



Florida Department of Environmental Protection
CONCESSIONAIRE QUARTERLY EVALUATION

Park: Florida Caverns State Park

Concessionaire: Florida Caverns Gift Shop

Fiscal Year: 2023/2024

Quarter: JFM

1. GROSS SALES:

	Point of Sale	Month	Previous Yr. Sales	Current Yr. Sales	% +/-	Previous Yr. Expenses	Current Yr. Expenses
A.	2023	July	\$187,448.61	\$239,449.36	0.00%	\$161,213.65	\$172,535.55
		August	\$102,092.30	\$114,757.70	12.41%	\$160,675.64	\$202,932.77
		September	\$86,904.99	\$101,949.24	17.31%	\$94,103.70	\$126,537.53
		Subtotal	\$376,445.90	\$456,156.30	21.17%	\$415,992.99	\$502,005.85
B.	2023	October	\$76,185.59	\$95,829.69	25.78%	\$71,383.52	\$102,956.84
		November	\$64,817.64	\$106,443.23	64.22%	\$104,149.79	\$95,609.21
		December	\$59,770.52	\$90,543.12	51.48%	\$73,153.01	\$183,404.28
		Subtotal	\$200,773.75	\$292,816.04	45.84%	\$248,686.32	\$381,970.33
C.	2024	January	\$81,466.14	\$81,590.81	0.15%	\$72,958.39	\$254,616.36
		February	\$79,455.12	\$98,418.98	23.87%	\$58,333.53	\$86,410.24
		March	\$176,568.14	\$198,534.54	12.44%	\$101,177.58	\$89,569.72
		Subtotal	\$337,489.40	\$378,544.33	12.16%	\$232,469.50	\$430,596.32
D.	2024	April	\$120,284.20	\$130,047.10	8.12%	\$136,504.32	\$135,848.43
		May	\$131,358.65	\$118,329.87	-9.92%	\$94,792.00	\$119,864.97
		June	\$190,524.54	\$213,112.74	11.86%	\$96,029.14	\$119,379.24
		Subtotal	\$442,167.39	\$461,489.71	4.37%	\$327,325.46	\$375,092.64
TOTAL GROSS SALES			\$1,356,876.44	\$1,589,006.38	17.11%	\$1,224,474.27	\$1,689,665.14

Comments required for change in gross sales:

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PLEASE ATTACH QUARTERLY SALES TAX RETURN & INCOME STATEMENT FOR THE QUARTER.

2. ACCOUNTING

		Yes	No	N/A
A.	Books of original entry are maintained daily and kept on file for audit purposes (3 years minimum).	x		
B.	Source documents, including cash register tapes, are maintained on file for audit purposes (3 years minimum).	x		
C.	Inventories are conducted on a schedule acceptable to Park Manager's standards.	x		
D.	All invoices and checks are kept on file.	x		
E.	Purchases for supplies or services by the Concessionaire are made by check or through an imprest fund replenished by check.	x		
F.	Refunds are substantiated with a customer signed document using rubber stamp and ledger.	x		
G.	Adequate point of sale controls are used.	x		
H.	Sales personnel with access over cash are adequately supervised.	x		
I.	Responsibilities for receiving, depositing and recording cash receipts are assigned to different persons.	x		
J.	Personnel with access over cash do not clear cash register.	x		
K.	All sales are rung up on cash register.	x		

L.	Cash register has visual display facing customer and showing total sales transaction.	x		
M.	Cash register has dual tape system.	x		
N.	Each customer is offered a sales receipt and all points of sale have a clearly visible sign asking customers	x		
O.	Cash register drawers are closed after each transaction.	x		
P.	Pre-numbered receipts are used when specified by the agreement or when cash register is impractical.	x		

Comments required for all NO responses:

3. REPORTING/DOCUMENTATION

A. Insurance/Security

		Yes	No	Expire	Amount
1	General Liability Insurance (Department and Trustees named as additional insured)	x		2/20/2025	See 3B.
2	Automobile Insurance (Department and Trustees named as additional insured)	x		1/31/2025	See 3B.
3	Workers' Compensation	x		6/5/2025	See 3B.
4	Commercial General Liability	x		4/19/2025	See 3B.

B. List the type of security, expiration date, and amount.

FCGS General Liability -- State Farm -- Amount \$1,000,000 -- Expiration 02/20/2025
 FCGS Workers' Compensation Insurance -- Insurance Company of the West -- Amount \$1,000,000 -- Expiration 06/05/2025
 Commercial General Liability -- Players Health -- E-Bike Rentals -- Amount \$1,000,000
 Pennys Sweet Beans Coffee and Cafe -- General Liability-- AP Intego Insurance Group -- Expiration 08/13/2024
 Pennys Sweet Beans Coffee and Cafe -- Workers' Compensation Insurance -- AP Intego Insurance Group \$500,000 -- Expiration 08/13/2024

PLEASE INCLUDE COPIES OF INSURANCE POLICIES IF UPDATED FROM LAST QUARTER

C. Permits and Licenses

	Yes	No	Expire
FCGS Permits and Licenses are current	x		
Sweet Beans Food Truck Food Permit	x	Exp 6/1/2025 -- Unable to download hardcopy due to system maintenance	
Sweet Beans Food Truck Safe Serve	x		9/1/2028
Annual Food Permit	x		1/4/2025
Livery Operator Permit	x		11/18/2024

D. Commission Payments

	Yes	No	N/A
Payments are submitted accurately and on time.	x		

E. Other Required Reports and Documentation

	Yes	No	N/A	Expire	Amount
1 Annual Limited Engagement Documents are submitted accurately and by required deadline.	x			N/A	N/A
2 Annual Profit & Loss Statements are submitted accurately and by required deadline.	x			N/A	N/A
3 Monthly Gross Sales Reports are submitted accurately and by required deadline.	x			N/A	N/A

4	E-Verify Employment Eligibility Verification completed with copies of completed files for all personnel.	x			N/A	N/A
5	Sexual Offender Check completed with copies of completed files for all personnel.	x			N/A	N/A
6	Annual PCI Compliance Self-Assessment is complete, current, and on file.	x			EXP 01/2025	
7	Safety Plan provided to Park Manager and is revised and approved annually.	x			N/A	N/A

Comments required for all NO responses:

PLEASE INCLUDE COPIES OF INSURANCE POLICIES IF UPDATED FROM LAST QUARTER

4. HEALTH/SAFETY

		Yes	No	N/A
A.	Employees follow basic personal hygiene practices.	x		
B.	Food storage areas and refrigeration units are maintained in clean condition.	x		
C.	Food contact surfaces are properly maintained and cleaned.	x		
D.	All other surfaces are cleaned daily (food surface areas, floors, walls, etc.).	x		
E.	Cleaning/chemical supplies stored separately from food.	x		
F.	Cleaning/chemical supplies are in compliance with Environmental Protection Plan.	x		
G.	Leftovers are disposed of properly.	x		
H.	Food is stored properly and in appropriate containers.	x		

I.	Corrected all deficiencies noted in most recent health inspection.			x
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Comments required for all NO responses:

5. ADA/SAFETY

		Yes	No	N/A
A.	Concessionaire is located on safe and accessible route.	x		
B.	First aid kit is available and maintained. <u>Suggested, but not required for boating operations to have AED. AED available?</u>	x		
C.	Operations are equipped with EECs.	x		
D.	Facility is free of public safety hazards.	x		
E.	Provide the name of their A & I Liaison. <i>Brenda Shirah</i>	x		
F.	Accessibility and inclusion policy is made available to everyone. Employees are knowledgeable on accommodating persons with disabilities.	x		
G.	Provided accessibility information in written publications such as website and brochures.	x		

Comments required for all NO responses:

6. OPERATIONS

		Yes	No	N/A
A.	Concessionaire provides the services outlined in the terms of the Agreement.	x		
B.	Concessionaire maintains and posts operating days/hours as outlined in terms of the Agreement. (Any variances approved in writing.)	x		
C.	Inventories comply with agreed upon merchandise standards and are sufficiently stocked to meet demand.	x		
D.	Rate/Fee/Menu boards are properly maintained and prices are current.	x		
E.	Prices are fair and comparable with others in area, confirmed by Park Manager.	x		
F.	Merchandise is price marked.	x		
G.	All signage is appropriate, maintained and approved by Park Manager.	x		
H.	Sales area is neat, organized and clean.	x		
I.	Interpretive tour scripts are approved by Park Manager.	x		
J.	Website is well maintained, promotes a satisfactory image for the Park and provides information on fees and services accurately.	x		
K.	Concessionaire utilizes disposable serving supplies produced from recyclable or biodegradable materials.	x		
L.	Concessionaire offers alternative menu items such as vegetarian and gluten-free.	x		
M.	Corrects all deficiencies noted by Agreement Manager.	x		
N.	Concessionaire is open to suggestions for improving service to visitors.	x		

Comments required for all NO responses:

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7. STAFF

		Yes	No	N/A
A.	Employees are identified by either uniform or name badge, and personal appearance standards and uniforms are in compliance with the terms of the Agreement.	x		
B.	Employees are knowledgeable about the Park.	x		
C.	Employees are courteous, helpful, and ensure an understanding and use of the principles of hospitality.	x		
D.	Sufficient number of employees to service visitors.	x		
E.	Number of employees. 25	x		

Comments required for all NO responses:

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8. SPACE AND EQUIPMENT

		Yes	No	N/A
A.	Equipment maintenance is in compliance with terms of Agreement.	x		
B.	Building maintenance is in compliance with terms of Agreement.	x		
C.	Grounds maintenance is in compliance with terms of Agreement.	x		

Comments required for all NO responses:

9. CAPITAL IMPROVEMENTS

		Yes	No	N/A
A.	Schedule of Capital Improvements is maintained.	x		
B.	Capital Improvements are performed in accordance with the terms of the Agreement.	x		
C.	Any deviations from negotiated Capital Improvements are well documented and approved by the Department. Please attach documentation.	x		
D.	Capital Improvements are satisfactorily completed by scheduled deadline.	x		

Comments required for all NO responses:

Capital improvements completed in this quarter:

10. CURRENT CONTACT INFO

Phone: (850) 526-2650 Fax: _____
Brenda Shirah, Manager
Email Address: floridacavernsgiftshop@gmail.com
Mailing Address: Florida Caverns Gift Shop LLC
3345 Caverns Road, Marianna, FL 32446

11. GENERAL COMMENTS

What plans are going well, and what could be improved?

Concessionaire Signature *Brenda Shirah, Manager*



Agreement Manager Signature *Bryan Kaczmarek, APM*



Date 7/18/2024

Date 18-Jul-24

Distribution:

Email to Operational Services

Email to District

Email to Concessionaire



Florida Department of Environmental Protection
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		Subtotal	\$337,489.40	\$378,544.33	12.16%	\$232,469.50	\$430,596.32
D.	2024	April			#DIV/0!		
		May			#DIV/0!		
		June			#DIV/0!		
		Subtotal	\$0.00	\$0.00	#DIV/0!	\$0.00	\$0.00
TOTAL GROSS SALES			\$914,709.05	\$1,127,516.67	23.27%	\$897,148.81	\$1,314,572.50

Comments required for change in gross sales:

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PLEASE ATTACH QUARTERLY SALES TAX RETURN & INCOME STATEMENT FOR THE QUARTER.

2. ACCOUNTING

		Yes	No	N/A
A.	Books of original entry are maintained daily and kept on file for audit purposes (3 years minimum).	x		
B.	Source documents, including cash register tapes, are maintained on file for audit purposes (3 years minimum).	x		
C.	Inventories are conducted on a schedule acceptable to Park Manager's standards.	x		
D.	All invoices and checks are kept on file.	x		
E.	Purchases for supplies or services by the Concessionaire are made by check or through an imprest fund replenished by check.	x		
F.	Refunds are substantiated with a customer signed document using rubber stamp and ledger.	x		
G.	Adequate point of sale controls are used.	x		
H.	Sales personnel with access over cash are adequately supervised.	x		
I.	Responsibilities for receiving, depositing and recording cash receipts are assigned to different persons.	x		
J.	Personnel with access over cash do not clear cash register.	x		
K.	All sales are rung up on cash register.	x		

L.	Cash register has visual display facing customer and showing total sales transaction.	x		
M.	Cash register has dual tape system.	x		
N.	Each customer is offered a sales receipt and all points of sale have a clearly visible sign asking customers	x		
O.	Cash register drawers are closed after each transaction.	x		
P.	Pre-numbered receipts are used when specified by the agreement or when cash register is impractical.	x		

Comments required for all NO responses:

3. REPORTING/DOCUMENTATION

A. Insurance/Security

		Yes	No	Expire	Amount
1	General Liability Insurance (Department and Trustees named as additional insured)	x		2/20/2025	
2	Automobile Insurance (Department and Trustees named as additional insured)	x		1/31/2025	
3	Workers' Compensation	x		6/5/2024	
4	Other as needed				

B. List the type of security, expiration date, and amount.

FCGS General Liability -- State Farm -- Amount \$1,000,000 -- Expiration 02/20/2025	FCGS
Workers' Compensation Insurance -- Insurance Company of the West -- Amount \$1,000,000 -- Expiration 06/05/2024	Pennys Sweet Beans
Coffee and Cafe -- General Liability-- AP Intego Insurance Group -- Expiration 08/13/2024	Pennys Sweet Beans Coffee and
Cafe -- Workers' Compensation Insurance -- AP Intego Insurance Group \$500,000 -- Expiration 08/13/2024	

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C. Permits and Licenses

	Yes	No	Expire
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Annual Food Permit	x		1/4/2025
Livery Operator Permit	x		11/18/2024

D. Commission Payments

	Yes	No	N/A
Payments are submitted accurately and on time.	x		

E. Other Required Reports and Documentation

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2 Annual Profit & Loss Statements are submitted accurately and by required deadline.	x			N/A	N/A
3 Monthly Gross Sales Reports are submitted accurately and by required deadline.	x			N/A	N/A

4	E-Verify Employment Eligibility Verification completed with copies of completed files for all personnel.	x			N/A	N/A
5	Sexual Offender Check completed with copies of completed files for all personnel.	x			N/A	N/A
6	Annual PCI Compliance Self-Assessment is complete, current, and on file.	x			EXP 01/2025	
7	Safety Plan provided to Park Manager and is revised and approved annually.	x			N/A	N/A

Comments required for all NO responses:

PLEASE INCLUDE COPIES OF INSURANCE POLICIES IF UPDATED FROM LAST QUARTER

4. HEALTH/SAFETY

		Yes	No	N/A
A.	Employees follow basic personal hygiene practices.	x		
B.	Food storage areas and refrigeration units are maintained in clean condition.	x		
C.	Food contact surfaces are properly maintained and cleaned.	x		
D.	All other surfaces are cleaned daily (food surface areas, floors, walls, etc.).	x		
E.	Cleaning/chemical supplies stored separately from food.	x		
F.	Cleaning/chemical supplies are in compliance with Environmental Protection Plan.	x		
G.	Leftovers are disposed of properly.	x		
H.	Food is stored properly and in appropriate containers.	x		

I.	Corrected all deficiencies noted in most recent health inspection.			x
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Comments required for all NO responses:

5. ADA/SAFETY

		Yes	No	N/A
A.	Concessionaire is located on safe and accessible route.	x		
B.	First aid kit is available and maintained. Suggested, but not required for boating operations to have AED. AED available?	x		
C.	Operations are equipped with EECs.	x		
D.	Facility is free of public safety hazards.	x		
E.	Provide the name of their A & I Liaison. <i>Brenda Shirah</i>	x		
F.	Accessibility and inclusion policy is made available to everyone. Employees are knowledgeable on accommodating persons with disabilities.	x		
G.	Provided accessibility information in written publications such as website and brochures.	x		

Comments required for all NO responses:

6. OPERATIONS

		Yes	No	N/A
A.	Concessionaire provides the services outlined in the terms of the Agreement.	x		
B.	Concessionaire maintains and posts operating days/hours as outlined in terms of the Agreement. (Any variances approved in writing.)	x		
C.	Inventories comply with agreed upon merchandise standards and are sufficiently stocked to meet demand.	x		
D.	Rate/Fee/Menu boards are properly maintained and prices are current.	x		
E.	Prices are fair and comparable with others in area, confirmed by Park Manager.	x		
F.	Merchandise is price marked.	x		
G.	All signage is appropriate, maintained and approved by Park Manager.	x		
H.	Sales area is neat, organized and clean.	x		
I.	Interpretive tour scripts are approved by Park Manager.	x		
J.	Website is well maintained, promotes a satisfactory image for the Park and provides information on fees and services accurately.	x		
K.	Concessionaire utilizes disposable serving supplies produced from recyclable or biodegradable materials.	x		
L.	Concessionaire offers alternative menu items such as vegetarian and gluten-free.	x		
M.	Corrects all deficiencies noted by Agreement Manager.	x		
N.	Concessionaire is open to suggestions for improving service to visitors.	x		

Comments required for all NO responses:

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7. STAFF

		Yes	No	N/A
A.	Employees are identified by either uniform or name badge, and personal appearance standards and uniforms are in compliance with the terms of the Agreement.	x		
B.	Employees are knowledgeable about the Park.	x		
C.	Employees are courteous, helpful, and ensure an understanding and use of the principles of hospitality.	x		
D.	Sufficient number of employees to service visitors.	x		
E.	Number of employees. 21	x		

Comments required for all NO responses:

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8. SPACE AND EQUIPMENT

		Yes	No	N/A
A.	Equipment maintenance is in compliance with terms of Agreement.	x		
B.	Building maintenance is in compliance with terms of Agreement.	x		
C.	Grounds maintenance is in compliance with terms of Agreement.	x		

Comments required for all NO responses:

--

9. CAPITAL IMPROVEMENTS

		Yes	No	N/A
A.	Schedule of Capital Improvements is maintained.	x		
B.	Capital Improvements are performed in accordance with the terms of the Agreement.	x		
C.	Any deviations from negotiated Capital Improvements are well documented and approved by the Department. Please attach documentation.	x		
D.	Capital Improvements are satisfactorily completed by scheduled deadline.	x		

Comments required for all NO responses:

<p>Capital improvements completed in this quarter:</p> <p>Intuit Quickbooks -- Videotel \$591.49</p> <p>David LaDue -- Flooring materials and labor for Golf Pro Shop Renovation -- \$3516.00</p> <p>Lowe's -- Additional materials needed for flooring --\$384.60</p>
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10. CURRENT CONTACT INFO

Phone: (850) 526-2650

Fax: _____

Brenda Shirah, Manager

Email Address: floridacavernsgiftshop@gmail.com

Mailing Address: Florida Caverns Gift Shop LLC

3345 Caverns Road, Marianna, FL 32446

11. GENERAL COMMENTS

What plans are going well, and what could be improved?

Concessionaire Signature *Brenda Shirah, Manager*



Date 4/18/24

Agreement Manager Signature *Bryan Kaczmarek, APM*



Date 18 April 2024

Distribution:

Email to Operational Services

Email to District

Email to Concessionaire