Consent	SPEAKER'S CARD (PI	ease Print) Agenda# F.2
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	08 Manor Dr. # COA STATE	STREET ミュタ 2 Z ZIP CODE
ORGANIZATION SELF/_	YOU REPRESENT /	
SUBJECT / Agend	la # <i>F</i> 2	
I THE UNDERSIGN PUBLIC COMMEN	TED, HEREBY ATTEST THAT I HAV TRULES APPENDED TO THE BACK	E READ AND UNDERSTAND THE K OF THIS CARD.
Jn	dy M. Cleaney Signature	4/23/2019 Date
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ADDRESS 180 Plantage CITY ORGANIZATION SELFS SUBJECT / Agend	YOU REPRESENT / ED, HEREBY ATTEST THAT I HAVE	STREET ZIP CODE E READ AND UNDERSTAND THE

SPEAKER'S CARD (Please Print) Agenda# 6
NAME George H. Rosenfield 3
ADDRESS 1289 Bonaventure Dr. # STREET
Mall STREET
Melbourne FL 32940 CITY STATE ZIP CODE
ORGANIZATION YOU REPRESENT / SELF
SUBJECT / Agenda # F Dev. & Enveromental Services !
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.
Serge THE Case feeld 4/23/19 Signature Date
Public Commercial SPEAKER'S CARD (Please Print) Agenda# 5
NAME Sandra Sulliva (2)
ADDRESS LES Dorset Lane
SP STREET
CITY STATE ZIP CODE
ORGANIZATION YOU REPRESENT / SELF
SUBJECT / Agenda # Mapping Taking of Cands
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.
Sendia Seller 23 Apr
Signature

Fublic Commen / SPEAKER'S CARD (Please Print) Agenda#
NAME Chef Ellsworth @
ADDRESS 989 U. Hwy AA #2 I which the FC 32503 CITY STATE ZIP CODE
ORGANIZATION YOU REPRESENT / SELF
SUBJECT / Agenda # Repairst for IN Lestigation Audit
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.
Signature Date
Public CommenT
CDEAUEDIC CADD (DI D.)
NAME (MARLES TOKEY) Agenda# Agenda#
SPEAKER'S CARD (Please Print) Agenda#
NAME Charles Tokey NAME Charles Tokey
NAME Charles Takey Address 255 Roberts Rd
NAME Charles Tokey ADDRESS 255 Roberts R # STREET Welbourde T 32940 CITY STATE ZIP CODE ORGANIZATION YOU REPRESENT /
NAME Charles Tokey ADDRESS 255 Roberts R # STREET We Boarde T (32940) CITY STATE ZIP CODE ORGANIZATION YOU REPRESENT / SUBJECT / Agenda # A CODY HAR HASE TW

SPEAKER'S CARD (Please Print) Agenda# F.13

NAME				
ADDRESS 598	. Mildred Holder 3 Grant St. 50a, FL 32926			
	THE PERSON NAMED IN STREET	8 [#]	STREET	
CITY	ST	ATE	ZIP CODE	
ORGANIZATION YOU SELF	REPRESENT /			
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Merkey	Signature			4-23-19 Date
<i>d</i>				
Consent	PEAKER'S C	ARD (Ple	ase Print)	Agenda# F, 21
NAME GRATE	DRY TI	V	Je (1)	FR
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