SPEAKER'S CARD (Please Print) Agenda#
NAME ANTHONY Sargenti
ADDRESS 735 HWY ALA
Fredialantic F1 32903
CITY STATE ZIP CODE  ORGANIZATION YOU REPRESENT /
SELF
SUBJECT / Agenda # Want my County Contract for food vender @ Paradise Park Amendment
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.
1-22-19     Date
Public Comment SPEAKER'S CARD (Please Print)  NAME DEAEL Monson  2
NAME DEREK THOMSON
ADDRESS 2525 S A 1A POE  # STREET
MELBORIL BERCH CITY STATE ZIP CODE
ORGANIZATION YOU REPRESENT / SELF
SUBJECT / Agenda #
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.
1/22/18

Pleblic Comment SPEAKER'S CARD (Plea	ase Print) Agenda#
NAME LINDER Campbell	(3)
ADDRESS 5005 Fishtail Palm +	
Cocoa FL	STREET 32927
ORGANIZATION YOU REPRESENT / SELFX SUBJECT / Agenda #Abvsive code	enforce ment
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE PUBLIC COMMENT RULES APPENDED TO THE BACK Signature	
Public Comment SPEAKER'S CARD (Plea	ase Print) Agenda#
NAME Backaga Campbell	4
ADDRESS 5005 Fishtail Pala	n Ave
COCO FL	STREET 32927 ZIP CODE
ORGANIZATION YOU REPRESENT / SELF	Zii CODE
SUBJECT / Agenda # Abusive cod	centorement
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE PUBLIC COMMENT RULES APPENDED TO THE BACK (	

Dah a Call

1/22/19 Date

SPEAKER'S CARD (Please Print) Agenda#
NAME SHROPSHIRE, MARK 5
ADDRESS 4645 Alan Shepard Are
Lo coa FL 32924
CITY STATE ZIP CODE ORGANIZATION YOU REPRESENT /
SELF) SUBJECT/Agenda# Code Violations en Canquerale Corones
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.
Signature Date
SPEAKER'S CARD (Please Print) Agenda#
NAME Chales A Tovey  ADDRESS 2555 Roberts Rel
NAME Charles A Tovey 6
NAME Charles A Tovey  ADDRESS 2555 ROBERTS Rel  Me Bourde # 32940
NAME CHARLES A TOVEY  ADDRESS 2555 ROBERTS RI  STREET  STREET  TOVEY  STREET  STREET  TOVEY  STREET  S
NAME CHARLES A TOVEY  ADDRESS 2555 ROBERTS RI  STREET  STREET  TOVEY  STREET

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	SPEAKER'S CARD (Please Print) Agenda#
W.	NAME OFIN HURLIO
	ADDRESS 3715 Felda St
	COCCITY STATE STREET STATE STATE STREET STREET STREET
	ORGANIZATION YOU REPRESENT / SELF
	SUBJECT / Agenda # COXEX BOXES
	I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.  1.22,19 Date
	Public Hre. SPEAKER'S CARD (Please Print) Agenda# 4. 1
	NAME JOHN FERNANDEZ
	ADDRESS 998 WACO BLUD SE
	PACM BAY FL 32909 CITY STATE ZIP CODE
3	ORGANIZATION YOU REPRESENT /
(	SUBJECT / Agenda # CAILDRENS SERVICE COUNCIL
	THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.
	JANE 1-22-299 Signature 1-22-299 Date

SPEAKER'S CARD (Please Print)  Agenda# 4-1  NAME Bob White
ADDRESS 512 Southorn HillsCt.
Melbourne F1 32940 CITY STATE ZIP CODE
ORGANIZATION YOU REPRESENT / SELF Zapublican Liberty Caucus SUBJECT / Agenda # H-1 Childrens Services Council
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.    Company
SPEAKER'S CARD (Please Print)  Agenda# 4. /  NAME  Agenda# 3
ADDRESS 1770 Geldfrich Cot
Mel. # STREET 32935-
ORGANIZATION YOU REPRESENT / SELF
SUBJECT / Agenda # property tax isc
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.

A Signature

1-22 Date

SPEAKER'S CARD (Please Print) Agenda#
NAME Peter Fusscas 3
ADDRESS 1855 SANDY CREEK Lang STREET 378 TO
malabar Fl. 32950 CITY STATE ZIP CODE
ORGANIZATION YOU REPRESENT /
SUBJECT/Agenda # Children's Sorvices covencies Repeal ORd. 90-41 P.H.
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.
Peter fusiar 1-22-2019 Signature Date
SPEAKER'S CARD (Please Print) Agenda# 4, /
NAME William Haskay
ADDRESS W301 Stoney Pt Rd
Molbourno #L STREET 37940
ORGANIZATION YOU REPRESENT /
SUBJECT / Agenda # H/ Children & Bernold
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.
Signature 1/27 [5]

SPEAKER'S CARD (Please Print)  Agenda# #
ADDRESS 6755 Hundred Acres  STREET  STREET  STREET  STREET  THE CODE
CITY STATE ZIP CODE
ORGANIZATION YOU REPRESENT / SELF
SUBJECT / Agenda #
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.
SPEAKER'S CARD (Please Print)  Agenda# H-1  NAME Connie Smith
ADDRESS 15 Indian River Br.
Cocoa FL. 32922 CITY STATE ZIP CODE
ORGANIZATION YOU REPRESENT / (SELF)
SUBJECT / Agenda # H-1  Elimination of CSC
-//M/10/100 01 COC

I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.

Courie Smith

/-22-2519 Date

SPEAKER'S CARD (Please Print)	Agenda# # 1
NAME Jeff Kiel	(9)
ADDRESS 2898 Wyndham Wy Melbourne FL 3294 CITY STATE ZIP CODE	
Melbourne FL STREET 3294	D
ORGANIZATION YOU REPRESENT Put By coald	
SUBJECT / Agenda # Childrens Services Counci	(
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UN PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD Signature	
SPEAKER'S CARD (Please Print)	Agenda#
NAME 75 DOLBIZNO	(8)
ADDRESS 1410 LARA CIR.	
POLELEDGE FL 329	17
CITY STATE ZIP CODE	
ORGANIZATION YOU REPRESENT ITE OMP (LC	BOF
SUBJECT / Agenda # PREVIT 2 1	*

I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.

Signature

Data

Date

SPEAKER'S CARD (Please Print)  Agenda# 4. /  NAME Lim Rezanka
ADDRESS 96 Willard St
Cocoa #L STREET 32977
ORGANIZATION YOU REPRESENT LEVILLS COUNT
SUBJECT / Agenda #
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.
SPEAKER'S CARD (Please Print)  NAME Krista Soboh  1507 Since Soboh
NAME Krista Suboh  ADDRESS 1597 Sienna Dr.
NAME Krista Suboh
NAME Krista Soboh  ADDRESS 1597 Sienna Dr.  Melbourne FL 32934
NAME Krista Suboh  ADDRESS 1597 Sienna Dr.  Melbourne FL 32934  CITY STATE ZIP CODE  ORGANIZATION YOU REPRESENT!
NAME Krista Soboh  ADDRESS 1597 Sienna Dr.  Melbourne FL 32934  CITY STATE ZIP CODE  ORGANIZATION YOU REPRESENT/ SELF_V  SUBJECT / Agenda # CRC
NAME Krista Schoh  ADDRESS 1597 Sienna Dr  Melbourne FL 32934  CITY STATE ZIP CODE  ORGANIZATION YOU REPRESENT/ SELF_V  SUBJECT / Agenda # CRC Reference CRC  ITHE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE

SPEAKER'S CARD (Please Print)  Agenda# H I  NAME BART GAETJENS  (3)
ADDRESS_1535 MALLARD CT
TITUSVILLE FL 32796  CITY STATE ZIP CODE
ORGANIZATION YOU REPRESENT / SELF
SUBJECT / Agenda #
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.    1-22-19   Date
SPEAKER'S CARD (Please Print) Agenda# 1
NAME Bunny Finney (2)
ADDRESS 436 Magnolia Ave.
ADDRESS 436 Magnolia Ave.  Merrit Island FL 32952  CITY STATE ZIPCODE
ORGANIZATION YOU REPRESENT ( SELF
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE

Burry During
Signature

SPEAKER'S CARD (Please Print) Agenda#
NAME KEN MADER (5)
ADDRESS 3606 JORAM Dn.
MELBOURNE FL STREET
CITY STATE ZIP CODE
ORGANIZATION YOU REPRESENT / SELF
SUBJECT / Agenda #
×
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.    1   22   20   9     Signature   Date
SPEAKER'S CARD (Please Print) Agenda#
NAME NICK Tomboulides (14)
ADDRESS 8/2 Hendson Cobbn #201
Melboure FL 32940
CITY STATE ZIP CODE
ORGANIZATION YOU REPRESENT / SELF
SUBJECT / Agenda #
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.
1/22

Date

*A 44
SPEAKER'S CARD (Please Print) Agenda#
NAME Diana Schommer (16)
ADDRESS [ 80 Movtego Bay DR. 10.
Merritt Island FL 82953 CITY STATE ZIP CODE
ORGANIZATION YOU REPRESENT / SELF
SUBJECT / Agenda # Childreft Services Court
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.
Diala Schowner 1/22/19 Signature 1/22/19
SPEAKER'S CARD (Please Print) Agenda# 1
NAME Rains
ADDRESS 503 Kimberty Drive
Melbourne FL 32940
CITY STATE ZIP CODE
ORGANIZATION YOU REPRESENT /
SUBJECT / Agenda # Children's Services Courcel
reper
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK, OF THIS CARD

Paus

SPEAKER'S CARD (Please Print) Agenda# H 1
NAME TO Shim
ADDRESS HOIO Dakota Ave
COCOA FL 32926
CITY STATE ZIP CODE  ORGANIZATION YOU REPRESENT /
SUBJECT / Agenda # Ht Childrens Socio Coma
SUBJECT / Agenda # CVINCUSIUS SOJUTOS COMO
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.
Signature Jan 22 d 2010 Date
SPEAKER'S CARD (Please Print) Agenda# H 7
NAME Mary Murray (A)
ADDRESS 1745 LAKESIDE TIZ.
THUSVILLE MIN STREET 180
CITY STATE ZIP CODE
ORGANIZATION YOU REPRESENT /
SUBJECT / Agenda # CHILDRENS SVC COUNCIL
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.

SPEAKER'S CARD (Please Print) Agenda# 4. /
NAME Mary Bozoman (21)
ADDRESS 211 Pine Tree Dr.
Indialatic # STREET 32903 CITY STATE ZIP CODE
ORGANIZATION YOU REPRESENT / SELF SELF
SUBJECT / Agenda # C S C
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.
$\frac{1}{z^2}$ Signature  Signature
SPEAKER'S CARD (Please Print) Agenda#
NAME STACES PATEL 20
ADDRESS 315 Jackson Ave
Satellite Beach, FL 32937 CITY STATE ZIP CODE
ORGANIZATION YOU REPRESENT / SELF
SUBJECT / Agenda #
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.

Signature

•

1/22/19 Date

SPEAKER'S CARD (Please Print) Agenda# I.
NAME FAUCE MOIA
ADDRESS 1250 W. PAJ GACUE BLUD.
CITY STATE ZIPCODE
ORGANIZATION YOU REPRESENT / COLON DE CALLE
SUBJECT / Agenda # WASTES Mont. I Den I.
I THE UNDERSIONED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.  Signature  Signature
SPEAKER'S CARD (Please Print) Agenda# I I NAME JACK KIRS Chew MUM
NAME JACK KIRS CHEW MUM @
NAME JACK KIRS CHENTHUM  ADDRESS 207 ANH GUA Dr  CUCUN BENCH FT 32931
NAME JACK KIRS CHEW MUM @

## **SPEAKER'S CARD** (Please Print) NAME BART GAETJENS ADDRESS 9001 ELLIS ROAD STREET MELBOURNE ZIP CODE ORGANIZATION YOU REPRESENT / SELF\_\_\_\_ SUBJECT / Agenda #\_ I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD. SPEAKER'S CARD (Please Print) Willard S ADDRESS STREET ORGANIZATION YOU REPRESENT / SUBJECT / Agenda #

I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.

Cui Regardos

1 22 18 Date