

STATE OF FLORIDA AMENDMENT TO STATEWIDE VOLUNTARY PREKINDERGARTEN PROVIDER CONTRACT Form DEL-VPK 20A

I. General Amendment Information

Amendment Number: 66611	
(I. Parties and Terms of Contract Amendment This amendment to the Statewide Voluntary Prekindergarten (VPK) Provider Contract is entered into petween the Early Learning Coalition (COALITION) of <u>Pasco and Hernando</u> , and <u>Hernando</u> County School District, VPK provider (PROVIDER).	
WHEREAS, on7/1/2025_ COALITION ofPasco and Hernando entered into the Contract with PROVIDER to provide VPK services; and	
WHERAS, PROVIDER desires to amend this Contract to replace, delete, or supplement one of the following provisions of the existing Contract; and	
WHEREAS, COALITION of <u>Pasco and Hernando</u> agrees to amend the Contract as indicated in Section III.	
III. Amendments	
The Contract is hereby amended to replace the following as noted below (check each applicable box for the modified term(s).	
☐ Location of the Provider's Principal Office. The deleted address is:	
The replacement address is:	
- _•	
Reason for modification:	
 -	
Provider Type (Modification to DEL-VPK 20PP). The original provider type selected is:	
A child care facility licensed under s. 402.305, F.S.	
☐ A family day care home licensed under s. 402.313, F.S.	
☐ A large family child care home licensed under s. 402.3131, F.S.	
☐ A nonpublic school exempt from licensure under s. 402.3025(2), F.S., that also either holds a current Gold Seal Quality Care designation under s. 1002.945 F.S., or accredited by an accrediting association under s. 1002.55(3)(b)1., F.S.	
current Gold Seal Quality Care designation under s. 1002.945 F.S., or accredited by an accrediting	

accrediting association under s. 1002.55(3)(b)1., F.S.
The new provider type selected is:
☐ A child care facility licensed under s. 402.305, F.S.
☐ A family day care home licensed under s. 402.313, F.S.
☐ A large family child care home licensed under s. 402.3131, F.S.
☐ A nonpublic school exempt from licensure under s. 402.3025(2), F.S., that also either holds a current Gold Seal Quality Care designation under s. 1002.945 F.S., or accredited by an accrediting association under s. 1002.55(3)(b)1., F.S.
☐ A faith-based child care provider exempt from licensure under s. 402.316, F.S., that also either holds a current Gold Seal Quality Care designation under s. 1002.945 F.S., or accredited by an accrediting association under s. 1002.55(3)(b)1., F.S.
Reason for modification:

☑ Additional Provider Location. (Modification to DEL-VPK 20, Exhibit 1). The information for the additional nonpublic VPK site or public school being added to the Provider Location List is as follows:
A. Location Number (optional) <u>26960</u> B. Location Legal Name <u>Hernando County School District</u> C. Doing Business As Name (if applicable) <u>Winding Waters K8</u> D. Physical Address <u>12240 VESPA WAY WEEKI WACHEE, FL 34614-3066</u> E. Employer Identification Number (EIN) <u>596000647</u> F. School Year (Y/N) <u>N</u> G. Summer (Y/N) <u>N</u>
Updated Provider Location List in the format described in Exhibit 1 must be attached.
Reason for modification: <u>Hernando County will now offer VPK at the Winding Waters location for the 25-26 Program Year.</u>
☐ Removal of a Provider Location. (Modification to DEL-VPK 20, Exhibit 1). The information for the removal of a nonpublic VPK site or public school being removed from the Provider Location List is as follows:
H. Location Number (optional) I. Location Legal Name J. Doing Business As Name (if applicable) K. Physical Address L. Employer Identification Number (EIN) M. School Year (Y/N) N. Summer (Y/N)
Updated Provider Location List in the format described in Exhibit 1 must be attached.
Reason for modification:

IV. Execution of Amendment

The effective date of the Amendment shall be the date that it is signed by both parties. All provisions in the Contract and any attachments/exhibits in conflict with this Amendment shall be and are hereby changed to conform to this Amendment. All provisions not in conflict with this Amendment are still in full force and effect in accordance with its terms and are to be performed at the level and in the manner specified in the Contract.

Warranty of Authority. Each person signing this Amendment warrants that he or she is duly authorized to do so and to bind the respective party to the Amendment.

Signature of President/Vice President/ Secretary/Officer/Owner/Principal/Other Authorized Representative	Print Name
☐ By Electronic Signature	
Title	Date
Provider's Additional Signatory (If required by the Provider)	Print Name
☐ By Electronic Signature	
Title	Date
Provider's Additional Signatory (If required by the Provider)	Print Name
☐ By Electronic Signature	
Title	Date

Signature of Authorized Coalition Representative	Print Name
☐ By Electronic Signature	
Title	Date

Approved as to Content & Form
Caroline Mockler, Esq.
Staff Counsel, HCSD
8:36 am, 07/01/2025

^{*} Electronic signature: By providing this electronic signature, I attest that I understand that electronic signatures are legally binding and have the same meaning as handwritten signatures. I confirm that internal controls have been maintained, and that policies and procedures were properly followed to ensure the authenticity of the electronic signature.

Exhibit 1: Provider Location List

Provider Name: <u>Hernando County School District</u>

		Changed?
Location Number	26960	
Location Legal Name	Hernando County School District	
Doing Business As Name	Winding Waters K8	
Physical Address	12240 VESPA WAY WEEKI WACHEE, FL 34614-3066	
Employer Identification Number	596000647	
School Year	No	
Summer	No	
Composite Program Assessment Score		
Official Use Only	Added; Reason: Hernando County will now offer VPK at the Winding Waters location for the 25-26 Program Year.	Yes