

APPLICANT
SPEAKER'S CARD (Please Print)

Agenda# H.S.

NAME Bruce Moia

ADDRESS 1250 W. PAU GRAYS BLVD.

Mission, FL 32935
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF LAZY RIVER WISAWAY, LLC

SUBJECT / Agenda # H.S. BDP FOR 8 UNITS

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

[Signature]
Signature

10/3/19
Date

APPLICANT
SPEAKER'S CARD (Please Print)

Agenda# H-S-H-S

NAME Kimi Rezanka

ADDRESS 96 Willard St, St. 302

Cocoa FL 32922
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF JSFS Land Trust

SUBJECT / Agenda # H8, 9

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

[Signature]
Signature

10/3/19
Date

APPLICANT
SPEAKER'S CARD (Please Print)

Agenda# H.8

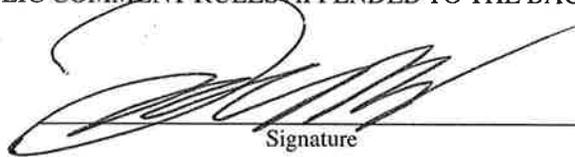
NAME Z SID CHEHAVER

ADDRESS 3450 BOBBI LANE
TITUSVILLE FL 32780
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF _____

SUBJECT / Agenda # H.8

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


Signature

10/3/19
Date

OWNER
SPEAKER'S CARD (Please Print)

Agenda# H8H9

NAME JUAN F. NAGRO

ADDRESS 210 174 ST. UNIT 1110
SUNNY ISLES BEACH FL 33160
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF SOME ONE DEVELOPMENT LLC

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

10.3.19
Date

SPEAKER'S CARD (Please Print)

Agenda# 118
49

NAME LINDA Donahoe

ADDRESS 5340 CINNAMON fern BLVD
STREET
Cocoa FL 32927
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /
SELF CW HOA President

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

10/3/19
Date

SPEAKER'S CARD (Please Print)

Agenda# H.8

NAME ROLAND HUDSON

ADDRESS 5230 EVERETT ST
STREET
COCOA FL 32927
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /
SELF ROLAND HUDSON

SUBJECT / Agenda # JFS LAND TRUST

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

[Signature]
Signature

10-3-19
Date

SPEAKER'S CARD (Please Print)

Agenda# H8
H9

NAME Chris Clements

ADDRESS 5522 Yavon Hollis Dr

Cocoa # FL STREET 32927
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /
SELF

SUBJECT / Agenda # H-8 + H-9

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

Chris G. Clements
Signature

10/3/19
Date

Applicant
SPEAKER'S CARD (Please Print)

Agenda# H-7

NAME Carmin Ferraro

ADDRESS 3860 Curtis Blvd #636

Cocoa # FL STREET 32927
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /
SELF Applicant

SUBJECT / Agenda # H-7

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

[Signature]
Signature

10/3/19
Date

SPEAKER'S CARD (Please Print)

Agenda# H7

NAME Linda Donahue

ADDRESS 5340 Cinnamon Fern Blvd
Coloia FL 32925
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF CW Pres

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

10/3/19
Date

SPEAKER'S CARD (Please Print)

Agenda# H6

NAME Robert Lee

ADDRESS 405 Pine Tree Dr.
Indiantic FL 32903
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF BREVARD MEDICAL CITY LLC

SUBJECT / Agenda # H6 comp plan amendment
transmittal

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

[Signature]
Signature

10/3/2019
Date

SPEAKER'S CARD (Please Print)

Agenda# H.5

NAME Linda Behret

ADDRESS 5960 Herons Landing Dr

Viera

FL

STREET

32955

CITY

STATE

ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF

SUBJECT / Agenda # H.5

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

Linda Behret

Signature

10/3/19

Date

SPEAKER'S CARD (Please Print)

Agenda# H.5

NAME Jacob Zehnder

ADDRESS 1750 Mosswood Dr.

Melbourne

FL

STREET

32935

CITY

STATE

ZIP CODE

ORGANIZATION YOU REPRESENT /

SELF

SUBJECT / Agenda # H.5

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

[Signature]

Signature

10/3/19

Date

SPEAKER'S CARD (Please Print)

Agenda# H-5 ^{7.5}

NAME Terry Laplante

ADDRESS 4052 FRIAR TUCK LN
Melbourne # FL STREET 32931
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF TREES FOR LIFE BREVARD

SUBJECT / Agenda # H-5

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

Terry Laplante
Signature

10/3/19
Date

SPEAKER'S CARD (Please Print)

Agenda# H.5

NAME Mary Sphar

ADDRESS 825 Cliftons Cove Ct.
Cocoa # FL STREET 32926
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF Sierra Club

SUBJECT / Agenda # H.5 Lazy River Investments - BDP

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

Mary Sphar
Signature

10-3-19
Date

SPEAKER'S CARD (Please Print)

Agenda# H-5

NAME Chelle Woods

ADDRESS 9912 Riverview Dr
Mico # FL STREET 32976
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF Mico Homeowners Assoc.

SUBJECT / Agenda # H-5

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

[Signature]
Signature

10/3/19
Date

SPEAKER'S CARD (Please Print)

Agenda# H-5

NAME DAVID BOTTO

ADDRESS 275 Ponce de Leon Dr
HB # FL STREET 37937
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT / SELF MARINE RESOURCES COUNCIL

SUBJECT / Agenda # H-5

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

[Signature]
Signature

10/3/19
Date

SPEAKER'S CARD (Please Print)

Agenda# H.5

NAME DASIN MONTGOMERY

ADDRESS 1310. KNECHT
PALM RAV FL 32905
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /
SELF _____

SUBJECT / Agenda # H5

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

D. Montgomery
Signature

4 Oct 2019
Date

SPEAKER'S CARD (Please Print)

Agenda# H.5

NAME Robin Carroll

ADDRESS 9575 Fleming Grant Rd
Micco FL 32976
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /
SELF

SUBJECT / Agenda # H.5

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

Robin Carroll
Signature

10/3/19
Date

DO 113
SPEAKER'S CARD (Please Print)

Agenda# H3

NAME Scott Merson

ADDRESS 2565 Sellers Lane
Melbame # 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.

Sumner
Signature

10-3-19
Date

OWNER & APPLICANT
SPEAKER'S CARD (Please Print)

Agenda# H4

NAME MONICA ELLIS

ADDRESS 950 N TROPICAL TRAIL
MERRITT ISLAND FL # 32953
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /
SELF OWNER / APPLICANT

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.

Mellis
Signature

10/3/19
Date

OWNER AND APPLICANT
SPEAKER'S CARD (Please Print)

Agenda# H.1

NAME ROCCO CITENO

ADDRESS 255 SPOONBILL LANE

MELBOURNE BEACH # FL STREET 32951
CITY STATE ZIP CODE

ORGANIZATION YOU REPRESENT /
SELF OWNER + APPLICANT - SELF

SUBJECT / Agenda # H.1 CUP FOR BOAT DOCK
AT 425 ROSS AVE

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


Signature

10-3-2019
Date