

SPEAKER'S CARD (Please Print)

Agenda# _____

NAME Brian Miller

ADDRESS 707 Nicolet Ave

Winnetka CITY Park # PL STREET 32735

STATE _____ ZIP CODE _____

ORGANIZATION YOU REPRESENT / SELF _____

SUBJECT / Agenda # ON STREET MEBIA

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

[Signature]
Signature

5-27-21
Date

SPEAKER'S CARD (Please Print)

Agenda# 13

NAME Susan Hodges

ADDRESS _____

_____ STREET _____

Vienq 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]

SPEAKER'S CARD (Please Print)

Agenda# 53NAME Ben Wilson / The Viera CompanyADDRESS 7380 Hurrell Road, Suite 201CITY Viera STATE FL ZIP CODE 32940ORGANIZATION YOU REPRESENT / SELF The Viera CompanySUBJECT / Agenda # On Street Media sign agreement.
Agenda Item 53.

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

Signature Ben WilsonDate 5/27/21

SPEAKER'S CARD (Please Print)

Agenda# 445NAME APP, GARY 445
AT GARA60210 445ADDRESS 3903 Rosslyn drCITY MELB STATE FL ZIP CODE 32934ORGANIZATION YOU REPRESENT SELF KAT. CHMSUBJECT / Agenda # Person my

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

Ben Wilson

SPEAKER'S CARD (Please Print)

Agenda# 43

NAME

Carrey Glusa

ADDRESS

845 Oakwood Dr

CITY

Neelam

STATE

PA

ZIP CODE

32540

ORGANIZATION YOU REPRESENT /
SELF

Habitat for Humanity

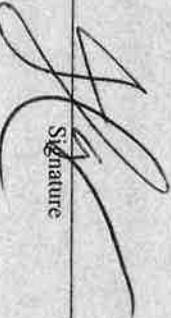
SUBJECT / Agenda #

43

Question only

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

Signature



5/27/21
Date

SPEAKER'S CARD (Please Print)

Agenda# 43

NAME

Anna Terry

ADDRESS

7815 Wyndham Dr

CITY

Vienna

STATE

PA

ZIP CODE

32540

ORGANIZATION YOU REPRESENT /
SELF

Habitat for Humanity of Beaver

SUBJECT / Agenda #

43

Question only

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#

4.3

NAME Kim Rezaulca

ADDRESS 1290 US Hwy 1

CITY Leoca STATE FL STREET # 32955
ZIP CODE

ORGANIZATION YOU REPRESENT /
SELF Advocate for Humanity

SUBJECT / Agenda # 4.3

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

Kim Rezaulca
Signature

5/23/21
Date

SPEAKER'S CARD (Please Print)

Agenda# 4.2

NAME Karen D. Alberto

ADDRESS 413 Red Sail Way

CITY Satellite Beach STATE FL STREET # 32937
ZIP CODE

ORGANIZATION YOU REPRESENT /
SELF Patricia Mayo

SUBJECT / Agenda # 2

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#

H2

NAME Patrick Meyer

ADDRESS 1061 Hyde Park Ln

#

STREET

McLb

FL

32925

CITY

STATE

ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF 5th Patrick Meyer

SUBJECT / Agenda #

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

Patrick Meyer

Signature

5/27/21

Date

SPEAKER'S CARD (Please Print)

Agenda#

H2

NAME Applicant - Kyle Lantz

ADDRESS 315 Surf Dr

#

STREET

Cape Canaveral

FL

32920

CITY

STATE

ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF ☒

SUBJECT / Agenda # Rezoning Ru-2-30 -> Ru-2-15

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

[Signature]

Signature

27 May 30

SPEAKER'S CARD (Please Print)

Agenda# 6

NAME Chanisara Netsuwan

ADDRESS 220 Spring Dr #1

CITY Merritt Island STATE FL STREET # 32953
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

5/27
Date

SPEAKER'S CARD (Please Print)

Agenda#

NAME

ADDRESS

CITY Merritt Island STATE FL STREET # 32952
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]

5/28/21

SPEAKER'S CARD (Please Print)

Agenda#

NAME

Michael Marks

ADDRESS

#

STREET

CITY

STATE

ZIP CODE

ORGANIZATION YOU REPRESENT
SELF

Yells

SUBJECT / Agenda #

G

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

Signature

Date

Michael Marks

SPEAKER'S CARD (Please Print)

Agenda#

NAME

Shirley Sullivan

ADDRESS

SPS Dorset

CITY

STATE

ZIP CODE

ORGANIZATION YOU REPRESENT
SELF

Waresach

SUBJECT / Agenda #

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

SPS

21 May

SPEAKER'S CARD (Please Print)

Agenda#

9

NAME

John Andrews

ADDRESS

777 Elvencora Ave

CITY

Tiptonville

STATE

FL

ZIP CODE

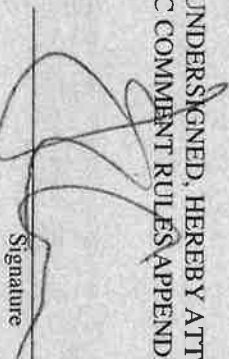
32760

ORGANIZATION YOU REPRESENT / SELF

SUBJECT / Agenda #

Community Water FL

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



Signature

5-27-21

Date

SPEAKER'S CARD (Please Print)

Agenda#

9

NAME

Dr. Gerald Bird

ADDRESS

1783 Rockledge Dr.

CITY

Rockledge

STATE

FL

ZIP CODE

32955

ORGANIZATION YOU REPRESENT / SELF

Bird + Johnson Ornithologist of Ber. Co. Delta Society

SUBJECT / Agenda #

Fluoridation of water

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# G

NAME DR CURTIS HILL DMD

ADDRESS 1400 PALM BAY RD.

#32905 STREET

CITY

STATE

ZIP CODE

PALM BAY, FL

ORGANIZATION YOU REPRESENT / BREV CO. DENT SOCIETY

SELF

SUBJECT / Agenda # FLUORIDE / H2O SYSTEMS

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

[Signature]
Signature

5/27/21
Date

SPEAKER'S CARD (Please Print)

Agenda# G

NAME

Dr. Angela McNaught

ADDRESS

344 S. LAWSIDE DR.

STREET

#32937

CITY

STATE

ZIP CODE

SATELLITE BEACH

FL

ORGANIZATION YOU REPRESENT / BREVARD COUNTY DENTAL SOCIETY

SELF

SUBJECT / Agenda #

VOCA FL

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

[Signature]

5/27/21

SPEAKER'S CARD (Please Print)

Agenda# FL

NAME

Sandra Sullivan

ADDRESS

165 Dorset Ln

CITY SPS

STATE

ZIP CODE

#32937

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.

Sullivan

Signature

21 May

Date

SPEAKER'S CARD (Please Print)

Agenda#

NAME

Sandra Sullivan

ADDRESS

165 Dorset Ln

CITY

STATE

ZIP CODE

SPS

ORGANIZATION YOU REPRESENT /
SELF

Wavesachon

SUBJECT / Agenda #

CFX / Parks

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

[Signature]

Signature

27 May

Date