222

PLEASE PRINT *Name and Address are required	.1.1
NAME: Joson (gabrie)	DATE:6/18/24
NAME: Joson Gabriel ADDRESS: <u>50 N. Laura St</u> ZIP: <u>32202</u>	PHONE: 232-7211
E-MAIL ADDRESS:	Belve Ley
If you are a Lobbyist/Agent, have you registered as a lobbyist with the City Council PUBLIC HEARING BILL NUMBER:	I Secretary? Yes No
I SUPPORT (or) I OPPOSE THIS LEGISLATION	
Please check this box if you are here to answer questions only, or if you DO NO	T wish to speak during the Public Hearing.
If you intend to speak, please sign below to indicate that you affirm that the testime the whole truth and nothing but the truth	ony you are about to give will be the truth,
SPEAKING TIME IS LIMITED TO THREE (3) MINUTE NO SPEAKER MAY GIVE OR TRANSFER THEIR TIME TO	
(Please read the reverse side for instructions on speaking be	

22

:51

PLEASE PRINT *Name and Address are required
NAME: Fred atwill, Jr. DATE: 06/18/2022
NAME: Fred 9tw; 11, JF. DATE: 06/18/2022 ADDRESS: 9001 Forest acres Lane zip: 32234 PHONE: 904 610-8975
E-MAIL ADDRESS: atwill Fred 15 @ gm2il.com
Are you a Lobbyist/Agent? Xyes I No If yes, who do you represent? <u>FLO - 9AS/Sherp Evergy</u>
If you are a Lobbyist/Agent, have you registered as a lobbyist with the City Council Secretary? Yes INO PUBLIC HEARING BILL NUMBER: 2024-0225
I SUPPORT (or) I OPPOSE THIS LEGISLATION
Please check this box if you are here to answer questions only, or if you DO NOT wish to speak during the Public Hearing.
If you intend to speak, please sign below to indicate that you affirm that the testimony you are about to give will be the truth,
the whole truth and nothing but the truth
Jul Cote Ol X
SPEAKING TIME IS LIMITED TO THREE (3) MINUTES PER SPEAKER.
NO SPEAKER MAY GIVE OR TRANSFER THEIR TIME TO ANOTHER PERSON.
(Please read the reverse side for instructions on speaking before the City Council.)

220

PLEASE PRINT *Name and Address are required
NAME: Fred atuilles DATE: 0.6/18/2024
ADDRESS: 9001 Forest agres Lape ZIP: 32234 PHONE: 904 610 8975
E-MAIL ADDRESS: Gtoil Afred 15 @ gmail-com
E-MAIL ADDRESS: <u>Gtwillefred 15 & gmail-com</u> Are you a Lobbyist/Agent? Ares INO If yes, who do you represent? <u>FLO-925</u> / <u>Shaop</u> Energy
If you are a Lobbyist/Agent, have you registered as a lobbyist with the City Council Secretary? Xes No
PUBLIC HEARING BILL NUMBER: 2024-0226
I SUPPORT (or) I OPPOSE THIS LEGISLATION
Please check this box if you are here to answer questions only, or if you DO NOT wish to speak during the Public Hearing.
If you intend to speak, please sign below to indicate that you affirm that the testimony you are about to give will be the truth, the whole truth and nothing but the truth
SPEAKING TIME IS LIMITED TO THREE (3) MINUTES PER SPEAKER. NO SPEAKER MAY GIVE OR TRANSFER THEIR TIME TO ANOTHER PERSON. (Please read the reverse side for instructions on speaking before the City Council.)

PLEASE PRINT *Name and Address are required	
NAME: COURTNEY GOVER DATE: 6-18-2024	
ADDRESS: 1301 Riverplace Blvd. Suit ZIP: 32207 PHONE: 904-473-138F	
E-MAIL ADDRESS: CGaver@rtlaw.ccm prmory Redevelopinut	
E-MAIL ADDRESS: <u>CGaver@rflaw.ccm</u> Are you a Lobbyist/Agent? Yes No If yes, who do you represent? <u>Awocicter Luc</u>	
If you are a Lobbyist/Agent, have you registered as a lobbyist with the City Council Secretary? Ves No	
PUBLIC HEARING BILL NUMBER: 2024-273	
I SUPPORT (or) I OPPOSE THIS LEGISLATION	
Please check this box if you are here to answer questions only, or if you DO NOT wish to speak during the Public Hearing.	
If you intend to speak, please sign below to indicate that you affirm that the testimony you are about to give will be the truth, the whole truth and nothing but the truth	
SPEAKING TIME IS LIMITED TO THREE (3) MINUTES PER SPEAKER.	
NO SPEAKER MAY GIVE OR TRANSFER THEIR TIME TO ANOTHER PERSON. (Please read the reverse side for instructions on speaking before the City Gouncil.) 18 pm4:58	
(1) rease read the reverse side for instructions on speaking before the City Jouncilly 18 PM4: 30	

24-274

PLEASE PRINT *Name and Address are required	
NAME: COURTNEY Gaver DATE: 6-18-2024	
ADDRESS: 1301 Riverplace Bluch, isou ZIP: 32207 PHONE: 904-473-1388	
E-MAIL ADDRESS: <u>COVENO FHOW.COM</u> Are you a Lobbyist/Agent? I'Yes I No If yes, who do you represent? <u>Armory Redevelopment</u>	
Are you a Lobbyist/Agent? Yes I No If yes, who do you represent? Ascence UCC	
If you are a Lobbyist/Agent, have you registered as a lobbyist with the City Council Secretary? Wes INO	
PUBLIC HEARING BILL NUMBER: 2024 - 274	
I SUPPORT (or) I OPPOSE THIS LEGISLATION	
Please check this box if you are here to answer questions only, or if you DO NOT wish to speak during the Public Hearing.	
If you intend to speak, please sign below to indicate that you affirm that the testimony you are about to give will be the truth, the whole truth and nothing but the truth	

SPEAKING TIME IS LIMITED TO <u>THREE (3) MINUTES</u> PER SPEAKER. NO SPEAKER MAY GIVE OR TRANSFER THEIR TIME TO ANOTHER **PERSON**. 18 pm4:58 (Please read the reverse side for instructions on speaking before the City Council.)

PLEASE PRINT *Name and Address are required
NAME: Paul Harde DATE: 18 Apr 24 ADDRESS: 1431 Puerpho ZIP: PHONE:
ADDRESS: 1431 Durpho ZIP: PHONE:
E-MAIL ADDRESS:
Are you a Lobbyist/Agent? Yes Ves No If yes, who do you represent?
If you are a Lobbyist/Agent, have you registered as a lobbyist with the City Council Secretary? I Yes 🛛 No
PUBLIC HEARING BILL NUMBER: 2024-03-12 (15)
PUBLIC HEARING BILL NUMBER: $2024-03-62$ (15) I SUPPORT V (or) I OPPOSE THIS LEGISLATION 2024 JUN 18 PM4:38
Please check this box if you are here to answer questions only, or if you DO NOT wish to speak during the Public Hearing.
If you intend to speak, please sign below to indicate that you affirm that the testimony you are about to give will be the truth, the whole truth and nothing but the truth
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NO SPEAKER MAY GIVE OR TRANSFER THEIR TIME TO ANOTHER PERSON.
(Please read the reverse side for instructions on speaking before the City Council.)

PLEASE PRINT *Name and Address are required		
NAME: Paul Harde DATE: 18 Ph 29		
ADDRESS: 1431 Procepto ZIP: PHONE:		
E-MAIL ADDRESS:		
Are you a Lobbyist/Agent? Yes No If yes, who do you represent?		
If you are a Lobbyist/Agent, have you registered as a lobbyist with the City Council Secretary? PUBLIC HEARING BILL NUMBER: 2024-3(3 (16) 2024 JUN 18 PH4:38 I SUPPORT (or) I OPPOSE THIS LEGISLATION		
Please check this box if you are here to answer questions only, or if you DO NOT wish to speak during the Public Hearing.		
If you intend to speak, please sign below to indicate that you affirm that the testimony you are about to give will be the truth, the whole truth and nothing but the truth		
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NO SPEAKER MAY GIVE OR TRANSFER THEIR TIME TO ANOTHER PERSON. (Please read the reverse side for instructions on speaking before the City Council.)		

PLEASE PRINT *Name and Address are required	
NAME: Paul Harden DATE: 18/Apr 29	
ADDRESS: 143 Pringhe ZIP: PHONE:	
E-MAIL ADDRESS:	
Are you a Lobbyist/Agent? Yes No If yes, who do you represent?	
If you are a Lobbyist/Agent, have you registered as a lobbyist with the City Council Secretary? Pres INO	
PUBLIC HEARING BILL NUMBER: 2024-6344 (17) I SUPPORT (or) I OPPOSE THIS LEGISLATION 2024 JUN 18 PM 4:38	
Please check this box if you are here to answer questions only, or if you DO NOT wish to speak during the Public Hearing.	
If you intend to speak, please sign below to indicate that you affirm that the testimony you are about to give will be the truth, the whole truth and nothing but the truth	
SPEAKING TIME IS LIMITED TO THREE (3) MINUTES PER SPEAKER.	
NO SPEAKER MAY GIVE OR TRANSFER THEIR TIME TO ANOTHER PERSON. (Please read the reverse side for instructions on speaking before the City Council.)	
(a rease read and receive state for inservicious on speaking before the only countern)	

PLEASE PRINT *Name and Address are required	
NAME: Mile Herberg DATE: 6/18/24	
ADDRESS: 12483 Aladd n Rd) ZIP: 32223 PHONE:	
E-MAIL ADDRESS: Mherzberg Osleinan. Com	
Are you a Lobbyist/Agent? Yes Yes I No If yes, who do you represent?	
If you are a Lobbyist/Agent, have you registered as a lobbyist with the City Council Secretary? \Box Yes \Box No PUBLIC HEARING BILL NUMBER: 2024-345 2024 JUN 18 PM4:38	
I SUPPORT (or) I OPPOSE THIS LEGISLATION	
Please check this box if you are here to answer questions only, or if you DO NOT wish to speak during the Public Hearing.	
If you intend to speak, please sign below to indicate that you affirm that the testimony you are about to give will be the truth, the whole truth and nothing but the truth	
SPEAKING TIME IS LIMITED TO THREE (3) MINUTES PER SPEAKER.	
NO SPEAKER MAY GIVE OR TRANSFER THEIR TIME TO ANOTHER PERSON.	
(Please read the reverse side for instructions on speaking before the City Council.)	

PLEASE PRINT *Name and Address are required
NAME: Mike Herzberg DATE: 6/18/24
ADDRESS 2433 Aladah 12d ZIP. 32223 PHONE
E-MAIL ADDRESS: Mherzberg @ sleinan
Are you a Lobbyist/Agent? Yes Koo If yes, who do you represent?
If you are a Lobbyist/Agent, have you registered as a lobbyist with the City Council Secretary? PUBLIC HEARING BILL NUMBER:
I SUPPORT (or) I OPPOSE THIS LEGISLATION
Please check this box if you are here to answer questions only, or if you DO NOT wish to speak during the Public Hearing.
If you intend to speak, please sign below to indicate that you affirm that the testimony you are about to give will be the truth, the whole truth and nothing but the truth
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NO SPEAKER MAY GIVE OR TRANSFER THEIR TIME TO ANOTHER PERSON. (Please read the reverse side for instructions on speaking before the City Council.)

PLEASE PRINT *Name and Address are required	
NAME: Emily Pierce DATE: 6(18)24	1
ADDRESS: 1301 Riveplan Blod ZIP: 32207 PHONE: 904-35.	8-3911
E-MAIL ADDRESS: <u>epierce_e_tlaw.com</u>	
E-MAIL ADDRESS: <u>epierce_ertlaw.com</u> Are you a Lobbyist/Agent? Yes INO If yes, who do you represent? <u>Applicant</u>	<u> </u>
사실 전체 등 방법에서 이번 방법에서 유가하는 것이 같이 많이 많이 많이 있다. 이번 것이 있는 것이 가 있다. 가지 않는 것이 있는 것이 없다. 가지 않는 것이 있는 것이 없는 것이 없는 것이 없는 것이 없는 것이 없다. 것이 없는 것이 없다. 것이 없는 것이 없다. 것이 없는 것이 없다. 것이 없는 것이 않는 것이 없는 것이 있	☐ No
I SUPPORT	
Please check this box if you are here to answer questions only, or if you DO NOT wish to speak during the	Public Hearing.
If you intend to speak, please sign below to indicate that you affirm that the testimony you are about to give with the whole truth and nothing but the truth	ill be the truth,
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(Please read the reverse side for instructions on speaking before the City Council.)	JUN 18 '24 PH 4

58

PLEASE PRINT *Name and Address are required
NAME: Emily Pierce DATE: 6/18/24
ADDRESS: 1301 Riveplace Blid. ZIP: 32207 PHONE: 904-398-3911
E-MAIL ADDRESS: e pierce et law, com
Are you a Lobbyist/Agent? A Yes D No If yes, who do you represent? Applicant
If you are a Lobbyist/Agent, have you registered as a lobbyist with the City Council Secretary? 🗹 Yes 🛛 No
PUBLIC HEARING BILL NUMBER: 2024 - 348
I SUPPORT (or) I OPPOSE THIS LEGISLATION
Please check this box if you are here to answer questions only, or if you DO NOT wish to speak during the Public Hearing
If you intend to speak, please sign below to indicate that you affirm that the testimony you are about to give will be the trut the whole truth and nothing but the truth
SPEAKING TIME IS LIMITED TO THREE (3) MINUTES PER SPEAKER.
NO SPEAKER MAY GIVE OR TRANSFER THEIR TIME TO ANOTHER PERSON.

(Please read the reverse side for instructions on speaking before the City Council.)

JUN 18'24 PM 4:58

PLEASE PRINT *Name and Address are required
NAME: Michaelveil DATE: 6/18/24
NAME: $Millia line and address are required NAME: Millia line address are required ADDRESS: PSO NE 111^{th} SF M^{-} ZIP: 331El PHONE: 3^{2}S - 790 - 284E$
E-MAIL ADDRESS: Muril of phxj-x dom
E-MAIL ADDRESS: <u>mart of phyjory dom</u> Are you a Lobbyist/Agent? Yes Who If yes, who do you represent? <u>Application</u>
If you are a Lobbyist/Agent, have you registered as a lobbyist with the City Council Secretary?
PUBLIC HEARING BILL NUMBER: 2024-348
I SUPPORT (or) I OPPOSE THIS LEGISLATION
Please check this box if you are here to answer questions only, or if you DO NOT wish to speak during the Public Hearing.
If you intend to speak, please sign below to indicate that you affirm that the testimony you are about to give will be the truth,
the whole truth and nothing but the truth
SPEAKING TIME IS LIMITED TO THREE (3) MINUTES PER SPEAKER.
NO SPEAKER MAY GIVE OR TRANSFER THEIR TIME TO ANOTHER PERSON. (Please read the reverse side for instructions on speaking before the City Council.)

250
LAND USE & ZONING COMMITTEE PUBLIC HEARING 244
REQUEST TO SPEAK/REGISTER
PLEASE PRINT *Name and Address are required
NAME: BRIAN SMALL DATE: 63/8/24
ADDRESS: 3948 350 St. S. ZIP: 3200 PHONE: 842-344-0933
E-MAIL ADDRESS: BRIAN & birddodad.com
Are you a Lobbyist/Agent? Yes No If yes, who do you represent?
If you are a Lobbyist/Agent, have you registered as a lobbyist with the City Council Secretary? Yes No
PUBLIC HEARING BILL NUMBER: 2024-0349
I SUPPORT (or) I OPPOSE THIS LEGISLATION
Please check this box if you are here to answer questions only, or if you DO NOT wish to speak during the Public Hearing.
If you intend to speak, please sign below to indicate that you affirm that the testimony you are about to give will be the truth,
the whole truth and nothing but the truth
- Ama
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NO SPEAKER MAY GIVE OR TRANSFER THEIR TIME TO ANOTHER PERSON. (Please read the reverse side for instructions on speaking before the City Council.)

24-30

PLEASE PRINT *Name and Address are required
NAME: Max Andrews DATE: 6-18-24
ADDRESS: 111 Palm PI, Wepture Brock 32266 PHONE: 321-759-0287
E-MAIL ADDRESS: Max @ Birddogland. Com
Are you a Lobbyist/Agent? 🛛 Yes 💢 No 🛛 If yes, who do you represent?
If you are a Lobbyist/Agent, have you registered as a lobbyist with the City Council Secretary? PUBLIC HEARING BILL NUMBER: 2024 - 0349
I SUPPORT (or) I OPPOSE THIS LEGISLATION
Please check this box if you are here to answer questions only, or if you DO NOT wish to speak during the Public Hearing.
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24

PLEASE PRINT *Name and Address are required
NAME: BRANSMAN DATE: 6/18/24
ADDRESS: 3948 3rd Street S. ZIP: 3280 PHONE: 843-304-9333
E-MAIL ADDRESS: BLIANC BILDONG HUD. COM
Are you a Lobbyist/Agent? Yes Yes If yes, who do you represent?
If you are a Lobbyist/Agent, have you registered as a lobbyist with the City Council Secretary? 🛛 Yes 🔹 No
PUBLIC HEARING BILL NUMBER: $2024 - 0350$
I SUPPORT (or) I OPPOSE THIS LEGISLATION
Please check this box if you are here to answer questions only, or if you DO NOT wish to speak during the Public Hearing.
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PLEASE PRINT *Name and Address are required
NAME: Max Andrews DATE: 6-18-19
$\frac{MEASE TERM + Name and Address are required}{NAME: Max Andrews} DATE: 6-18-24$ $ADDRESS: 111 Palm Pl zip: 32266 PHONE: 321-759-0287$
E-MAIL ADDRESS: Max @ Bird dog land.com
Are you a Lobbyist/Agent? Yes Ko If yes, who do you represent?
If you are a Lobbyist/Agent, have you registered as a lobbyist with the City Council Secretary? 🛛 Yes 🗍 No
PUBLIC HEARING BILL NUMBER: 2024-0350
I SUPPORT (or) I OPPOSE THIS LEGISLATION
Please check this box if you are here to answer questions only, or if you DO NOT wish to speak during the Public Hearing.
If you intend to speak, please sign below to indicate that you affirm that the testimony you are about to give will be the truth, the whole truth and nothing but the truth
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NO SPEAKER MAY GIVE OR TRANSFER THEIR TIME TO ANOTHER PERSON. (Please read the reverse side for instructions on speaking before the City Council.)

24-351

PLEASE PRINT *Name and Address are required	1=111
NAME: Showed Novack	DATE: _ (/18127
PLEASE PRINT *Name and Address are required NAME: Shmvel Novach ADDRESS: 1271 Abbii Nay ZIP: 32346 E-MAIL ADDRESS: Chabaly NAChual Ga Are you a Lobbyist/Agent? Yes No	PHONE: 904 476 0366
E-MAIL ADDRESS: Or Store of Construction	
Are you a Lobbyist/Agent? Yes No If yes, who do you represent?	
If you are a Lobbyist/Agent, have you registered as a lobbyist with the City Council	
PUBLIC HEARING BILL NUMBER: 24-35	
I SUPPORT (or) I OPPOSE THIS LEGISLATION	2024 JUN 18 PM 4:54
Please check this box if you are here to answer questions only, or if you DO NOT	f wish to speak during the Public Hearing.
If you intend to speak, please sign below to indicate that you affirm that the testimo the whole truth and nothing but the truth	ny you are about to give will be the truth,
SPEAKING TIME IS LIMITED TO THREE (3) MINUTES	S PER SPEAKER.

NO SPEAKER MAY GIVE OR TRANSFER THEIR TIME TO ANOTHER PERSON. (Please read the reverse side for instructions on speaking before the City Council.)

PLEASE PRINT *Name and Address are required
NAME: CHITIS HANT DATE: 6-18-24
NAME: CHIETIS HART DATE: 6-18-24 ADDRESS: 805/TATLK HARE ZIP: 32212 PHONE: 904-9935008
E-MAIL ADDRESS: CHEAT AD HATT REDUTING DEL
Are you a Lobbyist/Agent? Yes No If yes, who do you represent?
If you are a Lobbyist/Agent, have you registered as a lobbyist with the City Council Secretary? Xes INO PUBLIC HEARING BILL NUMBER:
I SUPPORT (or) I OPPOSE THIS LEGISLATION
Please check this box if you are here to answer questions only, or if you DO NOT wish to speak during the Public Hearing.
If you intend to speak, please sign below to indicate that you affirm that the testimony you are about to give will be the truth, the whole truth and nothing but the truth
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(Please read the reverse side for instructions on speaking before the City Council.)

24-351

PLEASE PRINT *Name and Address are required		
NAME: Royald Berguert DATE: 6/18 ADDRESS: 3060 Confez Pol ZIP: 32246 PHONE: 353-1533		
ADDRESS: 3060 Contez Pol ZIP: 32246 PHONE: 353-1533		
E-MAIL ADDRESS:		
Are you a Lobbyist/Agent? Yes No If yes, who do you represent?		
If you are a Lobbyist/Agent, have you registered as a lobbyist with the City Council Secretary? 2024 481 10 No 54		
PUBLIC HEARING BILL NUMBER: 24-351		
PUBLIC HEARING BILL NUMBER: 24-351 I SUPPORT (or) I OPPOSE THIS LEGISLATION		
Please check this box if you are here to answer questions only, or if you DO NOT wish to speak during the Public Hearing.		
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the whole truth and nothing but the truth		

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PLEASE PRINT *Name and Address are required
NAME: CURTOS HATT DATE: 6-18-24
Intermediate Intermediate NAME: $(ultits)$
E-MAIL ADDRESS: CUESTA Horto HATA TRESOURCES NOT
Are you a Lobbyist/Agent? Yes I No If yes, who do you represent?
If you are a Lobbyist/Agent, have you registered as a lobbyist with the City Council Secretary? Xyes D No
PUBLIC HEARING BILL NUMBER: 1024-352
I SUPPORT (or) I OPPOSE THIS LEGISLATION
, 🗖 Please check this box if you are here to answer questions only, or if you DO NOT wish to speak during the Public Hearing.
If you intend to speak, please sign below to indicate that you affirm that the testimony you are about to give will be the truth, the whole truth and nothing but the truth
JUN 18'24 PN 4:44
SPEAKING TIME IS LIMITED TO THREE (3) MINUTES PER SPEAKER.
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24-353

SPEAKING TIME IS LIMITED TO <u>THREE (3) MINUTES</u> PER SPEAKER. NO SPEAKER MAY GIVE OR TRANSFER THEIR TIME TO ANOTHER PERSON. (Please read the reverse side for instructions on speaking before the City Council.) JUN 18 '24 PM 4:38

PLEASE PRINT *Name and Address are required
NAME: Mile Herzberg DATE: 6/12/24
ADDRESS. 249'S ALLADIA LE ZIP. SULL'S PHONE.
E-MAIL ADDRESS: mherzber @ stemanian
Are you a Lobbyist/Agent? Yes No If yes, who do you represent?
If you are a Lobbyist/Agent, have you registered as a lobbyist with the City Council Secretary? Yes No PUBLIC HEARING BILL NUMBER: 2024-354 2024.IIIN 18 PM4:38
I SUPPORT (or) I OPPOSE THIS LEGISLATION 2024 JUN 18 PM4:38
Please check this box if you are here to answer questions only, or if you DO NOT wish to speak during the Public Hearing.
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(Please read the reverse side for instructions on speaking before the City Council.)

24-355

PLEASE PRINT *Name and Address are required
NAME: PATEFUL A. HOWELL DATE: 6.18.24.
ADDRESS: 1341 VAVONDALE AVE ZIP: 32205 PHONE: 904 874 6123.
E-MAIL ADDRESS: <u>alderhouell aguncilium</u>
Are you a Lobbyist/Agent? Yes No If yes, who do you represent?
If you are a Lobbyist/Agent, have you registered as a lobbyist with the City Council Secretary?
PUBLIC HEARING BILL NUMBER: 24-355
I SUPPORT (or) I OPPOSE THIS LEGISLATION
Please check this box if you are here to answer questions only, or if you DO NOT wish to speak during the Public Hearing.
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NO SPEAKER MAY GIVE OR TRANSFER THEIR TIME TO ANOTHER PERSON. (Please read the reverse side for instructions on speaking before the City Council.) JUN 18 '24 Ph4:48

PLEASE PRINT *Name and Address are required
NAME: ALARDERN FRANT ALESSIT DATE: JUNE B, 2024
NAME: AIRARDIND FRANK MARSITY DATE: JUNE 18, 2024 ADDRESS: 1556 N. Prank Street ZIP: 32206 PHONE: 904 4442395
E-MAIL ADDRESS:
Are you a Lobbyist/Agent? Yes No If yes, who do you represent?
If you are a Lobbyist/Agent, have you registered as a lobbyist with the City Council Secretary? Yes No PUBLIC HEARING BILL NUMBER:
I SUPPORT (or) I OPPOSE THIS LEGISLATION
Delease check this box if you are here to answer questions only, or if you DO NOT wish to speak during the Public Hearing.
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NO SPEAKER MAY GIVE OR TRANSFER THEIR TIME TO ANOTHER PERSON. (Please read the reverse side for instructions on speaking before the City Council.)
2024. JUN 18 PM 4:57

PLEASE PRINT *Name and Address are required
NAME: JERIEES EWAIS DATE: 06/18/24
ADDRESS: <u>4216-7445</u> DATE: <u>def 101</u> ADDRESS: <u>4216-7445</u> ZIP: <u>3270</u> PHONE: <u>(904)502-6368</u> E-MAIL ADDRESS: <u>JEWAIS & Values Con</u>
E-MAIL ADDRESS: JEWAIS & Vahoo.com
Are you a Lobbyist/Agent? 🗖 Yes 🖉 No If yes, who do you represent?
If you are a Lobbyist/Agent, have you registered as a lobbyist with the City Council Secretary? Yes No
PUBLIC HEARING BILL NUMBER: 27-356
I SUPPORT (or) I OPPOSE THIS LEGISLATION Would like to Speak Please check this box if you are here to answer questions only, or if you DO NOT wish to speak during the Public Hearing.
Thease check this box if you are here to answer questions only, of it you bo nor wish to speak during the rubite nearing.
If you intend to speak, please sign below to indicate that you affirm that the testimony you are about to give will be the truth,
the whole truth and nothing but the truth
Tett 2024 HIN 10 25:02
SPEAKING TIME IS LIMITED TO THREE (3) MINUTES PER SPEAKER.
NO SPEAKER MAY GIVE OR TRANSFER THEIR TIME TO ANOTHER PERSON. (Please read the reverse side for instructions on speaking before the City Council.)

PLEASE PRINT *Name and Address are required		
NAME: Subasting J. Velez	19 - 19 - 19 - 19 - 19 - 19 - 19 - 19 -	_ DATE: 06 18 24
ADDRESS: 421 E7th St		_ PHONE: <u>347-493-6756</u>
E-MAIL ADDRESS: Schastian Veegbe and a	prail.com	
Are you a Lobbyist/Agent? Yes Yos If yes,		
If you are a Lobbyist/Agent, have you registered as a lol	bbyist with the City Coun	cil Secretary? 🛛 Yes 🔲 No
PUBLIC HEARING BILL NUMBER:		
I SUPPORT (or) I OPPOSE	THIS LEGISLATIO)N
□ Please check this box if you are here to answer quest	tions only, or if you DO N	OT wish to speak during the Public Hearing.
If you intend to speak, please sign below to indicate that the whole truth and nothing but the truth	t you affirm that the testin	mony you are about to give will be the truth,
SPEAKING TIME IS LIMITED		
NO SPEAKER MAY GIVE OR TRA		IO ANOTHER LERSON.
(Please read the reverse side for in	istructions on speaking	before the City Council.)

PLEASE PRINT *Name and Address are required		
NAME: VANESA EWAIS		DATE: 6 18 24
NAME: VANESA EWAIS ADDRESS: 555 N PEARL ST		PHONE: (904) 705-6942
E-MAIL ADDRESS: VANESA COTTELLOSPR	INGEFELD. COM	
Are you a Lobbyist/Agent? D Yes X No If yes,	, who do you represent?	
If you are a Lobbyist/Agent, have you registered as a lob PUBLIC HEARING BILL NUMBER: 24-356 I SUPPORT (or) I OPPOSE		
I SUPPORT (or) I OPPOSE	THIS LEGISLATIO	N
Please check this box if you are here to answer quest		
If you intend to speak, please sign below to indicate that the whole truth and nothing but the truth	t you affirm that the testim	ony you are about to give will be the truth,
SPEAKING TIME IS LIMITED		
NO SPEAKER MAY GIVE OR TR. (Please read the reverse side for in		
		JUN 18'24 DW 5-10

24-357

PLEASE PRINT *Name and Address are required
NAME: SPUT KLUS DATE: (0-18-04
ADDRESS: Independent Dr. ZIP: 3000 PHONE: 904-301-309
E-MAIL ADDRESS: SICHIEROUINE COM
Are you a Lobbyist/Agent? Tes No If yes, who do you represent? Rapholy Certilis
If you are a Lobbyist/Agent, have you registered as a lobbyist with the City Council Secretary?
PUBLIC HEARING BILL NUMBER:
I SUPPORT (or) I OPPOSE THIS LEGISLATION 2024 JUN 18 PM4:38
Please check this box if you are here to answer questions only, or if you DQ NOT wish to speak during the Public Hearing.
If you intend to speak, please sign below to indicate that you affirm that the testimony you are about to give will be the truth, the whole truth and nothing but the truth

SPEAKING TIME IS LIMITED TO <u>THREE (3) MINUTES</u> PER SPEAKER. NO SPEAKER MAY GIVE OR TRANSFER THEIR TIME TO ANOTHER PERSON. (Please read the reverse side for instructions on speaking before the City Council.)

PLEASE PRINT *Name and Address are required
NAME: JERRY BROWN DATE: 6/18/2024
NAME: $\underline{JERRYBROWN}$ DATE: <u>6[18]</u> 2024 ADDRESS: <u>45451ROQUOIS AVE</u> ZIP: <u>3220</u> PHONE: <u>615-969-1135</u>
E-MAIL ADDRESS: jbrown. hdge concast net
Are you a Lobbyist/Agent? Yes X No If yes, who do you represent?
If you are a Lobbyist/Agent, have you registered as a lobbyist with the City Council Secretary? \Box Yes \Box No PUBLIC HEARING BILL NUMBER:
I SUPPORT (or) I OPPOSE THIS LEGISLATION
I SUPPORT (or) I OPPOSE THIS LEGISLATION
If you intend to speak, please sign below to indicate that you affirm that the testimony you are about to give will be the truth, the whole truth and nothing but the truth
SPEAKING TIME IS LIMITED TO THREE (3) MINUTES PER SPEAKER.
NO SPEAKER MAY GIVE-OR TRANSFER THEIR TIME TO ANOTHER PERSON. (Please read the reverse side for instructions on speaking before the City Council.)
2024 JUN 18 PM4:43

24-359

PLEASE PRINT *Name and Address are required
NAME: FOR HUXFORD DATE: 618-24
ADDRESS: 102-30 Manasville DC ZIP: 3222 PHONE: Gov. 707.257
E-MAIL ADDRESS: FOK HUX GALLG. 20m / 10/
E-MAIL ADDRESS: <u>6 Kitha 6 All 6. Man</u> Are you a Lobbyist/Agent? Kyes I No If yes, who do you represent? <u>Selond Wind Cigars</u>
If you are a Lobbyist/Agent, have you registered as a lobbyist with the City Council Secretary?
PUBLIC HEARINGBILL NUMBER: $2029359(E-24-36)$
I SUPPORT (or) I OPPOSE THIS LEGISLATION
Please check this box if you are here to answer questions only, or if you DO NOT wish to speak during the Public Hearing.
If you intend to speak, please sign below to indicate that you affirm that the testimony you are about to give will be the truth,
the whole truth and nothing but the truth

SPEAKING TIME IS LIMITED TO <u>THREE (3) MINUTES</u> PER SPEAKER. NO SPEAKER MAY GIVE OR TRANSFER THEIR TIME TO ANOTHER PERSON. (Please read the reverse side for instructions on speaking before the City Council.)

350

PLEASE PRINT *Name and Address are required
NAME: Fred afaile 7. DATE: 6/18/2024
ADDRESS: 9001 Forest Cicors Love ZIP: 32234 PHONE: 904 610 8975
E-MAIL ADDRESS:
If you are a Lobbyist/Agent, have you registered as a lobbyist with the City Council Secretary? Yes No PUBLIC HEARING BILL NUMBER: 2024 - 0359 I SUPPORT (or) I OPPOSE THIS LEGISLATION
I SUPPORT (or) I OPPOSE THIS LEGISLATION
Please check this box if you are here to answer questions only, or if you DO NOT wish to speak during the Public Hearing.
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NO SPEAKER MAY GIVE OR TRANSFER THEIR TIME TO ANOTHER PERSON.
(Please read the reverse side for instructions on speaking before the City Council.) JUN 18'24 PM4:51