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SPEAKER'S CARD (Please Print)

Agenda# G
Left

NAME Charles A Tovey JR

ADDRESS 2555 Roberts Rd

McBourne # 01 STREET 32940
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /
SELF

SUBJECT / Agenda # Speed bumps, Flooding

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 Jr
Signature

10-22-1
Date

①

SPEAKER'S CARD (Please Print)

Agenda# K
public comment

NAME Sandra Sullivan

ADDRESS 165 Dorset Ln

SOS # STREET
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /
SELF

SUBJECT / Agenda # Dredging / Dev
Public Speaking

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

22 Oct
Date

SPEAKER'S CARD (Please Print)

Agenda# 51 (3)

NAME Peter Black

ADDRESS Banana River
1322nd STREET
Merritt CITY Island STATE 24 ZIP CODE

ORGANIZATION YOU REPRESENT / SELF marker at

SUBJECT / Agenda # 51

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# 51 (2)

NAME Todd Foley

ADDRESS 1357 # Banana River STREET
MI CITY STATE 24 ZIP CODE

ORGANIZATION YOU REPRESENT / SELF marker at

SUBJECT / Agenda # 51

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# _____

NAME Sandra Salura

ADDRESS _____

STREET

CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF _____

SUBJECT / Agenda # Dump

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

Sandra Salura
Signature

Date

SPEAKER'S CARD (Please Print)

Agenda# J1 ①

NAME Ana Saunders

ADDRESS 312 S. Harbor City Blvd, Suite 4

STREET

Melbourne FL 32937
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF BSE Consultants, Inc.

SUBJECT / Agenda # J1 - Market 24 Buffer Waiver Request
* Happy to answer questions (if any)

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

Ana Saunders
Signature

10-22-11
Date

SPEAKER'S CARD (Please Print)

Agenda# I.3

NAME Bruce Moia

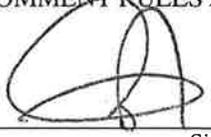
ADDRESS 1250 W. East Carolis Blvd.

MOB. FL 32935
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF Fred. A. Boyer

SUBJECT / Agenda # I.3. LANDFILL

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


Signature

10/22/19
Date

SPEAKER'S CARD (Please Print)

Agenda# _____

NAME David S. Dee

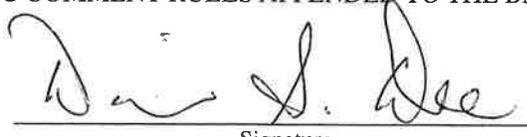
ADDRESS 1300 Thomaswood Drive

Tallahassee FL 32308
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF Brevard County

SUBJECT / Agenda # I.3

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


Signature

10/22/19
Date

SPEAKER'S CARD (Please Print)

Agenda# I-103

NAME BRUCE MOIA

ADDRESS _____

Melbourne FL STREET
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF MBV Florida Recyclers

SUBJECT / Agenda # I 103
US Army Corp Permit

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# I.1.3

NAME James Golden, Grove Scientific

ADDRESS 6140 Edgewater Drive Suite F
ORLANDO FL 32810
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF Florida Recyclers of Brevard, LLC

SUBJECT / Agenda # I.1.3 - ACOE - US192 Project

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

Golden
Signature

10/22/19
Date

SPEAKER'S CARD (Please Print)

Agenda# I.1

NAME Kimi Rezauka

ADDRESS 98 Willoud St. Ste 302
Coconut # FL STREET 32952
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF Banana Turnfront LLC

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.

Kimi Rezauka
Signature

10/22/19
Date

SPEAKER'S CARD (Please Print)

Agenda# I-1.3

NAME JACK KIRSCHENBAUM

ADDRESS 207 Antigua DR
COCONA BRADY # FL STREET 32931
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF FLORIDA RECYCLERS

SUBJECT / Agenda # I 1.3
US ARMY CORP PERMIT

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

[Signature]
Signature

10/22/19
Date

SPEAKER'S CARD (Please Print)

Agenda# H2+H3

NAME Linda Donahoe

ADDRESS 5340 Cinnamon Fern Blvd
Cocoa # FL STREET 32927
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF Cypress Woods HOA president

SUBJECT / Agenda # H-2 AND H-3

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

[Signature]
Signature

10/22/19
Date

SPEAKER'S CARD (Please Print)

Agenda# H3

NAME Sandra Sullivan

ADDRESS 165 Dorset
SPS # STREET
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF

SUBJECT / Agenda # H3

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# H.2, H.3

NAME Kim Rezanka

ADDRESS 96 Willard St., Ste 302

Cocoa FL # 32927
CITY STATE STREET ZIP CODE

ORGANIZATION YOU REPRESENT / SELF IBFS

SUBJECT / Agenda # H.2, H.3

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

Kim Rezanka
Signature

10/22/19
Date

SPEAKER'S CARD (Please Print)

Agenda# H.2 + H.3

NAME Tom Wells

ADDRESS 7586 Fringe Pl

Cocoa # FL 32927
CITY STATE STREET ZIP CODE

ORGANIZATION YOU REPRESENT / SELF self

SUBJECT / Agenda # H.2, H.3

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

Tom Wells
Signature

10-22-19
Date

(2)

SPEAKER'S CARD (Please Print)

Agenda# #3 G

NAME PATEN CARNEJALE

ADDRESS 1910 INDEPENDENCE AVE

Melbourne # FL STREET 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.


Signature

10/22/19
Date

(#3)

SPEAKER'S CARD (Please Print)

Agenda# G.#
Public Comment

NAME Bruce Moia

ADDRESS 1250 W. EAU CLAIRE

Moultrie # FL STREET 32935
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF

SUBJECT / Agenda # PUBLIC COMMENT Tom G.

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


Signature

10/22/19
Date

SPEAKER'S CARD (Please Print)

Agenda# F-5

NAME GLENN STORCH

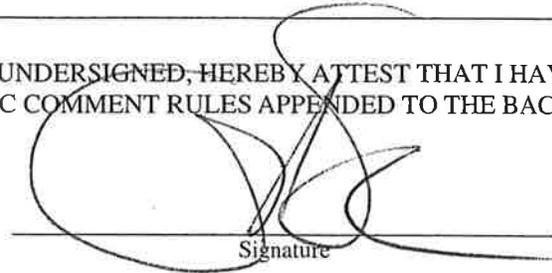
ADDRESS 420 S. NOVA RD.

DANTONA BELL, FL 32114
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF MIAMI CORP.

SUBJECT / Agenda # TO DEERING PARK STEWARDSHIP

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


Signature

10-22-19
Date

SPEAKER'S CARD (Please Print)

Agenda# F5
If pulled

NAME Jonathan Johnson

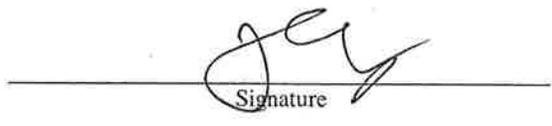
ADDRESS 119 S Monroe #300

Tallahassee FL 32301
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF Miami Corp.

SUBJECT / Agenda # Stewardship district

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


Signature

10/22
Date