



**II. FISCAL IMPACT ANALYSIS**

**A. Five Year Summary of Fiscal Impact:**

Fiscal Years	2013	2014	2015	2016	2017
Capital Expenditures	_____	_____	_____	_____	_____
Operating Costs	\$2	\$10	_____	_____	_____
External Revenues	(\$2)	(\$10)	_____	_____	_____
Program Income (County)	_____	_____	_____	_____	_____
In-Kind Match (County)	_____	_____	_____	_____	_____
<b>NET FISCAL IMPACT</b>	<u>\$-0-*</u>	<u>\$-0-*</u>	_____	_____	_____
# ADDITIONAL FTE POSITIONS (Cumulative)	_____	_____	_____	_____	_____

Is Item Included in Current Budget: Yes  No

Budget Account No: Fund 1426 Dept 662 Unit 3290 Object 4410  
 Program Code ST13 Program Period GY14

**B. Recommended Sources of Funds/Summary of Fiscal Impact:**

\*As funding is State funded, re-occurring through the Florida Department of Health, there is no fiscal impact. Monthly rental payments are remitted in arrears; accordingly, in FY13 there will be two (2) one dollar (\$1) rental payments as the July 2013 payment will be remitted in August 2013 and the August 2013 payment will be remitted in September 2013.

C. Departmental Fiscal Review: \_\_\_\_\_ *W* *5/29/13*

**III. REVIEW COMMENTS**

**A. OFMB Fiscal and/or Contract Development Comments:**

OFMB *[Signature]* *6/3/2013*  
*6/3* *6/3* *6/3/13*

Contract Development and Control *[Signature]* *6/4/13*  
*6-4-13* *B. Wheeler*

**B. Legal Sufficiency:**

*[Signature]* *6/5/13*  
 Assistant County Attorney

**C. Other Department Review:**

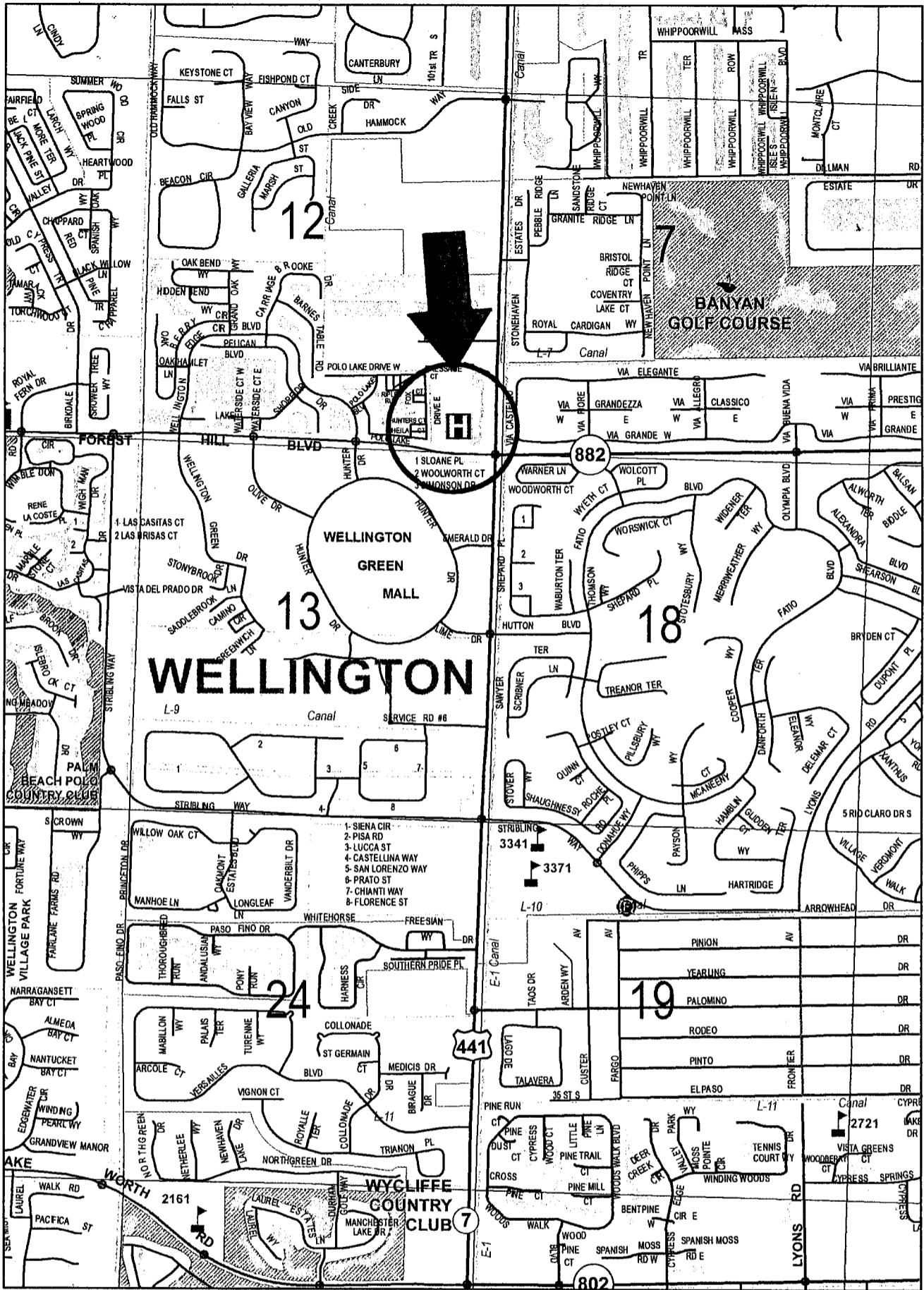
\_\_\_\_\_  
 Department Director

**This summary is not to be used as a basis for payment.**

TWP 44

TWP 44

TWP 44



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RNG 41

See pg 87

RNG 42

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LOCATION MAP



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**SECOND AMENDMENT TO LEASE AGREEMENT**

**between**

**WELLINGTON REGIONAL MEDICAL CENTER, INCORPORATED  
(Landlord)**

**and**

**PALM BEACH COUNTY,  
A POLITICAL SUBDIVISION OF THE  
STATE OF FLORIDA  
(County)**

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**SECOND AMENDMENT TO LEASE AGREEMENT**

**THIS SECOND AMENDMENT TO LEASE AGREEMENT** ("Second Amendment"), made and entered into \_\_\_\_\_, by and between Wellington Regional Medical Center, Incorporated, a Florida corporation, hereinafter referred to as "Landlord" and Palm Beach County, a political subdivision of the State of Florida, on behalf of the Department of Public Safety, hereinafter referred to as "County".

**WITNESSETH:**

**WHEREAS**, Landlord and County entered into a Lease Agreement dated September 13, 2011 (R2011-1361) (the "Lease") for the use of the Premises as defined in the Lease, which includes approximately four hundred (400) total gross square feet of floor space in the Wellington Regional Medical Center located at 10101 Forest Hill Boulevard, Wellington Florida, 33414, together with certain exclusive parking rights and non-exclusive use of the medical center common areas; and

**WHEREAS**, Landlord and County entered into a First Amendment to Lease Agreement dated June 19, 2012 (R2012-0893) to extend the term to June 30, 2013, and adjust the rent; and

**WHEREAS**, the Term of the Lease expires June 30, 2013, and the parties wish to extend the Term and provide for automatic yearly extensions; and

**WHEREAS**, Landlord hereby acknowledges that County is not delinquent in the payment of rent and is not in default of any of the terms and conditions of the Lease.

**NOW, THEREFORE**, in consideration of the mutual covenants and agreements hereinafter set forth, and various other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the parties hereto agree as follows:

1. The foregoing recitals are true and correct and incorporated herein by reference. Terms not defined or amended herein shall have the same meaning as ascribed to them in the Lease.
2. The Term of this Lease is extended through June 30, 2014.
3. The Term shall automatically renew for successive one (1) year periods on a July 1<sup>st</sup> to June 30<sup>th</sup> annual basis subject to each party's right to terminate this Lease upon ninety (90) days prior written notice pursuant to Article XII.
4. Landlord represents that: (i) Landlord is a wholly owned subsidiary of Universal Health Services, Inc., a Delaware corporation; (ii) Universal Health Services, Inc., is an entity that is registered with the Federal Securities Exchange Commission whose interest is for sale to the general public; and (iii) Landlord is exempt from the requirements of Section 286.23 of the Florida Statutes regarding disclosure of beneficial interests.
5. This Second Amendment is expressly contingent upon the approval of the Palm Beach County Board of County Commissioners, and shall become effective only when signed by all parties and approved by the Palm Beach County Board of County Commissioners.

IN WITNESS WHEREOF, Landlord and County have executed this Second Amendment, or have caused the same to be executed, as of the day and year first above written.

WITNESS:

WELLINGTON REGIONAL  
MEDICAL CENTER,  
INCORPORATED

*Susan Mulvey*  
Witness Signature

By: *Robbin Lee*  
Jerel Humphrey, CEO  
Robbin Lee, Interim CEO

Susan Mulvey  
Print Witness Name

*Beth Morelatos*  
Witness Signature

Beth Morelatos  
Print Witness Name

(SEAL)

ATTEST:

SHARON R. BOCK  
CLERK & COMPTROLLER

PALM BEACH COUNTY, a political  
subdivision of the State of Florida

By: \_\_\_\_\_  
Deputy Clerk

By: \_\_\_\_\_  
Steven L. Abrams, Mayor

Signed and delivered  
in the presence of:

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Print Witness Name

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Print Witness Name

APPROVED AS TO FORM  
AND LEGAL SUFFICIENCY

APPROVED AS TO TERMS  
AND CONDITIONS

By: *[Signature]*  
Assistant County Attorney

By: *[Signature]*  
Department Director