

## SPEAKER'S CARD (Please Print)

F4

NAME Donald BarkerADDRESS 4540 Derrina Ct

Street

Merritt Island, FL 32953

City

State

Zip

Agenda # F4 \*only if pulled from Consent  
or Public Comment -Subject Agenda

Public Comment is limited to 30 minutes following approval of the Consent agenda. Any speaker not heard during the 30-minute segment will be heard during the second public comment section at the conclusion of agenda business. Individuals may not speak under both the first and second public comment period.

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Signature

Date

## SPEAKER'S CARD (Please Print)

Applicant

NAME Jessica Hays F4ADDRESS N. Conterney Pkwy

Street

City

State

Zip

Agenda # F-4 or Public Comment -Subject \_\_\_\_\_

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Signature

Date

5/20

## SPEAKER'S CARD (Please Print)

Applicant  
F. 4NAME Carter HayesADDRESS 1210 S. Hill Ave

Street

Cocoa Beach FL 32931

City

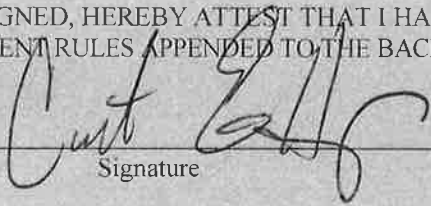
State

Zip

Agenda # Consent or Public Comment -Subject Re: Brian Liber

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Date

## SPEAKER'S CARD (Please Print)

F.15

NAME Nicholas F. SanzoneADDRESS 1539 Croft Wood Drive

Street

Melbourne FL 32935

City

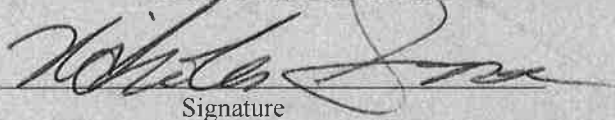
State

Zip

Agenda # F.15 or Public Comment -Subject F.15

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Signature

5/26/2022

Date

## SPEAKER'S CARD (Please Print)

Agenda# H.1

NAME

Kimi Rezanka

Applicant

ADDRESS

1290 US 1Rockledge

CITY

FL

STATE

STREET

32952

ZIP CODE

ORGANIZATION YOU REPRESENT

SELF

Donaldson / Applicant

SUBJECT / Agenda #

H.1

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

Kimi Rezanka

Signature

5/26/22

Date

## SPEAKER'S CARD (Please Print)

Applicant

NAME

JACK KirzchenbaumH-2

ADDRESS

207 Winton Dr

Street

CB

City

FL

State

32931

Zip

Agenda #

H-2

or Public Comment -Subject

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[Signature]

Signature

5/26

Date

## SPEAKER'S CARD (Please Print)

H-6

NAME Norman SchottADDRESS 3110 Diamond Rd

Street

T. Howell FL 32795

City

State

Zip

Agenda # H-6 or Public Comment -Subject \_\_\_\_\_

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Signature

5/21/22

Date

## SPEAKER'S CARD (Please Print)

Applicant

NAME Kim Fischer H-6ADDRESS 1614 White Dove Dr

Street

Winter Spring FL 32708

City

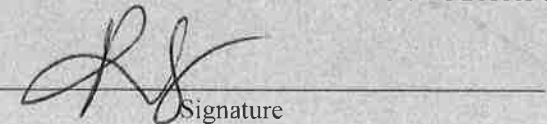
State

Zip

Agenda # H-6 or Public Comment -Subject \_\_\_\_\_

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5/26/22

Date



## SPEAKER'S CARD (Please Print)

J.1

NAME Kim RezaukaADDRESS 1290 US 1

Street

Rockledge FL

City

State

32955

Zip

Agenda # J.1 or Public Comment -Subject Applicant Rep

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Kim Rezauka

Signature

5/26/22

Date

## SPEAKER'S CARD (Please Print)

APPLICANT J.3

NAME GLENN WASSERMAN / DRIFTWOOD CAPITALADDRESS 255 ALHAMBRA CIRCLE, SUITE 760

Street

CORAL GABLES

City

FL

State

33134

Zip

Agenda # J3 or Public Comment -Subject \_\_\_\_\_

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Ga

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5/26/2022

Date

## SPEAKER'S CARD (Please Print)

J-3

NAME

Bob Bayher

ADDRESS

2210 S. Atlantic Ave

Street

CB

City

FL

State

32931

Zip

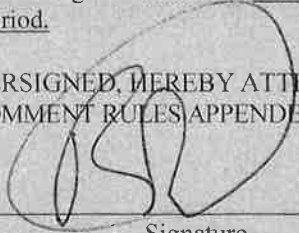
Agenda #

J-3

or Public Comment -Subject

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Signature

Date

## SPEAKER'S CARD (Please Print)

J-3

NAME

Janice Scott

ADDRESS

Cocoa Beach 32931

Street

City

State

Zip

Agenda #

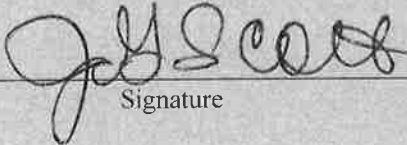
J-3

or Public Comment -Subject

1300 N ATL/TDC

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26 May 22

Date

## SPEAKER'S CARD (Please Print)

Applicant

NAME

Kyle Gagne

J.3

ADDRESS

4737 Woodland Brook Ct

Street

Atlanta

City

GA

State

30339

Zip

Agenda #

J3

or Public Comment -Subject

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