SPEAKER'S CARD (Please Print) Agenda#
NAME Krishna Tewatia G.
ADDRESS 5185 S Tropical Tol
Merritt Island #1 32452
 CITY STATE ZIP CODE
ORGANIZATION YOU REPRESENT + COMMON SENSE
SUBJECT / Agenda # Comman English Contracts
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.
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Sieugh 216/2
Signature
<i>V</i>
CDEA WED!C CADD (DI D.
SPEAKER'S CARD (Please Print) Agenda#
NAME Olivia Fortson
ADDRESS 1756 SM 622 er Dr
BOCKLEDSE 55
CITY STATE ZIP CODE
ORGANIZATION YOU REPRESENT / SELF
SUBJECT / Agenda # LGBT numan rights
- ordinar ce
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.

2/6/20 Date

	SPEAKER'S CARD (Pleas	e Print) A	genda#
NAME ACIONOCA	OODACH		G.
ADDRESS 1321	w oronester	way	
ROCKledge	Fl	STREET S	55
ORGANIZATION YO	STATE U REPRESENT /	ZIP CODE'	
SUBJECT / Agenda #	Enterope Colors	KOPP	/
I THE UNDERSIGNED, PUBLIC COMMENT RU	HEREBY ATTEST THAT I HAVE R JLES APPENDED TO THE BACK O	EAD AND UN F THIS CARD.	DERSTAND THE
amor	Me berrey		2-6-21 Date
	SPEAKER'S CARD (Pleas	e Print) A	genda# K
NAME JACOB	GELMAN		0.
ADDRESS _	CXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	(event	000
melbourn	e FI	STREET 52546)
CITY	STÅTE	ZIP CODE	
ORGANIZATION YOU SELF	private to the property of the contract of the		
SUBJECT / Agenda # _	THOMAS BIRGHER	ED BIANTO	~
nubic	common #K		
	HEREBY ATTEST THAT I HAVE R ILES APPENDED TO THE BACK OI		

21612020 Date

SPEAKER'S CARD (Please Print) Agenda#
NAME Michele Areb G.
ADDRESS 1010 OSprey dr STREET
Melbourne FL 32940 CITY STATE ZIP CODE
ORGANIZATION YOU REPRESENT / SELF
SUBJECT / Agenda # Public Connents #16
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.
Signature $\frac{7-b-70}{Date}$
SPEAKER'S CARD (Please Print) Agenda#
NAME OCORGE WOODER, LSG
ADDRESS 1679 Goods Aux
ADDRESS 1679 Goden Ave STREET 3289
ADDRESS 1679 Gooden Aux
ADDRESS 679 6 AUX # STREET # STREET CITY STATE ZIP CODE ORGANIZATION YOU REPRESENT / SELF 2000 AUX ORGANI

SPEAKER'S CARD (Please Print) NAME AND DO (Agenda# #1-1
ADDRESS 153 At Pout (CA)	16.
Indialantic P 320	103
ORGANIZATION YOU REPRESENT JONE SLIP LECT / Agenda #	10 Do
SUBJECT / Agenda #	
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNPUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD	NDERSTAND THE D. Date
CDE A MEDIC CARD (N	1 .
	Agenda# H
NAME Roger/Nany Sowerbuts	*
NAME Roger/Nany Sowerbuts	
NAME Roger/Nany Sowerbuts ADDRESS 9762 Palm City (160 Atlanta	
NAME Roger/Nany Sowerbuts	
NAME Roger/Nany Sowerbits ADDRESS 9762 Palm City (166 Atlanta STREET 9762 SW Santamanica Dr Palm City 34990 CITY STATE ZIP CODE ORGANIZATION YOU REPRESENT/	*
NAME Roger/Nany Sowerbyts ADDRESS 9762 Palm City (166 Atlanta STREET 9762 SW Santamonica Dr Palm City 34990 CITY STATE ZIP CODE ORGANIZATION YOU REPRESENT/ SELF	Ave)
NAME ROGER/Nany Sowerbyths ADDRESS 9762 Palm City (166 Atlantic STREET 9762 SW Santa Manica Dr Palm City 34990 CITY STATE ZIP CODE ORGANIZATION YOU REPRESENT/ SELF SUBJECT / Agenda # 1D # 19 PZ 00124 I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UN	Ave)

SDEAKEDS CARD (DI D. 1)
SPEAKER'S CARD (Please Print) Agenda# H I
NAME
ADDRESS 163 Atlantie Av
Indialantic # STREET 32903 CITY STATE ZIPCODE
CITY STATE ZIP CODE
ORGANIZATION YOU REPRESENT /
SUBJECT / Agenda # PM Re Zone
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THI PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.
Signature $2-6-2 \circ 2$ Date
APPLICANT) SPEAKER'S CARD (Please Print) Agenda#_HZ_
7.
NAME COCCE Yeaves
ADDRESS 3860 Bichy Rd
STREET
CITY STATE ZIP CODE
ORGANIZATION YOU REPRESENT / SELF
SUBJECT / Agenda # H Z
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.
2/6/20
Signature Date

12	nda#H. 4
NAME Charles Michell	
ADDRESS 5430 Floride Alm ave	
Cococ FI 32927 CITY STATE ZIP CODE	
ORGANIZATION YOU REPRESENT /	
SUBJECT / Agenda #	
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDER PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD. Signature	ERSTAND THE
SPEAKER'S CARD (Please Print) Age	nda#_ <i>H-6</i>
ADDRESS 599 V Palm St	
Ming the STREET OF STREET	54
ORGANIZATION YOU REPRESENT / SELF	
SUBJECT / Agenda # Re 201,10	
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDER PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.	ERSTAND THE
Signature 2	Date Date

SPEAKER'S CARD (Please Print) Agenda# H-6
NAME Jerral Atkins
ADDRESS 3000 Senset Ave
ADDRESS 3000 Senset Aug Scottsmoor # STREET 32754 CITY STATE ZIP CODE
CITY STATE ZIP CODE
SELF/_
SUBJECT / Agenda # H-6 Vogt Property/Re coning
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD. Z/6/20 Date
APPLICANT SPEAKER'S CARD (Please Print) Agenda# #6
NAME John Post
ADDRESS 7215 WILTON AVE
ADDRESS 72 8 8 STREET STREET 32927 CITY STATE ZIP CODE
CITY STATE ZIP CODE
ORGANIZATION YOU REPRESENT / SELF
SUBJECT / Agenda # Le Zonins
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE

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

2/6/200 2/6/200

Applica SPEAKER'S CARD (Please Print) Agenda# H 7
APA COMPEAKER'S CARD (Please Print) Agenda# H7 NAME TOWN & GLOWWOW HARMOND
ADDRESS 2190 ROCKLEDGE DR
Rockledge 1=1 -32955
CITY STATE ZIP CODE ORGANIZATION YOU REPRESENT /
SELF_
SUBJECT / Agenda # R = R = R = 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.
Jan 2/10/20
Signature
SPEAKER'S CARD (Please Print) Agenda#
SPEAKER'S CARD (Please Print) Agenda# ##8 NAME CUT MLKINWCY
NAME CUX MLKINNEY ADDRESS 6901 W HWY 192
NAME CUX MLKINNEY ADDRESS 6961 W HWY 192 STREET
NAME CUX MLKINNEY ADDRESS 6901 W HWY 192
NAME CUST MCKINNEY ADDRESS 6961 W HWY 192 W. MECBOWRNG FLA 32904 CITY STATE ZIP CODE ORGANIZATION YOU REPRESENT!
NAME CUST MCKINNEY ADDRESS 6961 W HWY 192 W. MECBOWRNG FLA 32904 CITY STATE ZIPCODE ORGANIZATION YOU REPRESENT! SELF HOLLY ENT OF BLEUMD
NAME CUST MCKINNEY ADDRESS 6961 W HWY 192 W. MECBOWRNG FLA 32904 CITY STATE ZIP CODE ORGANIZATION YOU REPRESENT!
NAME COST MLKINNEY ADDRESS 6961 W HWY 192 W. MECBOWRNG FLA 32904 CITY STATE ZIPCODE ORGANIZATION YOU REPRESENT / SELF Holly ENT OF BROWNS SUBJECT / Agenda # H-8
NAME CUT MLKINNCY ADDRESS 6961 W HWY 192 W. MECBOWRIG FLA 32904 CITY STATE ZIPCODE ORGANIZATION YOU REPRESENT / SELF HOLLY ENT OF BROWN SUBJECT / Agenda # H - 8 I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE
NAME COST MLKINNEY ADDRESS 6961 W HWY 192 W. MECBOWRNG FLA 32904 CITY STATE ZIPCODE ORGANIZATION YOU REPRESENT / SELF Holly ENT OF BROWNS SUBJECT / Agenda # H-8
ADDRESS 6961 W Hwy 192 WE CROWRING FLA 32904 CITY STATE ZIPCODE ORGANIZATION YOU REPRESENT / BROWN SELF Holly ENT OF BROWN SUBJECT / Agenda # H-8 I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE

SPEAKER'S CARD (Please Print) Agenda# H9
NAME CORMINE FETTORO
ADDRESS 3860 Cerch'S Black #636 Cococ, F. 32927 CITY STATE ZIP CODE
ORGANIZATION YOU REPRESENT / SELF
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.
APPLICAT SPEAKER'S CARD (Please Print) NAME_RICK SERTOL
ADDRESS 140 3 ROME
Troining # STREET SQ903 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# # / 7
NAME NINETTE TEROME
ADDRESS 1013 THBUSh CIN PALY-FOOT PAY FL STREET 1976
ORGANIZATION YOU REPRESENT / SELF
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD. April
SPEAKER'S CARD (Please Print) Agenda# 41.13 NAME Richard Chambellain
ADDRESS 3576 120Se Dr
Pockledge At 32955
ORGANIZATION YOU REPRESENT / SELF
SUBJECT / Agenda # Consumption on previses Alcoholic Beverages
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# HIT
ADDRESS 275 Growt Rd 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. Signature Date
SPEAKER'S CARD (Please Print) Agenda# 3-2
SPEAKER'S CARD (Please Print) Agenda# 1-2 NAME JAVICE SCOTE
NAME JAVICE SCOTT ADDRESS 424 CARMINE
NAME JAVICE SCOTE
NAME JAVICE SCOTT ADDRESS 424 CARMINE C PCH FL STREET 32931
NAME JAVICE SCOTT ADDRESS 424 CARMINE C PCH FL STREET STATE ZIP CODE ORGANIZATION YOU REPRESENT /
NAME JAVICE SCOTT ADDRESS 424 CARMINE C PCH # STREET STATE ZIP CODE ORGANIZATION YOU REPRESENT / SELF

SPEAKER'S CARD (Please Print) Agenda#
NAME Mary Jane Nail
ADDRESS 105 St. CROIX
105 St. CROIX AVE C. B. FL 32931 STATE ZIP CODE
ORGANIZATION YOU REPRESENT / SELF
SUBJECT / Agenda # Jay Jay
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.
May Josephel 3/6/20 Signature 2/6/20
SPEAKER'S CARD (Please Print) Agenda# 13
NAME Michael Bramson
ADDRESS 823 Glen Arden Way
Altamonie Springs #1 STREET 32701
CITY STATE ZIP CODE
ORGANIZATION YOU REPRESENT / SELF Brevard County Firestighter's Union
SUBJECT / Agenda #
I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.