

Public Comment

SPEAKER'S CARD (Please Print)

Agenda#

~~15~~ K

NAME

Robert Burns

①

ADDRESS

5829 Duskywing

Viera

CITY

FL

STATE

STREET

32955

ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF

SUBJECT / Agenda #

Public Comm.

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



Signature

3/20/15

Date

SPEAKER'S CARD (Please Print)

Agenda#

J. 4

NAME

Robert Burns

①

ADDRESS

5829 Duskywing Dr

Viera

CITY

FL

STATE

STREET

32955

ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF

SUBJECT / Agenda #

54

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



Signature

3/26/17

Date

Resolution

SPEAKER'S CARD (Please Print)

Agenda# E.5

NAME Tara McCue - ECFRPC

ADDRESS 455 N. Garland Ave

Orlando

CITY

FL

STATE

STREET

32801

ZIP CODE

ORGANIZATION YOU REPRESENT /
SELF ECFRPC

SUBJECT / Agenda # E5

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

Tara McCue

Signature

3/26/19
Date

SPEAKER'S CARD (Please Print)

Agenda# _____

NAME Tracy Pellegrino or Heather Howlett

ADDRESS _____

#

STREET

CITY

STATE

ZIP CODE

ORGANIZATION YOU REPRESENT /
SELF _____

SUBJECT / Agenda # 3

Child Abuse Prevention Task Force

* Tracy may be stuck in traffic

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

Bad traffic on I-95

Signature

Date

Public Comment

SPEAKER'S CARD (Please Print)

Agenda# 6
2

* NAME Susan Mettel

ADDRESS 1370 St. Catherine's Cir
Vero Beach # FL STREET 32963
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /
SELF FL Alliance for Safe Trains

SUBJECT / Agenda # Virgin Trains

** WAS SUPPOSED TO BE ON AGENDA **

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

Susan Mettel
Signature

3/26/19
Date

Public Comment

SPEAKER'S CARD (Please Print)

Agenda# 6

NAME Robert Burns

ADDRESS 5829 Duskywing Dr
Rockledge # FL STREET 32955
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /
SELF Self

SUBJECT / Agenda # Publ. Comm.

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

Robert Burns
Signature

3/24/19
Date

SPEAKER'S CARD (Please Print)Agenda# H.3
(1)NAME Kimi RezankaADDRESS 96 Willard St.
Cocoa FL 32922
CITY STATE ZIP CODEORGANIZATION YOU REPRESENT /
SELF Mary Danneheim
SUBJECT / Agenda # H.3 Questions OnlyI THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE
PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.Kimi Rezanka
Signature3/26/17
Date**SPEAKER'S CARD (Please Print)**Agenda# H.2
(1)NAME Kimi RezankaADDRESS 96 Willard St
Cocoa FL 32922
CITY STATE ZIP CODEORGANIZATION YOU REPRESENT /
SELF Honest John's Fish Camp
SUBJECT / Agenda # H.2 - questions onlyI THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE
PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.Kimi Rezanka
Signature3/26/19
Date

Pub. Hrg.

SPEAKER'S CARD (Please Print)

Agenda# 144

NAME Robert Bauman

(2)

ADDRESS 122 Brandy Creek Circle SE
Palm Bay FL 32909
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF

SUBJECT / Agenda # Ban on retail sale of
dogs + cats

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


Signature

3/26/19
Date

Public Hrg.

SPEAKER'S CARD (Please Print)

Agenda# 144

NAME Bill Jacobson

(1)

ADDRESS 3812 St. Ann's Circle
N. Palm Beach FL 33434
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF Puppies Plus

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

26 Mar 19
Date

Pub. No.

SPEAKER'S CARD (Please Print)

Agenda# H-4
(4)

NAME BRAD LLOYD

ADDRESS 221 MAPLE DR

SATELLITE BEACH # FL
CITY STATE

STREET
32937
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

3/26/19
Date

Pub. No.

SPEAKER'S CARD (Please Print)

Agenda# H4
(3)

NAME CAROL BARRETT

ADDRESS 2722 MADRIGAL LN

W. MEL BOURNE # FL
CITY STATE

STREET
32904
ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF

SUBJECT / Agenda # H4

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

[Signature]
Signature

3/26/19
Date

Pub. Hrg.

SPEAKER'S CARD (Please Print)

Agenda# H4

NAME Briana Brown (6)

ADDRESS 13705 N Dale Mabry
Tampa FL 33618
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.

Briana Brown
Signature

3/26/19
Date

Pub. Hrg.

SPEAKER'S CARD (Please Print)

Agenda# H4

NAME PHILLIP JACOBSON (5)

ADDRESS 9667 WICKHAM RD #1307
MELBOURNE FL 32940
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /
(SELF)

SUBJECT / Agenda # H4

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

Phillip Jacobson
Signature

3/26/19
Date

Pup King.

SPEAKER'S CARD (Please Print)

Agenda# H4

NAME ALEXANDRIA JULIAN (8)

ADDRESS 2124 W BRANDON BLVD
BRANDON FL 33511
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /
SELF (8)

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

3/24
Date

Pup King

SPEAKER'S CARD (Please Print)

Agenda# H4

NAME Daniela Coffey (7)

ADDRESS 13705 N Dale Mabry
Tampa FL 33618
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /
SELF My Puppy My Choice

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

3/26/19
Date

Pub Hrg.

SPEAKER'S CARD (Please Print)

Agenda# H-4

NAME Cheryl Lankes

(10)

ADDRESS 1356 Jane Ct

Merritt Isld FL
CITY STATE

32952
STREET ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF ☒

SUBJECT / Agenda # 1

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

3/26/19
Date

Pub Hrg.

SPEAKER'S CARD (Please Print)

Agenda# H-4

NAME Angie Friers

(9)

ADDRESS 1217 White Oak Cir

Melbourne FL
CITY STATE

32934
STREET ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF SPCA of Brevard

SUBJECT / Agenda # Puppy Ordinance

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

Angie Friers
Signature

3-26-19
Date

Pub. Hq.

SPEAKER'S CARD (Please Print)

Agenda#

H.4
(12)

NAME

Dianne Swapp

ADDRESS

627 Flynn St SE

Palm Bay

CITY

FL

STATE

STREET

32909

ZIP CODE

ORGANIZATION YOU REPRESENT /
SELF

Puppies

SUBJECT / Agenda #

H-4

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

Dianne Swapp

Signature

Date

Pub. Hq.

SPEAKER'S CARD (Please Print)

Agenda#

H.4
(11)

NAME

Greg Shackles

ADDRESS

2273 Lucille Lane

Orlando

CITY

FL

STATE

STREET

32935

ZIP CODE

ORGANIZATION YOU REPRESENT /
SELF

SUBJECT / Agenda #

H4

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

Greg Shackles

Signature

Date

3.26.19

SPEAKER'S CARD (Please Print)

Agenda#

H4
(4)

NAME

Carla Wilson

ADDRESS

Winter Sp # STREET
CITY STATE ZIP CODEORGANIZATION YOU REPRESENT /
SELF

SUBJECT / Agenda #

H4I THE UNDERSIGNED, HEREBY ATTEST THAT I HAVE READ AND UNDERSTAND THE
PUBLIC COMMENT RULES APPENDED TO THE BACK OF THIS CARD.

Signature

Date

3/26/19

Pub Hq.

SPEAKER'S CARD (Please Print)

Agenda#

H.4
(13)

NAME

Michele Lazzaroni

ADDRESS

2621 NE 10 Street
Hallandale Beach FL # STREET 33009
CITY STATE ZIP CODEORGANIZATION YOU REPRESENT /
SELFAnimal Defense Coalition

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

M. Lazzaroni

P. Neg.

SPEAKER'S CARD (Please Print)

Agenda# H4

NAME Pam LaSalle

16

ADDRESS 2380 CAMBERLY CIR

MELBOURNE
CITY

FL
STATE

32940
STREET
ZIP CODE

ORGANIZATION YOU REPRESENT /
SELF _____

SUBJECT / Agenda # PET SALE BAN H4

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

Pam LaSalle
Signature

3-26-2019
Date

P. Neg.

SPEAKER'S CARD (Please Print)

Agenda# H.4

NAME Susan Thibodeau

15

ADDRESS 5100 Banana Ave

Cocoa
CITY

FL
STATE

32926
STREET
ZIP CODE

ORGANIZATION YOU REPRESENT /
SELF Brevard Kennel Club

SUBJECT / Agenda # H-4 Pet retail sales

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

Susan Thibodeau
Signature

3/26/19
Date

Cheryl Hng

SPEAKER'S CARD (Please Print)

Agenda# H4

NAME NATALIA SANABRIA

(18)

ADDRESS 13705 N Dale Mabry

Tampa

CITY

FL

STATE

33618

ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF MPMC

SUBJECT / Agenda # H4

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



Signature

3.26.19
Date

Cheryl Hng

SPEAKER'S CARD (Please Print)

Agenda# H4

NAME JOHN LA SALLE

(19)

ADDRESS 2380 CAMBERLY CIR

MELBOURNE

CITY

FL

STATE

32940

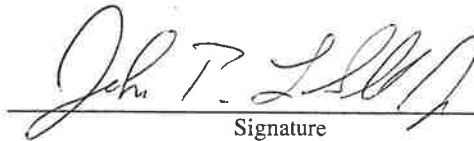
ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF

SUBJECT / Agenda # PET SALE BAN H4

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



Signature

3-26-2019
Date

N.B. - Questions only

SPEAKER'S CARD (Please Print)

Agenda# J.1.
Questions only

NAME TODD POKRYWA
ADDRESS 7380 MURRELL RD SUITE 201
VIERA FL 32940
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF THE VIERA COMPANY

SUBJECT / Agenda # J.1. (APPLICANT/PROPERTY OWNER
QUESTIONS ONLY)

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

[Signature]
Signature

3/26/19
Date

N.B.

SPEAKER'S CARD (Please Print)

Agenda# J.1
(2)

NAME Hassan Kamal
ADDRESS 312 S. Harbor City Blvd
Melbourne FL 32901
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF The Viera Company

SUBJECT / Agenda # J.1 - Waiver for Sign height

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

[Signature]
Signature

3/26/19
Date

New business

SPEAKER'S CARD (Please Print)

Agenda# J. S
Barefoot Bay (1)

NAME Cliff Reppinger, General Counsel

ADDRESS 1901 S. Harbor City Blvd Suite 500

Melbourne FL 32901
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF Barefoot Bay Recreation District

SUBJECT / Agenda # Barefoot Bay Recreation District
Utilization of Un. Firm Tax Assessments

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

[Signature]
Signature

Tabled

3/26/19
Date