

SPEAKER'S CARD (Please Print)

Agenda#

K
G.

NAME

Krishna Tewatia

ADDRESS

5185

Merritt Island

CITY

#

FL

STATE

STREET

S Tropical Trl
32452

ZIP CODE

ORGANIZATION YOU REPRESENT

SELF

Support my friend / common sense

SUBJECT / Agenda #

~~Human Rights Ordinance~~
Public Comments KI THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE
PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.

Singh

Signature

2/6/20

Date

SPEAKER'S CARD (Please Print)

Agenda#

K

NAME

Olivia Fortson

ADDRESS

1756 SW 62nd Dr

Rockledge

CITY

#

FL

STATE

STREET

32955

ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF

self

SUBJECT / Agenda #

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

Olivia Fortson

Signature

2/6/20

Date

SPEAKER'S CARD (Please Print)

Agenda#

K

NAME Arianne Dorney

G.

ADDRESS 1321 Woronester wayRockledge

CITY

FL

STATE

STREET

32955

ZIP CODE

ORGANIZATION YOU REPRESENT /
SELF

SUBJECT / Agenda #

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

Signature

2-6-20

Date

SPEAKER'S CARD (Please Print)

Agenda#

K

NAME JACOB GELMAN

G.

ADDRESS ~~3010~~Melbourne

CITY

#

FL

STATE

STREET

52540

ZIP CODE

ORGANIZATION YOU REPRESENT /
SELF

SUBJECT / Agenda #

public comments #KI THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE
PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.Jacob Gelman

Signature

2/6/2020

Date

SPEAKER'S CARD (Please Print)Agenda# 2

NAME

Michelle ArabG.

ADDRESS

1010 Osprey DrMelbourne

CITY

FL

STATE

STREET

32940

ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF

SUBJECT / Agenda #

Public Comments #12

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

[Signature]

Signature

2-6-20

Date

SPEAKER'S CARD (Please Print)Agenda# H1

NAME

George Booras, Esq

ADDRESS

1679 Garden AveMelbourne

CITY

FL

STATE

STREET

32909

ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF

Garden Ave Marina Loni

SUBJECT / Agenda #

FL

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

[Signature]

Signature

2/6/20
Date

SPEAKER'S CARD (Please Print)

Agenda# H-1

NAME

Andi Doci

ADDRESS

153 Atlantic Ave.Indiglaantic

CITY

STATE

STREET

ZIP CODE

32903

ORGANIZATION YOU REPRESENT /

SELF

Green and Zone no Doc

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

2/6/20

Date

SPEAKER'S CARD (Please Print)

Agenda# H1

NAME

Roger / Nancy Sowerbuts

ADDRESS

9762 Palm City (160 Atlantic Ave)9762 SW Santa Monica Dr Palm City

CITY

STATE

STREET

ZIP CODE

34990

ORGANIZATION YOU REPRESENT /

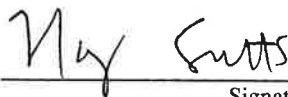
SELF

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SUBJECT / Agenda #

ID #19PZ00124

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



Signature

2-6-2020

Date

SPEAKER'S CARD (Please Print)Agenda# H 1

NAME

Ron Veser

ADDRESS

163 Atlantic AvIndianantic FL

CITY

STATE

STREET

ZIP CODE

32903

ORGANIZATION YOU REPRESENT /

SELF

SUBJECT / Agenda #

Re Zone

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

Signature

2-6-2020
Date**APPLICANT****SPEAKER'S CARD (Please Print)**Agenda# H2

NAME

Rebecca Reeves

ADDRESS

3860 Richy Rdminns

CITY

STATE

STREET

32754

ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF

SUBJECT / Agenda #

H2

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

Signature

2/6/20
Date

SPEAKER'S CARD (Please Print)Agenda# H-4NAME Charles M. chellADDRESS 5430 Florida Palm ave
STREET
Cocoa FL 32927
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /

SELFSUBJECT / Agenda # H-4I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE
PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.
Signature2/6/2020
Date**SPEAKER'S CARD (Please Print)**Agenda# H-6NAME Joe GofordADDRESS 599 Palm St
STREET
Mims FL 32754
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /

SELFSUBJECT / Agenda # Re zoningI THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE
PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.
Signature2-6-20
Date

SPEAKER'S CARD (Please Print)Agenda# H-6NAME Jerrad AtkinsADDRESS 3000 Sunset AveScottsboro

CITY

FL

STATE

STREET

32754

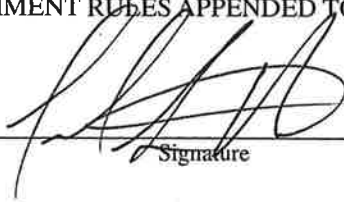
ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF

SUBJECT / Agenda # H-6Vogt Property / Rezoning

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



Signature

2/6/20

Date

APPLICANT**SPEAKER'S CARD (Please Print)**Agenda# H-6NAME John VogtADDRESS 7215 MILTON AVECOLEA

CITY

FL

STATE

STREET

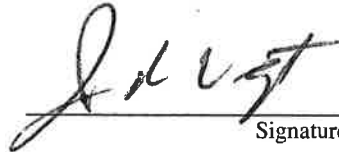
32927

ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF ✓SUBJECT / Agenda # Rezoning

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



Signature

2/6/2020

Date

Applicant **SPEAKER'S CARD** (Please Print)

Agenda# H7

NAME Tom & Shannon Harmony

ADDRESS 2190 Rockledge Dr
Rockledge FL 32955
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /
SELF ☒

SUBJECT / Agenda # Re BONE TR-3 → AU

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

Tom Harmony
Signature

2/6/20
Date

SPEAKER'S CARD (Please Print)

Agenda# #18

NAME Curt McKinney

ADDRESS 6901 W Hwy 192
W. Melbourne FLA 32904
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF Holly ENT OF BREUARD

SUBJECT / Agenda # H-8

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

Curt McKinney
Signature

2/6/20
Date

~~APPLICANT~~
SPEAKER'S CARD (Please Print)

Agenda# H-9

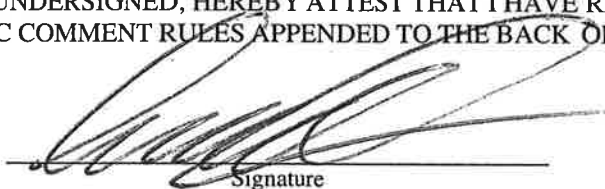
NAME Carmine Ferraro

ADDRESS 3860 Centis Blvd #636
Cocoa, FL 32927
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /
SELF

SUBJECT / Agenda # H-9

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


Signature

2/6/20
Date

~~APPLICANT~~

SPEAKER'S CARD (Please Print)

Agenda# H-11

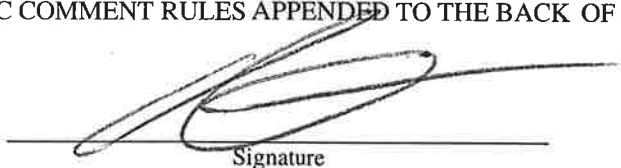
NAME Rick Bertol

ADDRESS 140 3rd Ave
Fort Lauderdale FL 33303
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /
SELF

SUBJECT / Agenda # H-11

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


Signature

2/6
Date

~~HAPPY #1~~
SPEAKER'S CARD (Please Print)

Agenda# H.12

NAME NINETTE JEROME

ADDRESS 1013 THURSH CIR

BARFOOT FL 32976
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF _____

SUBJECT / Agenda # C H.12

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

Ninette Jerome
Signature

2/6/20
Date

SPEAKER'S CARD (Please Print)

Agenda# H.13

NAME Richard Chamberlain

ADDRESS 3576 ROSE DR

ROCKLEDGE FL 32955
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF CHALKIES

SUBJECT / Agenda # CONSUMPTION ON PREMISES

Alcoholic Beverages

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

[Signature]
Signature

2-6-20
Date

SPEAKER'S CARD (Please Print)

Agenda#

H-14

NAME

Connie Douglas

ADDRESS

2275 Grant Rd

Grant
CITY

Fla
STATE

STREET

32949
ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF

Self

SUBJECT / Agenda #

H-14

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

Connie Douglas
Signature

Date

SPEAKER'S CARD (Please Print)

Agenda#

J-2

NAME

JAVICE SCOTT

ADDRESS

424 CARMINE

C
CITY

BCFL
STATE

FL
STATE

STREET

32931
ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF

SUBJECT / Agenda #

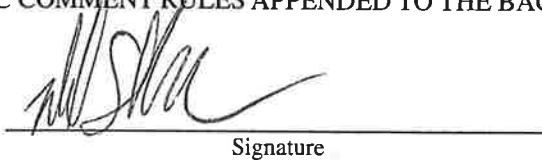
J-2 TOURIST TAX

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

J. Scott
Signature

Date

6 FEB 20

SPEAKER'S CARD (Please Print)J 2-8
Agenda#NAME Mary Jane NailADDRESS 105 St. Croix
105 St. Croix Ave C.B. FL 32931
CITY STATE ZIP CODEORGANIZATION YOU REPRESENT /
SELFSUBJECT / Agenda # ~~JA~~ JA, ~~JA~~I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE
PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.
Signature2/6/20
Date**SPEAKER'S CARD (Please Print)**Agenda# J3NAME Michael BramsonADDRESS 823 Glen Arden Way
Altamonte Springs FL 32701
CITY STATE ZIP CODEORGANIZATION YOU REPRESENT /
SELF Brevard County Firefighters' UnionSUBJECT / Agenda # J3I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE
PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.
Signature2/6/2020
Date