry Bullard, Trustee

Lory Chancy - Secretary/Treasurer

Don Kennedy, Trustee

Absent:

Also

Present: Dale Williams, Executive Director

Todd Kennon, Attorney

Marjorie Rigdon, FDOH – Columbia Tony Fern's FDOH – Columbia

Phillip Fowler Susan Phillips

Cindy Thomas

Richard Powell, Accountant

Sonja Markham, LSHA Staff

Karl Plenge, NOC

Tammy Ferris – FDOH – Columbia Anita Rembert, Palms Medical

Stew Lilker, Columbia Cty Observer

Debra Griffin

Jamie Wachter, Reporter

5 participants participated in the LSHA Virtual Regular Board Meeting.

CALL TO ORDER

Chairman Douglas called the in person/virtual December 9, 2024, Regular Meeting to order at 5:15 P.M. Chairman Douglas called for additions/deletions to the agenda. There were none. **Motion** by Mrs. Lory Chancy to approve adoption of the Agenda. **Second** by Mr. Jerry Bullard. All in favor. **Motion carried.**

INDIVIDUAL APPEARANCES

Public Comments by Mr. Stew Lilker.

CONSENT AGENDA

Chairman Douglas called for a motion to approve the Consent Agenda. <u>Motion</u> by Mrs. Lory Chancy to approve adoption of the Consent Agenda. <u>Second</u> by Mr. Brandon Beil. All in favor. <u>Motion carried.</u>

UNFINISHED BUSINESS

<u>Discussion and Possible Action – Response to (RFP) 2024-002 by Palms Medical Group – Proposal to operate a LSHA owned Primary Care Clinic</u>

Mr. Dale Williams reminded the Trustees Palms Medical Group was the only response received for RFP 2024-002. Mr. Powell gave an analysis of Palms Medical Group's proposal to develop and operate a health center.

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Public comments by Ms. Barbara Lemley (zoom) and Mr. Stew Lilker. Discussion. <u>Motion</u> by Mr. Don Kennedy to direct staff to move forward to prepare a contract with Palms Medical Group. <u>Second</u> by Mrs. Lory Chancy. Roll call vote Ms. Lory Chancy – yes, Mr. Don Kennedy – yes, Mr. Jerry Bullard – yes, Mr. Brandon Beil – yes. All in favor. <u>Motion carried</u>.

<u>Discussion and Possible Action – Current Status of Columbia County 2024 "Straw Ballot"</u> <u>Regarding Lake Shore Hospital Authority</u>

Mr. Dale Williams updated the Trustees on the status of the County Straw Ballot. The county has prepared a Special Bill relating to the dissolution of the Lake Shore Hospital Authority. This will be discussed at the Columbia County Board of County Commissioner meeting at 9:30 am on December 12th. Mr. Williams was asked to prepare a current Status Report of the Lake Shore Hospital Authority for the Columbia County Legislative Delegation. Mr. Williams asked the Trustees to let him know if they would like to add information to the report. There will be a Legislation hearing at Florida Gateway College on January 8, 2025, at 9:00 am. Mr. Williams encouraged the Trustees to attend this meeting if they can. Public comments by Ms. Susan Phillips and Mr. Stew Lilker. Discussion.

<u>Discussion and Possible Action – LSHA Meeting Rules and Procedures Policy Amendments to Provide for Completion of a Speaker Card for Zoom Meeting</u>

Mr. Dale Williams presented to the Trustees the amended language in the LSHA Meeting Rules and Procedures to require a speaker card for zoom participation. Public comments by Mr. Stew Liker, Ms. Susan Phillips and Ms. Barbara Lemley (zoom). Discussion.

Recess at 6:35 pm to change the recording tape. Chairman Douglas called the meeting back to order after changing the tape.

<u>Motion</u> by Mr. Don Kennedy to amend the Lake Shore Hospital Authority Meeting Rules and Procedures policy to provide for completion of speaker cards for the zoom participants. <u>Second</u> by Mr. Brandon Beil. All in favor. <u>Motion Carried</u>.

<u>Discussion and Possible Action – Approval of Proposal from Johnson Controls, Inc. to perform Lake Shore Hospital "Chiller Annuals" as Sole – Source Purchase</u>

Staff is requesting a sole source authorization through a company called Chiller Medic to provide maintenance on the chiller system at the hospital in the amount of \$11,032.75. Public comments by Ms. Susan Phillips. <u>Motion</u> by Mr. Don Kennedy to approve the sole source authorization by Chiller Medic in the amount of \$11032.75. <u>Second</u> by Mrs. Lory Chancy. All in favor.

Motion Carried.

DRAFT

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Unfinished Business – Todd Kennon – LSHA attorney

<u>Discussion and possible action – Disposition of real property owned by the Lake Shore Hospital Authority to third parties, including but not limited to the Lake Shore Hospital Building pursuant to the "Agreement for the Purchase and Sale of Real Property" from the Lake Shore Hospital Authority to Meridian Behavioral Healthcare.</u>

Mr. Todd Kennon reminded the Trustees Mr. Terrell Arline, was hired as special counsel to advise on the City of Lake City issue regarding the nonconforming status with the Lake Shore Hospital campus. After no response from the City of Lake City was received from Mr. Arline's initial letter regarding the issue, Mr. Arline sent out a follow-up letter on Friday, December 6th. Mr. Kennon will coordinate with Mr. Arline and Mr. Williams regarding the City of Lake City and what the future steps will be. Discussion. Mr. Kennon will be in touch with Meridian's counsel as well prior to the January 2025 meeting.

STAFF REPORT

The staff report is in the Trustee packets.

BOARD MEMBER COMMENTS

Comments by Mr. Brandon Beil, Mr. Don Kennedy, and Mrs. Lory Chancy. Mr. Dale Williams reminded the Trustees of the letter received by Florida Gateway College regarding their interest in the campus and the letter is in their packets.

Meeting adjourned.		
Respectfully submitted,		
Donald R. Kennedy, Secretary/Treasurer	Date of Approval	

17:15:05 From Lake Shore Hospital Authority, Lake City, FL to Everyone:

Please be advised that all chat comments are part of the public record. 17:24:42 From joy to Lake Shore Hospital Authority, Lake City, FL(direct message):

sounds like meridian. but hey they are already affiliated with them. they sens their patients to meridian for mental health care 17:26:09 From joy to Lake Shore Hospital Authority, Lake City, FL(direct message):

hence the pure neglect i recieved. so dont forget to mention that.

17:52:34 From Lake Shore Hospital Authority, Lake City, FL to joy(direct message):

I am not able to put in comments for people, you would need to find where to raise your hand in Zoom and do that.

18:29:33 From joy to Lake Shore Hospital Authority, Lake City, FL(direct message): no button

18:29:39 From joy to Lake Shore Hospital Authority, Lake City, FL(direct message): shes right

 row. It may be in there.

18:40:56 From Lake Shore Hospital Authority, Lake City, FL to Everyone:

I just looked up how to raise your hand. They do move this periodically, but at present you click on the heart at the bottom that says React. The raise hand button is in there.

LAKE SHORE HOSPITAL AUTHORITY BUILDINGS ADMINISTRATION FUND BUDGET AMENDMENT 25-1 2024-2025 FISCAL YEAR

	ADOPTED Oct 24-Sept 25		ACTUAL THRU 12/31/2024		AMENDMENT 25-1		AS AMENDED 2024-2025	
Expenditures								
Computer/Internet	\$ 500	\$	425	\$	500	\$	1,000	
Insurance	80,000		677		-		80,000	
Lawn Maintenance	9,000		11,640		14,000		23,000	
Office Expense	-		116		300		300	
Total Payroll	28,706		31,978		34,000		62,706	
Pest Control	2,000		2,019		2,100		4,100	
Professional fees			1,030		5,000		5,000	
RepairS	10,500		16,465		25,000		35,500	
Security	40,000		42,128		45,000		85,000	
Utility - Electric	36,000		32,772		32,000		68,000	
Fire Alarm	500		537		500		1,000	
Utility - Phone	2,100		1,387		1,000		3,100	
Utility - Water/Sewage	19,000		9,052		-		19,000	
Other Expenses	-		3,685		5,000		5,000	
Total Expenditures	 228,306	-	153,911		164,400		392,706	
Interfund Transfer In	 250,000		250,000		160,000		410,000	
BEGINNING CASH	 				-		-	
ENDING CASH	\$ 21,694	\$	96,089	\$	(4,400)	\$	17,294	

Sonja Markham

From:

Tom Conley <TConley@flcities.com>

Sent:

Tuesday, January 7, 2025 4:23 PM

To:

Sonja Markham

Subject:

Re: asset survey report

I'm out of the country, but I think it should be okay. 850-251-8722. Sent from my iPhone

On 01/07/2025, at 3:49 PM, Sonja Markham <sonja@lakeshoreha.org> wrote:

Hi Tom,

Happy New Year!

Will you be available tomorrow around 2:15 for Dale and me to call you? If so, what is a good number?

Sonja Markham, Administrative Assistant Lake Shore Hospital Authority 259 NE Franklin Street, Suite 102 PO Box 988 Lake City, Florida 32055

Phone: (386) 755-1090 Direct Line (386) 344-6033

Fax: (386) 755-7009 www.lakeshoreha.org

From: Tom Conley <TConley@flcities.com>
Sent: Monday, December 16, 2024 12:40 PM
To: Sonja Markham <sonja@lakeshoreha.org>
Cc: Dale Williams <dale@lakeshoreha.org>

Subject: RE: asset survey report

Hi Sonja and Dale,

The underwriter just informed me that it appears the endorsement was never processed, updating the replacement values due to the asset survey. So, I guess you avoided the increase in premium for 2.5 years. They want to correct this and endorse it for this current policy year. The annual additional premium is \$29,081. Please let me know your thoughts on this. It does not include the finance office or the hospital building.

Tom Conley

Account Executive
Florida League of Cities, Inc.
850.251.8722
www.flcities.com
<image001.png>

From: Sonja Markham < sonja@lakeshoreha.org>

Sent: Tuesday, May 10, 2022 2:13 PM
To: Tom Conley < TConley@flcities.com >
Cc: Dale Williams < dale@lakeshoreha.org >

Subject: RE: asset survey report

Hey Tom,

Our Board met last night, and at this time the Bedoya building (financial office) will remain on the schedule. Can you send me an invoice for the remainder of the premium owed?

Sonja Markham, Administrative Assistant Lake Shore Hospital Authority 259 NE Franklin Street, Suite 102 PO Box 988 Lake City, Florida 32055

Phone: (386) 755-1090 Direct Line (386) 344-6033

Fax: (386) 755-7009 www.lakeshoreha.org

From: Tom Conley TConley@flcities.com Sent: Monday, March 14, 2022 5:00 PM

To: Sonja Markham sonja@lakeshoreha.org Cc: Dale Williams dale@lakeshoreha.org

Subject: RE: asset survey report

Sorry y'all, but I don't remember where we left this. I think you were waiting on me for a premium for making the changes effective 6/1? The premium for the remainder of the year (6/1-10/1) is \$13,774. And, I think you were going to consider removing the financial office from the schedule, which has an annual premium of about \$4,000. I know you needed to go before the board with it. So, just checking in...

Tom Conley

Account Executive
Florida League of Cities, Inc.
850.251.8722
www.flcities.com
<image002.png>

From: Sonja Markham <sonja@lakeshoreha.org>
Sent: Monday, February 14, 2022 4:26 PM
To: Tom Conley <TConley@flcities.com>
Cc: Dale Williams <dale@lakeshoreha.org>

Subject: RE: asset survey report

Tom,

We have an RFP meeting in the morning at 10:00 am, not sure how long we will be, but as soon as it is, over we can call you. Hopefully around 10:30 am – how does this sound? If this sounds ok, can you send me the number you would like us to call you on?

Sonja Markham, Administrative Assistant

Lake Shore Hospital Authority 259 NE Franklin Street, Suite 102 PO Box 988

Lake City, Florida 32055 Phone: (386) 755-1090 Direct Line (386) 344-6033

Fax: (386) 755-7009 www.lakeshoreha.org

From: Tom Conley < TConley@flcities.com > Sent: Monday, February 14, 2022 10:03 AM
To: Sonja Markham < sonja@lakeshoreha.org >

Subject: RE: asset survey report

Hi Sonja,

Can this be done maybe tomorrow? I will be out of town after that, for a couple of weeks.

Tom Conley

Account Executive
Florida League of Cities, Inc.
850.251.8722
www.flcities.com
<image002.png>

From: Sonja Markham <<u>sonja@lakeshoreha.org</u>>
Sent: Wednesday, February 9, 2022 11:51 AM
To: Tom Conley <TConley@flcities.com>

Subject: RE: asset survey report

Dale is going to review survey, and then I will email you to set up call.

Sonja Markham, Administrative Assistant Lake Shore Hospital Authority 259 NE Franklin Street, Suite 102 PO Box 988 Lake City, Florida 32055

Phone: (386) 755-1090 Direct Line (386) 344-6033

Fax: (386) 755-7009 www.lakeshoreha.org

From: Tom Conley < TConley@flcities.com>
Sent: Wednesday, February 9, 2022 11:11 AM
To: Sonja Markham < sonja@lakeshoreha.org>

Subject: RE: asset survey report

Probably so, since it involves additional premium.

Tom Conlev

Account Executive Florida League of Cities, Inc.

850.251.8722 <u>www.flcities.com</u> <image002.png>

From: Sonja Markham <sonja@lakeshoreha.org>
Sent: Wednesday, February 9, 2022 10:30 AM
To The Control of the Co

To: Tom Conley < TConley@flcities.com>

Subject: RE: asset survey report

Good Morning,

I have the information. Dale should be a part of this call too, correct?

Sonja Markham, Administrative Assistant Lake Shore Hospital Authority 259 NE Franklin Street, Suite 102 PO Box 988 Lake City, Florida 32055 Phone: (386) 755-1090 Direct Line (386) 344-6033

Fax: (386) 755-7009 www.lakeshoreha.org

From: Tom Conley < TConley@flcities.com > Sent: Wednesday, February 9, 2022 10:21 AM To: Sonja Markham < sonja@lakeshoreha.org >

Subject: asset survey report

Hi Sonja,

The asset survey report is ready to view online. I set you up with login credentials. You should get an email from Trackdown, which may go to your Spam. It should have a link in it to the report. There are some increases in values needed. And some other things to discuss. Let's set a time soon to go through it.

Tom Conley

Account Executive
Florida League of Cities, Inc.
850.251.8722
www.flcities.com
<image002.png>

January 8, 2025

TO: LSHA Trustees

FR: Dale Williams

RE: January 8, 2025, Legislative Hearing -

I attended the above referenced hearing. This hearing is required constitutionally (State) for legislators to receive public comment on needs and issues of concern prior to the start of the legislative session. Four (4) people spoke regarding the Lake Shore Hospital Authority including comments about the 2024 General Election Opinion Poll regarding whether the LSHA should be dissolved or not.

This is a list of those who spoke and a summary of their comments:

- 1.) Barbara Lemley (Comments Attached)
- 2.) Tim Williams (Comments Attached)
- 3.) Stew Lilker
 - a.) spoke regarding ADA deficiencies at the LSHA Administration Building.
 - b.) spoke supporting the elimination of LSHA.
- 4.) Tim Atkinson Spoke in support of the elimination of the LSHA and the need to terminate the LSHA "quickly". Expressed concern that assets could be disposed of prior to any legislative action.

Neither Senator Bradley nor Representative Brannan made specific comments regarding the LSHA.

The Lake Shore Hospital Authority District was created in 1955.

The Lake Shore Hospital Authority was established by an act of the legislature on July 10, 1963. The board had seven members appointed by the governor. One member "shall be a physician engaged in the practice of medicine at the Lake Shore Hospital." The hospital has been shut down and out of business for the past 4 1/2 years.

In the mid-1980s, the board leased the hospital's operation to avoid increasing the millage charge to taxpayers. Several vendors have operated the hospital, the most notable being Shands. In 2010, before Shand's lease was reassigned, the hospital could have become a teaching hospital. The discussions were behind closed doors. Shands reassigned its lease to HMA, which later sold out to CHS.

In 2011, the Authority's reputation had sunk to the point that FMIT, Florida Municipal Insurance Trust, would not insure the executive director for liability insurance.

The Authority's urban renewal project that began in 2006 kicked off the Authority on a property-buying spree. In May 2013, at a monthly board meeting, Jack Berry, the former board chair, now the executive director, claimed, "Well, let me tell ya, I was on the board at the time. He stated the driving force behind buying these properties was to get it cleaned up where you did not have to drive through the ghetto to get to the hospital."

Insiders bought properties quickly, flipped them, and sold them to the Authority at a considerable profit to the sellers. These properties were removed from the tax rolls. Complaints were filed. The US Justice Department came to town and investigated.

During this time, the Authority acquired the old county jail. Over a million dollars were spent to convert the jail to an unneeded office building.

The Authority's enabling legislation states that its purpose is to provide indigent care and other hospital-related services.

The Affordable Care Act, or Obama Care, was enacted in March 2010, changing everything. Before the sale and transfer of the lease in 2010, the Authority had about 1000 clients. In November 2014, the Authority's list had fallen to 323 active clients.

By 2020, the average daily bed count in the hospital was 24. The hospital had tried to increase revenue by performing bariatric surgeries. The hospital did have OB/GYN services; however, this revenue did not create enough to sustain the hospital.

Community Health Systems (CHS) announced in March 2020 that the hospital would be closed. On August 31, 2020, all operations of the hospital ceased. CHS agreed to buy out its lease and totally abandoned the hospital on September 30, 2020

Today, four and a half years later, the hospital still sits empty.

In response to a request for proposals, the Authority has under consideration a contract with Palms Medical, a large, not-for-profit medical provider with two locations within five miles of the Authority and the Columbia County Health Department. Palms Medical would duplicate the services provided by the Columbia County Health Department. The proposed Palms clinic, totally funded by the Authority, would be a two-minute walk from the Health Department.

In 2019, during a legislative delegation hearing, Senator Rob Bradley suggested County voters should take a vote to get their thoughts on the continuation of the Authority. I have also spoken with representative Brannan, and he liked the idea of establishing an indigent care trust fund with the Authority cash.

In 2024, the county commissioners finally allowed the voters to vote on a non-binding referendum to keep or abolish the Authority. Two-thirds of voters voted to abolish the Authority.

Please consider legislation that deposits the cash assets of the Lake Shore Hospital in an Indigent Care Trust Fund, which is used to fund indigent care exclusively.

Everyone thinks this is a good idea except the Lake Shore Hospital Authority Board, which continues to disregard the will of the people.

Tim W. Williams Consultant with Haymar Group, LLC. Offices @ The Blanche, Lake City, FL. flpotato@prodigy.net 386 590 9015

1/7/2024

Columbia County Legislative Delegation

Attn:

State Representative Chuck Brannon State Senator Jennifer Bradley

Dear Legislative Delegation,

Let's stop banging our head against the wall and quickly engage in immediate comprehensive solutions to benefit not just the indigent and underserved population of Columbia County but to best serve the adjacent community, businesses, all residents and taxpayers of Columbia County and the N.C.F. region, through the comprehensive redevelopment of the LSHA properties and other adjacent vacant land into a vibrant, well planned, integrated & healthy, mixed use, compact urban, downtown re-development area.

LSHA and the former Hospital have accumulated a large swath of land in a key location in the downtown Lake City core, adjacent to a good-sized lake. Other communities in the SE USA often work for decades to cobble together a useable land mass to catalyze and support new well planned residential and commercial development. We are at least 150 homes a year behind what's needed annually for market equilibrium in Columbia County and have been for many years in a row. There have been effectively -0- new Condo's or Townhomes built for sale in the past 10 years as well. This is an opportunity that should not be wasted.

Ask:

Please accelerate the opportunity that the LSHA Board and management have created but are not willing or able to undertake by immediately transferring all the property and funds of the LSHA to Columbia County. It doesn't matter if there are existing agreements to lease the old hospital or other last-minute poorly conceived obligations, these mistakes can be easily absorbed and outweighed by the good that can come from the opportunity to Comprehensively Plan and attract well designed -post planning- "as of right" re-development to the LSHA properties.

You should:

- Close the LSHA and transfer all assets and responsibilities to the CCBCC, ASAP. This should take the form
 of a State of Florida legislative act making the CCBCC responsible for establishing a Dependent Advisory
 Board to recommend actions needed to best manage the assets and responsibilities going forward.
 - a) Not really a new responsibility for the County. Since 1977 HCRA has required Counties in FL to provide for Indigent Care. Currently, based on Columbia counties population, Annual HCRA Liability for Indigent Care was \$270,044 for 2023-2024 and is \$272,564 for 2024-2025. There are two current County Staff listed on the HCRA Reporting Website link already providing administrative services under this act in Columbia County.
 - b) The County has the ability to Levy Taxes for these needs. FS 154.02 Establishes the process by which Counties can establish a County Health Department Trust Fund to provide Public Health Services. FS 154.02, Section (1), says: "each county in the state with a population exceeding 40,000 and not exceeding 100,000, according to the last state census, may levy an annual tax not exceeding 1 mill". Further language in the Chapter even allows for the County to reclaim a portion of any unused funds. I can find no language showing that a referendum is required to enable this additional millage collection.

- c) Direct local accountability. The County is governed by elected officials and each election cycle will provide the voters a new opportunity to show their approval or dissatisfaction with the direction of the appointed dependent "to be created" board.
- d) Less bureaucracy. Much less replication of positions, personnel or processes is required under a dependent entity or advisory board type structure. This structure is also less prone to graft and corruption and holds elected officials responsible as part of the normal election cycle process requiring no additional effort through other constitutional offices.
- 2) Require the receiving entity to partner with the City of Lake City and engage in a Comprehensive Community Planning effort to create a Redevelopment Plan for the collective assets, including those which may be currently under obligation for use by other entities and any that may cease to be so obligated for any reason.
 - a) The funds currently controlled by the LSHA are more than adequate to support a substantial twoyear Community Planning process with deep community involvement and participation by the adjacent community, Columbia County and City of Lake City residents, both controlling governments and all local and regional stakeholders. A budget of 250K should take this concept through the final plan and to the point of drafting new LDR's and approval of an overlay district.
 - b) The Community is ready for this. Dylan Adams and I recently held a Mixed-Use Symposium with the help of JB Pro and many other regional planning professionals back in July right here in Lake City at the only "mixed use" building downtown @ The Blanche Hotel. We had regional Developer Louis Diaz, creator of Town of Tioga, share his story and cast a vision for good growth here that was well received and a symposium speaker Bryan Thomas, CPM, former Director of Planning & Economic Development in Newberry is now the COLC City Planner. HAYMAR Group, LLC, also started to prepare a proposal to help the city with this and I've attached some of this info for further reference.
 - c) The process I describe is how this is done today, all over the SE USA. Don't shortchange our community. Support our community's engagement in the planning process and give us the same resources other communities have had to create fantastic long-term outcomes. You can require this and Columbia County can make it happen and you can both share the credit!
- Stop frittering away the available LSHA resources on dated processes with no substantial positive
 additive impacts or are likely not sustainable and fully rely on substantial capital expense and recurring
 costs to manage.
 - a) I have read recently about LSHA plans to spend several million dollars on the refit and reconstruction of non "purpose built" structures to better provide localized community health services on LSHA property. This is not how this should be accomplished imho.
 - b) Modern Healthcare Facilities are built all the time by the private sector can and this could be better accomplished and managed through partnership with a developer who can "purpose build" a facility for a local Tenant to deliver the services imagined as I understand them.
 - c) The difference in process I propose has two substantial immediate outcomes. First, the LSHA funds are not spent up font and the facility to be built is built by private parties and goes on the tax rolls (inside the CRA TIFF District) and sales and ad valorem tax is collected in perpetuity on a 2-3 million MOL valuation. Second, there is NO ongoing facility maintenance or management required by the partner entity. The LSHA- CCBOCC- structure to be created would simply provide "rent assistance" allowing it to control the design and require performance outcomes as desired for a much smaller fixed annual cost. Paying 100-120K per year in guaranteed "rent" will support the private development and investment to create a new best in class urgent care medical facility on LSHA property. In other words, the 2.5 million dollars in "construction and remediation" expenses I read about LSHA considering spending to get Palms to open a clinic would really only require spending the annual interest earned on that same amount at today's rates!

See additional info attached.

mulhar)

Sincerely,

Tim Williams

Random Examples of Private Sector Medical "Special Use" Construction for Lease Back NNN or NN Sale in SE USA on 1/6/2025, from my friends at SIG (1 of 6 Commercial Brokerage outfits I work with regularly):







INVESTMENT HIGHLIGHTS

- . Over 10 Years Remaining on a Long-Term Double Net (NN) Lease
- 10% Rent Increases Every 5 Years
- DaVita Dialysis is a Fortune 500 Company and Leading Provider of Kidney Care in the United States With Over 3,113 Locations Serving 250,000+ Patients
- Corporately Guaranteed Lease Backed By DaVita Inc (NYSE, DVA);
 DaVita Generated \$12.14 Billion in Revenue (2023)
- 2019 Build-to-Suit





Tenant Overview

Area Overview

Tenant: AFC Urgent Care | Dunn, NC
Premises: 4,216 SF
Renewal Options: 6 x 5 Year

Options

Lease Expiration: 11/01/2039 Lease Type: Absolute NNN Rental increases: 8% every 5 years

Sands Investment Group is Pleased to Exclusively Offer For Sale the 4,216 SF AFC Urgent Care Absolute NNN Located at 2100 West Cumberland



\$9.2 BILLION IN SALES

Leverage our Platform List with SIG

Some other examples available in the SE USA:











ADVENT HEALTH BRANDON, FL ORLANDO HEALTH MEDICAL

BLUE CROSS MEDICAL MIAMI, FL

\$2,390,000

Cap Rate: 5.01%

Annual Rent: \$119,739

14 Yrs Lease

\$6,000,000

Cap Rate: 6.50%

Annual Rent: \$390,000

5 Yrs Lease

\$3,375,000

Cap Rate: 5.20%

Annual Rent: \$175,500

15 Yrs Lease

\$5,601,000

Cap Rate: 6%

Annual Rent: \$336,048

7 Yrs Lease

Brand New 15 Yr. Corp NNN Lease

One of the Fastest Growing Urgent Care Providers in U.S. High Profile Location within Dense Retail Trade Area
2731 Allison-Bonnett Memorial Dr. Hueytown, AL 35023

Tenant Trade N
Lease Expiration
Term Remainin, Lease
Base Rent
Rental Adjustment
Coption Periods

Colliers

Colliers

Colliers

PRIC	ING DETAILS
List Price	\$4,145,000
CAP Rate	6.55%
Annual Rent	\$271,460
Taxes	NNN
Insurance	NNN
CAM	NNN
LEAS	E ABSTRACT
Tenant Trade Name	Fast Pace Health
Lease Start	November 17, 2022
Lease Expiration	March 31, 2038
Term Remaining On Lease	14+ Years
Base Rent	\$271,460
Rental Adjustments	10% Increases Every 5 Years 4/1/2029: \$298,605.96

3 - 5 Year Option Periods 10% Increases Every 5 Years 4/1/2038: \$361,313.28 4/1/2043: \$397,444.56

Tenant Responsible

4/1/2048: \$437,189.04 NNN Lease

Landlord Responsible

fastpace health

QUALITY CARE CLOSE TO HOME

Since building their first urgent care clinic in Collinwood, TN in 2009, Fast Pace Health has been committed to bringing quality, affordability, and accessibility to underserved rural communities. Today, their network of 250+ healthcare centers span across TN, KY, LA, MS, IN, and AL. Fast Pace Health is more than just urgent care. Their services include primary care, orthopedics, dermatology, behavioral health, physical therapy, and telehealth.

As a locally-staffed network of medical providers, Fast Pace Health is dedicated to positively impacting each community they serve, from hiring local people and firms, to supporting local initiatives, charitable organizations, and events.





258 Clinics

With 250+ clinics, Fast Pace Health is dedicated to improving healthcare access through convenient and affordable solutions in the communities they serve.

6 States

Servicing Tennessee, Kentucky, Louisiana, Mississippi, Alabama, and Indiana.

2,000 Employees

Creating better healthcare experiences, they bring together a diverse, world-class team of healthcare providers and experts – dedicated to improving how patients and providers experience healthcare.

TENANT OVERVIEW

QUICK, CONVENIENT, AND AFFORDABLE HEALTHCARE

- Beyond Urgent Care
- Fastpace Health is there for preventative Primary Care, Orthopedic,
 Dermatology, and mental health care needs
- Easy Access to Care Every Day
- Open 7 days a week, with the convenience of short wait times
- Telehealth Services
- Whether it's seasonal allergies, flu symptoms, skin rashes, or COVID-19 concerns - medical care is available from the comfort of the patient's home

2022 HIGHLIGHTS

- · Launched Physical Therapy Services
- Providing access to patients in need of a variety of PT services for injuries, aftercare, and beyond
- Partnered with First Care Clinics
- Further expanding their urgent care clinic footprint and increasing access to care through Fast Pace Health's ancillary services for underserved rural populations in Kentucky

Links to information about the health benefits of well-planned Urban Design, Placemaking and Mixed Use development.

Health benefits of New Urbanism | CNU

cs-health.pdf

Health | Complete Streets

Complete Streets | US Department of Transportation

Land use, transport, and population health: estimating the health benefits of compact cities

Healthy Cities: Transitioning to Polycentric Cities Can Enhance Population Health | SpringerLink

How walkable places lead to healthier people | CNU

https://1000fof.org/wp-content/uploads/2024/11/EconomicDevelopmentFlorida Report v2 compressed.pdf

Links to information on the tax benefits of implementing this strategy:

Placemaking Is the Key to Successful Mixed-Use Development

https://newurbannetwork.com/best-bet-tax-revenue-mixed-use-downtown-development/

https://sonoraninstitute.org/files/pdf/about-town-building-revenue-for-communities-final-report-06152012.pdf

https://www.cnu.org/resources/economic-benefits

https://www.planetizen.com/node/45087

https://1000fof.org/wp-content/uploads/2024/11/EconomicDevelopmentFlorida Report v2 compressed.pdf

Below is a "starting point example" from a proposal we were preparing for the COLC in their pitch for repurposing the LSHA Property:

Sections that would be created to follow the below "excerpt" would include sections on education, analysis and information on Infrastructure, Residential and Commercial Building Form, Parking and transportation planning, Relationship of Floor Area Ratio to all these things and of course Density. Environmental and stormwater design and incorporation and multi modal methodologies to connect this area to other areas of the community would be considered and included as well.

There is no "reinventing the wheel" required to accomplish this, just community engagement, education and an end focus on including the particular vision of the local community and our stakeholders to better define this Downtown Redevelopment Area's unique desired outcome expected from this process... and ultimately solicit and present small, medium and large scale developers the opportunity to invest private sector funds "for profit" into the vertical construction and development process to deliver and accomplish components of the Final Plan's vision which will yield be "as of right uses" allowed, created and codified through this creative and inclusive process.

This has been done at small, medium and large-scale, all-over FL and the SE USA. Columbia County is best positioned to be responsible for the current LSHA property and the right entity to engage in and accomplish this process as described for all the vacant land, in the lead role, but through partnering with the City of Lake City.

It is a well understood process with provable outcomes and we have access to best-in-class professionals who do this all over the world, all the time, who would be interested in helping make it happen here.

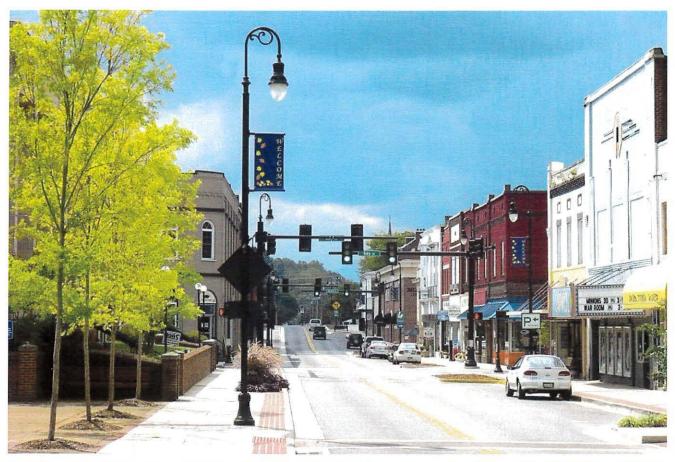
COLC Proposal Action Plan - Where to begin? Street Design!

https://smartgrowthamerica.org/what-are-complete-streets/

https://youtu.be/QBBte0uLHNk

https://www.1000friendsofflorida.org/wp-content/uploads/2015/02/1502-dover-final.pdf

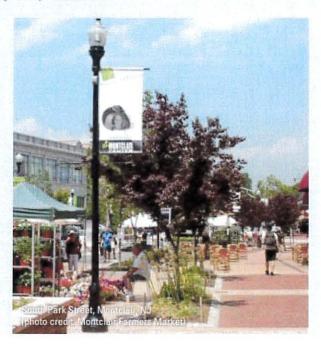
A Blueprint for small-city reinvestment | CNU





Local Business and Property Values

Improving access for pedestrians, bicyclists, and transit riders can benefit local businesses and property values. In one example, businesses along Valencia Street in San Francisco saw their sales increase by 60 percent following the addition of a bicycle lane.20 In Washington, D.C., street design improvements along Barracks Row helped attract 40 new businesses and nearly 200 new jobs.21 In Mountain View, California, the addition of sidewalk cafes and pedestrian space was followed by private investment of \$150 million.22 In Indianapolis, property values within one block of the 8-mile-long Cultural Trail increased nearly 150 percent between 2008 and 2015, which translates to an increase of \$1 billion23 in assessed property value. In New Jersey, Complete Streets improvements along South Park Street in Montclair supported an influx of new businesses and revitalization of the downtown.



2017 Complete Streets Design Guide NJ Chapter 1, Page 7, above, and Chapter 3: Complete Streets Toolbox page 36:

The primary objective in designing sidewalks is to provide continuous, safe, and accessible pathways for pedestrians. Sidewalks should be designed to follow as much as possible the natural path of travel. In some cases, it is more desirable for a sidewalk to divert from that path to provide a more adequate facility or a greater degree of separation between the sidewalk and the roadway.



Design Guidance

Many reference guides describe the sidewalk as having three distinct elements or functions: the Frontage Zone, the Pedestrian Zone, and the Planted Buffer/Furnishing Zone. Given the diversity of contexts throughout New Jersey, the needs and therefore design standards differ greatly around the state.



Frontage Zone

In locations where buildings are adjacent to the sidewalk, the frontage zone provides a buffer between passing pedestrians and opening doors and other architectural elements. The frontage zone keeps the pedestrian zone safe and clear of obstacles and obstructions.

Pedestrian Zone

The pedestrian zone is the area of the sidewalk that is intended specifically for pedestrian travel. The pedestrian zone should be free of any physical obstructions, including street furniture. plantings, and surface utilities. The quality of the sidewalk surface in the pedestrian zone is extremely important and must meet accessibility standards referenced on page 34. The material should be smooth, level, and have minimal gaps or rough surfaces.

Planted Buffer/Furnishing Zone

Where there is sufficient space, a planted buffer/furnishing zone should be established to delineate space for objects that would otherwise obstruct pedestrian movement, as well as provide a buffer for pedestrians from the adjacent roadway. This zone is where street trees, stormwater elements, street lights, signage, hydrants, benches, trash and recycling receptacles, parking meters, signal and lighting control boxes, utility poles, and other potential obstructions should be located.



Fig. 12.1
From: Healthy Cities: Transitioning to Polycentric Cities Can Enhance Population Health



(a) Compact area

(Higher population density, mixed land use and better street connectivity)

(b) Dispersed area

(Low population density, single land use and limited street connectivity)

Archetypal comparison of (a) compact and (b) dispersed urban areas. (Source: Authors)

Notes: Street Design is a key element to all redevelopment success and we're fortunate in downtown Lake City to have some traditional "grid pattern" still in place. The LSHA Property lies across much of the vacant underutilized land in Downtown Lake City and we must apply appropriate Street Design as the fundamental starting place for redevelopment. Countless examples exist and there is a full cohort of practitioners and code available to apply and replicate to accomplish this. In fact, DOT has both design criteria and programs in place to support this component of the project. Our community has a leg up and while substantial re-design IS required, like many other areas, the base grid pattern and the existing infrastructure likely doesn't have to be created from scratch, or demolished completely and re-done.

Exhibit "A" - Draft list of LSHA Parcels

THE	ampton d. 10/31/2024	unty Property Appraiser		C.	ownload / Print Repor Records 1 thru 30 (30 Total)) Pi
	Parcel ID	Owners Name	Address	Brief Description	Recent Sale	Ma
	00-00-00	LAKE SHORE HOSPITAL AUTHORITY OFRIVATE HOSPITALS	440 NE LEON ST LAKE CITY	N DIV ALL BLOCK 101, 103, 111 & 112 & N 1/2 BL 102, EX BEG NW COR, RUN E 66 20 FT	K 4/2/1996 \$100	GI Ma
	00-00-00	LAKE SHORE HOSPITAL AUTHORITY		N DIV: \$1/2 BLOCK 102 & THAT PORTION LYING OF CIRCLE DRIVE & S OF BLOCK 102 &	i N	G
	00-00-00 11793-000	LAKE SHORE HOSPITAL AUTHORITY	P O BOX 988 LAKE CITY, FL		T 5/9/2017 \$1,700	G
	00-00-00 11794-000	LAKE SHORE HOSPITAL AUTHORITY		N DIV. CENTER 1/3 OF SE1/4 OF LOT 75 BLOCK NAT ADAMS S/D, TD 1336-2188		9
	00-00-00 12016-000	LAKE SHORE HOSPITAL AUTHORITY	11 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	N DIV SE1/4 BLOCK 81, ALSO BEG SW COR RI N 107 FT, E 95 FT, S 107 FT, W 95 FT	IN. 10/5/2006	9 6
	00-00-00	LAKE SHORE HOSPITAL AUTHORITY	126 NE LEON ST LAKE	N DIV. 110 FT N & S BY 105 FT E & W IN NE CO		9
	12017-000 00-00-00	LAKE SHORE HOSPITAL AUTHORITY	CITY 419 N MARION AVE			3 0
	12018-000	LAKE SHORE HOSPITAL AUTHORITY	LAKE CITY 369 N MARION AVE	1010-2770), WD 1150-796, N DIV THE N 80 FT OF BLK 82, ORB 878-1206, 1	\$255,000 ND 9/4/2007	
	12019-000	20 (MICANT COMMERCIAL) LAKE SHORE HOSPITAL AUTHORITY	LAKE CITY	1045-407, WD 1130-220 N DIV: BEG NW COR, RUN E 105 FT, \$ 70 FT, W	\$253,000	
	12027-000	20 (VACANT COMMERCIAL) LAKE SHORE HOSPITAL AUTHORITY	CITY	FT, N 70 FT TO POB, BLOCK 84. OR N DIV. MIDDLE 1/3 OF W1/2 OF BLOCK 84, 70 F	\$131,000) h
	12028-000	20 (VACANT)	LAKE CITY	& S BY 105 FT E & W. PROB #99-11	\$55,000) M
	12029-000	LAKE SHORE HOSPITAL AUTHORITY 25 (VACANT)	CITY	N DIV: BEG NE COR OF BLOCK 84, RUN S 70 FT 105 FT, N 70 FT, E 105 FT TO POB	\$30,000	m -
	00-00-00 12033-000	LAKE SHORE HOSPITAL AUTHORITY 20 (VACANT)	LAKE CITY, FL	N DIV. BEG INTERS HERNANDO & LEON ST, RU ALONG E SIDE HERNANDO ST 70 FT, E 1	OITHEOTE SO	1
	00-00-00 12034-000	LAKE SHORE HOSPITAL AUTHORITY 29 (NAC INSTITUTIONALIEX)	181 NE LEON ST LAKE CITY	N DIV: BEG INTERS OF CALHOUN & LEON ST, F N ALONG W SID OF CALHOUN ST 105 FT.	SUN 10/2/2006 \$30,000	
	12035-000	LAKE SHORE HOSPITAL AUTHORITY 20 (MCANT)	171 NE LEON ST LAKE CITY	N DIV. BEG 100 FT E OF INTERS HERNANDO LEON STREETS, RUN E 56 FT ALONG LEON S		
	00-00-00 12037-000	LAKE SHORE HOSPITAL AUTHORITY	451 NE HERNANDO AVE LAKE CITY	N DIV. BEG E SIDE OF HERNANDO ST 70 FT N INTERS OF LEON & HERNANDO ST, RUN N		
	00-00-00 12061-000	LAKE SHORE HOSPITAL AUTHORITY	199 NE LEON ST LAKE CITY	N DIV: \$1/2 BLOCK 90. PROB#03-49-CP 976-44 THRU 455, 992-1222, WD 997-847, 1002		3 (
	00-00-00 12065-000	LAKE SHORE HOSPITAL AUTHORITY	227 NE HILLSBORO ST	N DIV SE14 EX 10 FT OFF W SIDE BLOCK 92 0 875-1757, 918-1525, WD 1007-1066.	RB 4/20/2006	6
	00-00-00	LAKE SHORE HOSPITAL AUTHORITY		N DIV. W1/4 OF BLOCK 93, ORB 721-144, 738-3	\$320,000 08, 10/31/2006	3 (
	12069-000 00-00-00	LAKE SHORE HOSPITAL AUTHORITY		860-2297, 932-634, CORR DEED 935- N DIV: N1/2 OF BLK 94 EX BEG SW COR OF BLK	\$250,000	ś
	12071-002	(OFFICE BLD 1STY) LAKE SHORE HOSPITAL AUTHORITY	CITY 244 NE WASHINGTON	N 109.95 FT FOR POB, CONT N 46.43 N DIV: W1/2 OF BLOCK 95, ORB 646-122, 805-13	34. 1/18/2007	1 S
	12072-000	20 (VAC INSTITUTIONAL-EX) LAKE SHORE HOSPITAL AUTHORITY	ST LAKE CITY	830-353, 902-702, CT 1053-2527, N DIV. E1/2 BLOCK 95, ORB 368-713-716, WD 10	\$205,000	27, 2
	12073-000	20 (MISC COMMERCIAL) LAKE SHORE HOSPITAL AUTHORITY	ST LAKE CITY	1230. CORR WD 1109-177, WD 1109-1 N DIV: NW1/4 EX 38.66 FT E & W BY 77.75 FT N	\$205,000) 1
	12104-000	20 (RWAM-PK LOT) LAKE SHORE HOSPITAL AUTHORITY	LAKE CITY, FL	IN NE COR BLOCK 102 EX RD 751-	\$20,000) 1
	12112-001	30 (PROFESS SVC/BLD)		N Drv: \$1/2 OF BLOCK 104, ORB 458-684, (PHYSICIANS OFFICES & DIALYSIS CENTER)		A
	00-00-00 12113-000	LAKE SHORE HOSPITAL AUTHORITY 20 (PROFESS SYCHLD)	TER LAKE CITY	N DIV. N1/2 OF BLOCK 104, ORB 344-174, PRO 93-229 CA, 779-510, 779-510, 782-20	\$240,100	
	32-3S-17 13120-001	LAKE SHORE HOSPITAL AUTHORITY M (NON AG ACREAGE)	LAKE CITY, FL	COMMAT NE COR OF SEC. RUN W 736.49 FT F POB, S 707.49 FT CONT S 151.97 FT, W	40000000) (
	32-3S-17 13122-000	LAKE SHORE HOSPITAL AUTHORITY 20 (VACANT)	259 NE FRANKLIN ST LAKE CITY, FL	E DIV. BEG 210 FT E OF INTERS OF E LINE OF CHURCH ST & N LINE OF NW1/4 OF NE1/	N 10/26/1995 \$80,000	
	32-38-17 13123-000	LAKE SHORE HOSPITAL AUTHORITY 20 (RVMH.PK.LOT)	259 NE FRANKLIN ST LAKE CITY, FL	E DIV: BEG NE COR OF NW1/4 OF NE1/4, RUN 401 FT, W 566 FT TO E LINE OF CIRCLE	9	Q M
	32-3S-17 13124-000	LAKE SHORE HOSPITAL AUTHORITY	259 NE FRANKLIN ST LAKE CITY, FL		F	2
	00-00-00 12032-000	LAKE SHORE HOSPITAL AUTHORITY OF COLUMBIA COUNTY FLORIDA	The second secon	N DIV: N1/2 BLOCK 85: 390-555, 390-556, PB 81 1394, THRU 1401, DC 877-1398, CT	7- 6/15/2017 \$0	
	00-00-00 12071-000	LAKE SHORE HOSPITAL AUTHORITY OF COLUMBIA COUNTY, FLORIDA 20 (OFFICE BLD 15TY)	259 NE FRANKLIN ST LAKE CITY	N DIV \$12 OF BLOCK 94, (LAKE SHORE HOSP) OFFICES BUILDING-OLD JAIL).	TAL 12/13/2006 \$0) (

^^ Click Parcel ID for Parcel Details

Click Here to display GIS Map ^^

Staff Report January 13, 2025 Regular Meeting

NEW	1
RENEW	(
INELIGIBLE (INCOME OR OTHER)	(
TOTAL CLIENTS SEEN IN OFFICE IN DECEMBER	1
ACTIVE MEMBERS	19
PUBLIC VISITS	3
PRIMARY CARE VISITS – 2 LOCATIONS	
November, 2024	4
YTD (Fiscal year October – Sept)	14
PHARMACY USAGE	
November 2024	
PATIENTS SERVED	0
RX'S FILLED	O