

**SEMINOLE COUNTY GOVERNMENT
AGENDA MEMORANDUM**

SUBJECT: Seminole Baseball Lease Agreement

DEPARTMENT: Library & Leisure Services **DIVISION:** Administration

AUTHORIZED BY: _____ **CONTACT:** J. Suzy Goldman **EXT.:** 1600

Agenda Date 1/9/07 **Regular** **Consent X** **Work Session** **Briefing**
Public Hearing – 1:30 **Public Hearing – 7:00**

MOTION/RECOMMENDATION:

Approve and authorize the Chairman to execute amendment to the lease agreement with Seminole Baseball, Inc. for the rights to facilities at Soldier's Creek Park through June 30, 2007.
(District 2 – Commissioner McLean)

BACKGROUND:

In June of 1994 the County entered into a 10 year lease agreement with Seminole Baseball, Inc. for the use of fields at Soldier's Creek Park. The term of the agreement ended on April 8, 2004 with the option of an additional ten year renewal period. Due to the changing recreational needs of the County, the lease was renewed through June 30, 2006 and then through December 31, 2006. As plans for the use of Soldiers Creek Park are not yet finalized, an amendment to the lease is requested extending the term through June 30, 2007. This will allow for baseball programs to continue while the design process is completed.

Reviewed by:
Co Atty: _____
DFS: _____
Other: _____
DCM: _____
CM: _____

File No. 32 CLLA

**RENEWAL TO NON-EXCLUSIVE LEASE
SEMINOLE COUNTY AND SEMINOLE BASEBALL INCORPORATED**

THIS RENEWAL is made and entered into this 14th day of December, 2006 and is to that certain Agreement made and entered into on the January 9, 2006, as amended on June 26, 2006, between **SEMINOLE BASEBALL INCORPORATED**, whose address is Post Office Box 180662, Casselberry, Florida 32718, hereinafter referred to as "TENANT," and **SEMINOLE COUNTY**, a political subdivision of the State of Florida, whose address is Seminole County Services Building, 1101 East First Street, Sanford, Florida 32771, hereinafter referred to as "COUNTY".

W I T N E S S E T H:

WHEREAS, TENANT and COUNTY entered into the above-referenced Agreement on January 9, 2006, as amended on June 26, 2006, for non-exclusive park use for baseball activities; and

WHEREAS, the parties desire to renew the Agreement so as to enable both parties to continue to enjoy the mutual benefits it provides,

NOW, THEREFORE, in consideration of the mutual understandings and agreements contained herein, the parties agree to amend the Agreement as follows:

1. **RENEWAL**. The Agreement is hereby renewed for the term of six (6) months from January 1, 2007, through June 30, 2007, unless terminated sooner as provided for therein.

2. Except as herein modified, all terms and conditions of the Agreement, as amended, shall remain in full force and effect for the term of this Renewal, as originally set forth in said Agreement.

NEW Address: 627 Estates Place
Longwood, FL 32779

IN WITNESS WHEREOF, the parties hereto have executed this instrument for the purpose herein expressed.

ATTEST:

James Barth
James Barth
(CORPORATE SEAL)

Seminole Baseball Incorporated

By:

Lee A. Siler
LEE A. SILER, President

Date:

12-14-06

ATTEST:

BOARD OF COUNTY COMMISSIONERS
SEMINOLE COUNTY, FLORIDA

By:

Carlton Henley
CARLTON HENLEY, Chairman

Date:

Maryanne Morse
MARYANNE MORSE
Clerk to the Board of
County Commissioners of
Seminole County, Florida.

For the use and reliance
of Seminole County only.
Approved as to form and
legal sufficiency.

As authorized for execution
by the Board of County Commissioners
at their _____, 20____
regular meeting.

County Attorney

AC/jr
11/13/06
Seminole Baseball Renewal-2007

CERTIFICATE OF INSURANCE

1309470

ISSUE DATE (MM/DD/YY)
12/19/06

PRODUCER PHONE (A/C): 1-800-426-2889
K & K Insurance Group, Inc.
1712 Magnavox Way
P.O. Box 2338
Fort Wayne, In 46801

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

COMPANIES AFFORDING COVERAGE

INSURED
SPORTS, LEISURE & ENTERTAINMENT RPG
D/B/A SEMINOLE BASEBALL, INC.
627 ESTATES PLACE
LONGWOOD, FL 32779

COMPANY LETTER **A** NATIONWIDE MUTUAL INSURANCE CO
COMPANY LETTER **B**
COMPANY LETTER **C**

COVERAGES

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN. THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.
NC=NOT COVERED

CO. LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS (in thousands)	
A	General Liability <input checked="" type="checkbox"/> Commercial General Liability <input type="checkbox"/> Claims Made <input checked="" type="checkbox"/> Occur. <input type="checkbox"/> Owner's & contractors Prot. <input type="checkbox"/> _____	RPG0001780700	12:01AM 12/29/06	12:01AM 12/29/07	General Aggregate	\$ 2000
					Products-Comp/Ops Aggregate	\$ 2000
					Personal & Advertising Injury	\$ 2000
					Each Occurrence	\$ 2000
					Fire Damage (Any one fire)	\$ 300
					Medical Expense (Any one person)	\$ 5
					Participant Legal Liability	\$ 2000
A	Automobile Liability <input type="checkbox"/> Any auto <input type="checkbox"/> All owned autos <input type="checkbox"/> Scheduled autos <input checked="" type="checkbox"/> Hired autos <input checked="" type="checkbox"/> Non-owned autos <input type="checkbox"/> Garage Liability <input type="checkbox"/> _____	RPG0001780700	12:01AM 12/29/06	12:01AM 12/29/07	Combined Single Limit	\$ 2000
					Bodily Injury (per person)	\$
					Bodily Injury (per accident)	\$
					Property Damage	\$
					Each Occurrence	\$
	Excess Liability <input type="checkbox"/> Other than Umbrella form				Aggregate	\$
					Statutory	\$
	Workers' Compensation and Employers' Liability				Each Accident	\$
					Disease-Policy Limit	\$
					Disease-Each Employee	\$
					AD&D	\$ NC
A	Participant Accident	RPG0001780700	12:01AM 12/29/06	12:01AM 12/29/07	Primary Medical	\$ NC
					Excess Medical	\$ 250
					Weekly Indemnity	\$ X NC
						\$

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/RESTRICTIONS/SPECIAL ITEMS
SPORT:BASEBALL - AGE GROUP 12 & UNDER, AGES 13-15 & AGES 16-19
CERTIFICATE HOLDER IS LISTED AS AN ADDITIONAL INSURED

CERTIFICATE HOLDER

CANCELLATION

SEMINOLE COUNTY PARKS & RECREATION
264 WEST NORTH STREET
ALTAMONTE SPRINGS, FL 32714

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE