

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

Agenda# K  
(7)

NAME SANJAY RATEL

ADDRESS 315 JACKSON AVE

SAT BOH # 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]  
Signature

7/23/19  
Date

*Pub. Comment*

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

Agenda# K  
(6)

NAME Melissa Martin

ADDRESS 5404 Brilliance Cir

Cocoa # FL 32926  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /  
(SELF)

SUBJECT / Agenda # K. Public Comments

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

[Signature]  
Signature

7/23/19  
Date

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

Agenda# K

NAME Judy Koon (5)

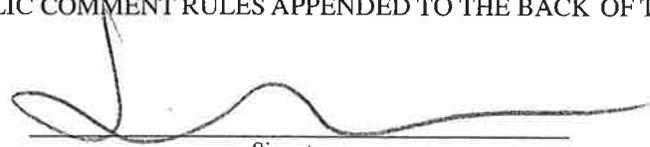
ADDRESS 540 S Brevard Ave  
Cocoa Beach FL 32931  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF

SUBJECT / Agenda # Public Comments

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

  
Signature

7/23/19  
Date

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

Agenda# K

NAME Karen Colby (4)

ADDRESS 1122 Pine Tree Drive  
THB FL 32937  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF

SUBJECT / Agenda # Public Comments

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

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

Agenda# K  
(1)

NAME Peter fuscas

ADDRESS 1855 SANDY CREEK lane  
Malabar # FL STREET 32956  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /  
SELF

SUBJECT / Agenda # K Public Comments

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

Peter fuscas  
Signature

Date

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

Agenda# Public  
K (3)

NAME JAVICE CRISP

ADDRESS 1372 Knollwood  
PALM BAY FL # STREET  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /  
SELF Self

SUBJECT / Agenda # Public Coments

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

JAVICE CRISP  
Signature

7/23  
Date

New Business

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

Agenda# 16

NAME LARRY SANSON

(1)

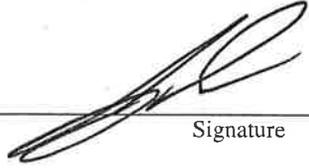
ADDRESS PO Box 98

COLOA FL. # 32927  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / TKO  
SELF

SUBJECT / Agenda # 16

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

  
Signature

7/23/19  
Date

Public Comment

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

Agenda# K

NAME Mr. Matt Fleming

(2)

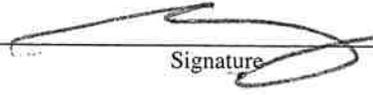
ADDRESS 1777 A1A 3

Sarasota FL # 34901  
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

New Business **SPEAKER'S CARD** (Please Print)

Agenda# J5  
(11)

NAME Charles A Taylor

ADDRESS 2533 Roberts Rd

Melbourne # FL STREET 32940  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /  
SELF TAYLOR

SUBJECT / Agenda # \_\_\_\_\_  
\_\_\_\_\_

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

Charles A Taylor 7-23-19  
Signature Date

New Business **SPEAKER'S CARD** (Please Print)

Agenda# J5  
2

NAME Pam LaSalle

ADDRESS 2380 CAMBERLY CIR

MELBOURNE # FL STREET 32940  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /  
SELF \_\_\_\_\_

SUBJECT / Agenda # J5 RESOLUTION FOR CRITICAL NEEDS  
MSTU

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

Pam LaSalle 7-23-19  
Signature Date

New Business

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

Agenda# J-5

NAME Bob White (9)

ADDRESS 512 Southern Hills Ct

Melb # FL STREET 32940  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF Republican Liberty Caucus

SUBJECT / Agenda # Sheriff's Critical Needs J-5

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

  
Signature

7/23/19  
Date

New Business

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

Agenda# J5

NAME Ralph Perrone SA (10)

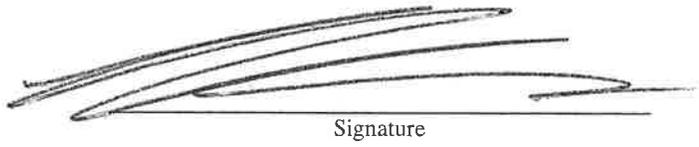
ADDRESS 2398 New Found Harbor Dr

Merritt Isl # FL STREET 32952  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF Real Estate

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

7/23/19  
Date

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

Agenda# J5

NAME Cheryl Lankes

(7)

ADDRESS 1356 Jane Ct

Memitt Isld # FL

STREET  
32952  
ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF

SUBJECT / Agenda # Sheriff's resolution

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

Cheryl Lankes  
Signature

7/23/19  
Date

*New Business*

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

Agenda# J.5

NAME Walt Nye

(8)

ADDRESS 1345 Renaissance Dr.

Melbourne # FL

STREET  
32913  
ZIP CODE

ORGANIZATION YOU REPRESENT /

Self

SUBJECT / Agenda # J5

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

Walt Nye  
Signature

7/23/19  
Date

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

Agenda# J5

NAME Mary Jane Neil (5)

ADDRESS 105 St. Croix Ave

Cocoa Beach # FL STREET 32931  
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.

Mary Jane Neil  
Signature

7/23/2018  
Date

*New Business*

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

Agenda# J.5

NAME Robert Burns (6)

ADDRESS 5829 Duskywing Dr

Bokledge # FL STREET 32955  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF

SUBJECT / Agenda # J5

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

RB  
Signature

7/25/18  
Date

New Business **SPEAKER'S CARD (Please Print)**

Agenda# J.S.  
(3)

NAME Diana Schommer

ADDRESS 1180 Montego Bay Dr. W

Merritt Island FL  
CITY STATE

32953  
STREET ZIP CODE

ORGANIZATION YOU REPRESENT /  
SELF

SUBJECT / Agenda # J5

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

Diana Schommer  
Signature

7/23/2019  
Date

New Business **SPEAKER'S CARD (Please Print)**

Agenda# J-S  
(4)

NAME Barbara Lom

ADDRESS 3423 Canabolo Cir

Via  
CITY STATE

#  
STREET ZIP CODE

ORGANIZATION YOU REPRESENT /  
SELF

SUBJECT / Agenda # J5

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

Barbara Lom  
Signature

7/23/2019  
Date

New Business

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

Agenda# J-5  
(1)

NAME CHET ELLSWORTH

ADDRESS 989 N. Hwy A1A #2  
Indian Land # FL 32903  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF \_\_\_\_\_

SUBJECT / Agenda # J-5 Critical Needs  
LAW ENFORCEMENT Municipal Services  
Taxing Unit

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

C. Ellsworth  
Signature

7-23-19  
Date

New Business

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

Agenda# J-5  
(2)

NAME Lois Lacoste

ADDRESS 6755 Hundred Acre Dr.  
Port St John # FL 32927  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF \_\_\_\_\_

SUBJECT / Agenda # J5

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

Lois M. Lacoste  
Signature

7/23/19  
Date

New Business

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

Agenda# J2

NAME Tom Powers (2)

ADDRESS 148 Marlene Way

JHB # FL STREET 32937  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF self

SUBJECT / Agenda # J2 BCR contract

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

[Signature]  
Signature

\_\_\_\_\_  
Date

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

Agenda# J4

NAME Jan Chrupa (Shu - new - pa) (C)

ADDRESS 4325 Randon Ln

Merritt Island # FL STREET 32952  
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.

Jan Chrupa  
Signature

7/23/19  
Date

*UNK. Business*

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

Agenda# I.1

NAME Sheriff Wayne Ivey

ADDRESS \_\_\_\_\_  
# \_\_\_\_\_ 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.

Wayne Ivey  
Signature

7/23/19  
Date

*New Business*

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

Agenda# J.2

NAME Andrea Young

ADDRESS 778 Wyeth St

West Melbourne # \_\_\_\_\_ STREET \_\_\_\_\_  
CITY \_\_\_\_\_ STATE FL ZIP CODE \_\_\_\_\_

ORGANIZATION YOU REPRESENT / SELF \_\_\_\_\_

SUBJECT / Agenda # J2

(declined to speak)

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

Andrea Young  
Signature

7/23/19  
Date

WNF. Business **SPEAKER'S CARD** (Please Print)

Agenda# I-1

NAME Maia Fleming (22)

ADDRESS 1777 A1A #3  
Sealton 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]  
Signature

\_\_\_\_\_  
Date

WNF. Business **SPEAKER'S CARD** (Please Print)

Agenda# I-1

NAME Mary Jane Nail (23)

ADDRESS 105 St. Croix Ave.  
Cocoa Beach FL 32931  
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]  
Signature

7/23/2019  
Date

WAF. BUSINESS

SPEAKER'S CARD (Please Print)

Agenda# I-1  
(20)

NAME Carolynn Howell

ADDRESS 2593 Woodsmill Dr

Melbourne # FL STREET 32934  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF

SUBJECT / Agenda # I-1

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

Carolynn S. Howell  
Signature

7/23/19  
Date

WAF. BUSINESS

SPEAKER'S CARD (Please Print)

Agenda# I-1  
(21)

NAME Pamela Castellana

ADDRESS 4735 Willow Bend Dr.

Melbourne # FL STREET 32935  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF

SUBJECT / Agenda # I-1

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

Pamela Castellana  
Signature

7/23/19  
Date

UNF. BUSINESS

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

Agenda# I-1

NAME ROBERT V CHAPMAN (BOB)

(18)

ADDRESS 230 PINECK AV<sup>2</sup>

MELBOURNE FL 32901  
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.

Robert V Chapman  
Signature

07/23/19  
Date

I-1

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

Agenda# I. 1

NAME Karen Colby

(19)

ADDRESS 1122 Pinehills

FL 32917  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF

SUBJECT / Agenda # CIVILITY

*\* duplicate card*

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

[Signature]  
Signature

\_\_\_\_\_  
Date

UNF. BUS.

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

Agenda# I-1

NAME Bob White (17)

ADDRESS 512 Southern Hills Ct

Melb # FL STREET 32940  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF Republican Liberty Caucus

SUBJECT / Agenda # Civility Ordinance I & II

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

Robert White  
Signature

7/23/19  
Date

UNF. Business

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

Agenda# I.1

NAME Matt Nye (16)

ADDRESS 1345 Romolentia Dr

Melbourne # FL STREET 32940  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF Self

SUBJECT / Agenda # I.1

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

Matt Nye  
Signature

\_\_\_\_\_  
Date

UNF Business SPEAKER'S CARD (Please Print)

Agenda# I.1  
(14)

NAME Robert Burns

ADDRESS 5829 Duskywing Dr

Rockledge  
CITY

FL  
STATE

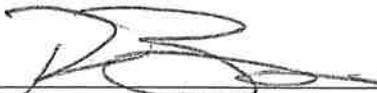
32955  
STREET  
ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF

SUBJECT / Agenda # I.1

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

  
Signature

23 JUL  
Date

SPEAKER'S CARD (Please Print)

Agenda# I.1  
(15)

NAME Judy Koons

ADDRESS 540 S. Brevard Ave

Cocoa Beach  
CITY

FL  
STATE

32931  
STREET  
ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF

SUBJECT / Agenda # Civ. lity Ordinance I.1

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

  
Signature

7/23/19  
Date

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

Agenda# 7-1  
(13)

NAME Elizabeth Michelman

ADDRESS 898 S. Tropical Trail

M1 # FL STREET 32952  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF \_\_\_\_\_

SUBJECT / Agenda # I-1 - Civility

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

El Michel  
Signature

7-23-2019  
Date

UNF. Business

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

Agenda# I-4  
(12)

NAME Adam Trutt

ADDRESS 2319 King Richard Road

MLB # FL STREET 32935  
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]  
Signature

7/23/19  
Date

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

Agenda# I-1  
(10)

NAME SANTJAY PATEL

ADDRESS 315 JACKSON AVE

SAT. BCH  
CITY

FL  
STATE

32937  
STREET  
ZIP CODE

ORGANIZATION YOU REPRESENT /  
SELF SELF

SUBJECT / Agenda # I-1: CIVILITY ORDINANCE

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

[Signature]  
Signature

7/23/19  
Date

CAF. Business

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

Agenda# I, 1  
(11)

NAME Peter FUSSCAS

ADDRESS 1855 Sandy CREEK Lane

Malabar  
CITY

FL  
STATE

32950  
STREET  
ZIP CODE

ORGANIZATION YOU REPRESENT /  
SELF 2

SUBJECT / Agenda # I 1 Civility Ordinance +  
Policy

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

Peter Fuscias  
Signature

\_\_\_\_\_  
Date

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

Agenda# I-1  
(9)

NAME Stacey Patel

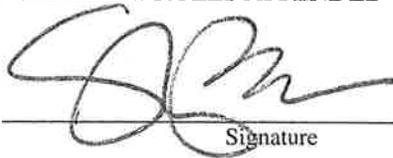
ADDRESS 315 Jackson Ave

Satellite Beach, FL # 32937  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /  
SELF \_\_\_\_\_

SUBJECT / Agenda # I-1

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

  
Signature

7/23/19  
Date

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

Agenda# I,1  
(8)

NAME JANICE CRISP

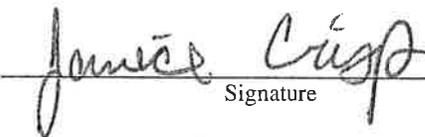
ADDRESS 1372 Knollwood Rd

Palm Bay, FL # 32907  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /  
SELF \_\_\_\_\_

SUBJECT / Agenda # I Civility

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

  
Signature

7/23  
Date

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

Agenda# 1-1  
(6)

NAME Suzanne Valencia

ADDRESS 410 Lemon Grove Ave

W. Melbourne # FL STREET 32904  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF

SUBJECT / Agenda # 1-1

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

Suzanne Valencia  
Signature

7/27/19  
Date

I-1 civility **SPEAKER'S CARD (Please Print)** Agenda# I-1

NAME Karen Colby (Karen Colby)

ADDRESS 1177 Proctor

IRB # STREET  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF

SUBJECT / Agenda # I-1 CIVILITY

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

Karen Colby  
Signature

\_\_\_\_\_  
Date

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

Agenda# I.1  
(5)

NAME ROGER GANGITANO

ADDRESS 4270 TORTLE MOUND RD

MELB. # FL. STREET 32934  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF

SUBJECT / Agenda # Civility Topic

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

  
Signature

7-23-19  
Date

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

Agenda# I.1  
(4)

NAME Melissa Martin

ADDRESS 5404 Brilliance Cir

Cocoa # FL STREET 32926  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF

SUBJECT / Agenda # Civility Ordinance

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

  
Signature

7/23  
Date

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

Agenda# I.1  
(3)

NAME Sandra Sullivan

ADDRESS 165 Dorset Lane  
SPS 32937  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF \_\_\_\_\_

SUBJECT / Agenda # I 1

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

Sandra Sullivan  
Signature \_\_\_\_\_ Date \_\_\_\_\_

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

Agenda# I.1  
(3)

NAME JOHN NELAND

ADDRESS 1424 S. RIVERSIDE DR  
INDIALANTIC FL 32903  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF

SUBJECT / Agenda # COMMISSIONERS COMMENTS  
ROLES OF CIVILITY

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

John D. Neland  
Signature \_\_\_\_\_ Date 7-23-2019

Pub. Hearing

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

Agenda# H.3.  
(1)

NAME SCOTT KNOX, WIDERMAN MALOX PL

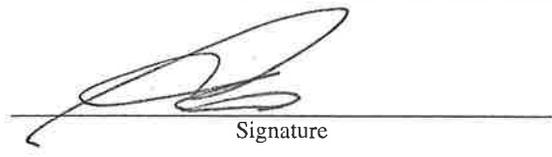
ADDRESS 1990 W. NEW HAVEN

MELBOURNE # FL STREET 32904  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /  
SELF NASA INVESTMENT PROPOSERS

SUBJECT / Agenda # H3 NASA EXCHANGE Agreement

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

  
Signature

7/23/19  
Date

Unf. Business.

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

Agenda# I-1  
(1)

NAME PHILIP STASIK

ADDRESS 3792 SIERRA DR.

MERRITT ISLAND # FL STREET 32953  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /  
SELF SPACE COAST PROGRESS ALLIANCE

SUBJECT / Agenda # I-1 CIVILITY / ETHICS

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

  
Signature

7-23-19  
Date

Public Comment

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

Agenda# 6

NAME Matt Fleming (6)

ADDRESS 1777 Aik #3  
Seafellie 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]  
Signature

\_\_\_\_\_  
Date

Pub. Hearing

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

Agenda# HQ

NAME DAWN SHOOK (1)

ADDRESS 3919 PALM STREET  
MUS, FL 32754  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF MYSELF

SUBJECT / Agenda # VACATING RIGHT OF WAY

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

[Signature]  
Signature

7-23-19  
Date

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

Agenda# Public  
Comm  
G(4)

NAME JANICE CRISP

ADDRESS 1372 Knollwood Rd

PAIN BAY # FL STREET  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /  
SELF self

SUBJECT / Agenda # Public Comments

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

JANICE CRISP  
Signature

7/23  
Date

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

Agenda# G.

NAME JENNY SWISHER

ADDRESS 113 SE 1st St

Satellite Beach FL # FL STREET  
CITY STATE ZIP CODE 32937

ORGANIZATION YOU REPRESENT /  
SELF my family

SUBJECT / Agenda # clarification of SPS  
past history and safety of my  
children

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

Jenny Swisher  
Signature

7/23  
Date

Public Comment

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

Agenda# 6

NAME Sandra Sullivan (2)

ADDRESS 165 Dorset Lane

SPS 32937  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /  
SELF

SUBJECT / Agenda # Public Comment  
Dump / Water

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

Sandra Sullivan  
Signature

Date

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

Agenda# 6

NAME Charles A. Tovey (3)

ADDRESS 2555 Roberts Rd

Melbourne FL 32940  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /  
SELF

SUBJECT / Agenda # EROSION

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

Charles A. Tovey  
Signature

7-23-19  
Date

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

Agenda#

F-1  
3

NAME

Matt Fleming

ADDRESS

1777 AIA 3

Satellite Beach  
CITY

#  
FL  
STATE

STREET

32937  
ZIP CODE

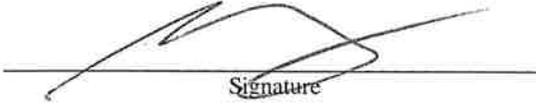
ORGANIZATION YOU REPRESENT /

SELF

SUBJECT / Agenda #

F-1

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

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

Agenda#

5  
1

NAME

REV. J. B. DENNIS

ADDRESS

3710 CATALINA DR.

COCOA, FL. 32926  
CITY STATE

STREET

ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF

NATIONAL ACTION NETWORK

SUBJECT / Agenda #

NO-TO NEW TAXES

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



Signature

23-July-19

Date

Consent

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

Agenda# F.1

NAME Sandra Sullivan (2)

ADDRESS 165 Dorset Lane  
SPS # 32937  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF \_\_\_\_\_

SUBJECT / Agenda # F1

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

Sandra Sullivan  
Signature \_\_\_\_\_ Date \_\_\_\_\_

F-1 Mid road

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

Agenda# F.1

NAME Karen Colby (2)

ADDRESS 117 Pinegrove Dr  
ETHO Fl # 32937  
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF Self

SUBJECT / Agenda # Mid Road

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

Karen Colby  
Signature \_\_\_\_\_ Date \_\_\_\_\_