GOUERNOR RON DE SANTES + PREEROM REEF 2009-442 CHEOK # 1245 J PUBLIC COMMEND- REQUEST TO SPEAK / REGISTER # 1.00 THIS WOULD BE THE FIRST ARTIFICIAL REEF IN PLEASE PRINT *Name & Address are required
PUBLIC COMMENT- REQUEST TO SPEAK / REGISTER # 1.00
PLEASE PRINT *Name & Address are required STATE WATERS.
NAME: JOHN J. NOONEY DATE: 12/14/2022
ADDRESS: 8356 BASSOM RD. PHONE: 904-434-0839
CITY: TACKSONVILLE COUNTY: DUVAL STATE: FL. ZIP: 32216
REPRESENTING: FEMA STRUMD, APRP, BBB, PPP EPB ERD, CRC JWC SIGNATURE: John & Nooney DIA, WBOB, DEP, EPA, FWS, FIND NEFRC I I DO NOT WISH TO SPEAK
SIGNATURE: John Johney 1214, W.603, DEP, MA, TWS, P2001 WERRE
HARDESTY + ADTHE HAPPT SWAPPER SLAPPERS-
COMMENTS FROM THE PUBLIC SUBJECT: POTTEBURG CRIVER IS A DISASTER, WHO SHOULD
BE IMMEDIATELY FIRED. 2022-0398, 2021-0650, OIM NEXT TO A FEMA HOUSE THAT
SHOULD HAVE BEERD AEMONISTERD AND REWERTED TO NATURE.
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.)
2014-560 POWNTOWN
Fix THE DOWNTOWN VISION KAYAK LAUNCH MAPS.

PLEASE PRINT <u>*Name &amp; Address are required</u>	
NAME: Dan's Bils	DATE: 12/14/22
ADDRESS: 645 Clsery Bird.	PHONE: # 202 - 405 - 0432
CITY: JAcksonville COUNTY: Dura	STATE: <u><i>FL</i></u> ZIP: <u>322//</u>
REPRESENTING: First Garct Rowing Uns	
SIGNATURE:	<b>I DO NOT WISH TO SPEAK</b>
COMMENTS FROM THE PUBLIC SUBJECT: Spled Roomici	an 2011 - Cleary BIN' bridge

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PLEASE PRINT <u>*Name &amp; Address are required</u>	
NAME: Azi Yavari	_DATE: 12/14/22
ADDRESS: 4422 Landore Dr	PHONE:90
CITY: Jar COUNTY: Duni	<u>STATE: FL</u> ZIP: 32207
REPRESENTING: First Coast Rowing Cus	
SIGNATURE:	I DO NOT WISH TO SPEAK
COMMENTS FROM THE PUBLIC SUBJECT: Speed Re(1	mition 201 - Cercy Alva brilg

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PUBLIC COMMENT - REQUEST TO SPEAK / REGISTER

PARTICIPATION -2017-160

PLEASE PRINT	<u>*Name &amp; Address are required</u>		6 1
NAME: Jo	4. Noopth,	Z DAT	т. 12/14/2022
ADDRESS: 8	356 BASCOM A	D	PHONE: 204-434-0839
CITY: TAC	for whe coun	TY: NGVAI	STATE: The ZIP: 32216
REPRESENTING	: Joh Q. Puph	Z. BBB	
SIGNATURE:	Jehof Mooney		I DO NOT WISH TO SPEAK
C	PARTISIPFO	112 0 2	-74 Port
<b>COMMENTS FR</b>	OM THE PUBLIC SUBJECT:	dog-f	TOP-
SAR TH	WHAT WAS	THE JPA	Shothanit f
AMOUNT	WITH STRK W	THE THIE R	Fride DREAGE

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PLEASE PRINT <u>*Name &amp; Address are required</u>		
NAME: Sharlene Byrum	DA	TE: 12 14 22
ADDRESS: 8509 Cedar Pt	Rd	PHONE: 874.7766
	INTY: Duval	_ STATE: FL ZIP: 32226
REPRESENTING:		I DO NOT WISH TO SPEAK
COMMENTS FROM THE PUBLIC SUBJECT: _	2022-82	0

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PUBLIC COMMENT - REQUEST TO PUBLIC STRUCTURE *Name & Address are required	SPEAK/REGISTER 2020 0820
PLEASE PRINT <u>*Name &amp; Address are required</u>	J
NAME: WOOD	_DATE: 12-14-2020
ADDRESS: RD RD	PHONE: 904 - 757 -0122
CITY: JAX COUNTY: DUVAL	STATE: FLA ZIP: 3222C
REPRESENTING: Self	
SIGNATURE: Juny Word	I DO NOT WISH TO SPEAK
COMMENTS FROM THE PUBLIC SUBJECT:	

SPEAKING TIME IS LIMITED TO <u>THREE (3) MINUTES PER SPEAKER.</u> NO SPEAKER MAY GIVE OR TRANSFER THEIR TIME TO ANOTHER PERSON.

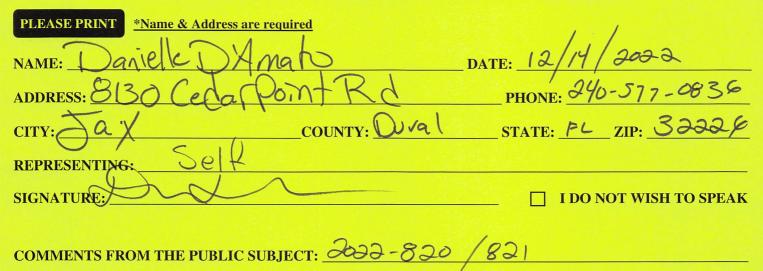
PLEASE PRINT	<u>*Name &amp; Address are required</u>	$\checkmark$
NAME:	borah Wood	DATE: 12-14-22
ADDRESS: S	e74 Cedar Point Rd.	PHONE: 962 9515
CITY:		STATE: Kh ZIP: 35556
REPRESENTIN		
SIGNATURE:	Deboran You	<b>I DO NOT WISH TO SPEAK</b>

**COMMENTS FROM THE PUBLIC SUBJECT:** 

SPEAKING TIME IS LIMITED TO <u>THREE (3) MINUTES PER SPEAKER</u>. NO SPEAKER MAY GIVE OR TRANSFER THEIR TIME TO ANOTHER PERSON.

PLEASE PRINT *Name & Address are required
NAME: DARIANE ALENTINE DATE: 12/14/2022
ADDRESS: 15557 FLOUDDER RD PHONE: 757-2203
CITY: Jac COUNTY: DWAL STATE: FL ZIP: 32226
REPRESENTING:
SIGNATURE: <u>Aarlan Saleilin</u> I DO NOT WISH TO SPEAK
COMMENTS FROM THE PUBLIC SUBJECT: <u>2022 - 820 / 82/</u> Deny this proposition
very this proposition

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<b>PUBLIC COMMENT - REQUEST T</b>	O SPEAK / REGISTER 9072-087
PLEASE PRINT <u>*Name &amp; Address are required</u>	$\checkmark$
NAME: PETE B'S	DATE: 14 DEZ 2072
ADDRESS: 6130 CEDAR POINT RD.	PHONE: 361 205 1057
CITY: <u>JACKSONINCE</u> COUNTY: DULAC	
REPRESENTING:	
SIGNATURE:	I DO NOT WISH TO SPEAK
COMMENTS FROM THE PUBLIC SUBJECT: 2022	-0820

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PLEASE PRINT <u>*Name &amp; Address are required</u>	
NAME: Lisa Rinaman	DATE: 12-14-2022
ADDRESS: 2800 University Blud N	PHONE:
CITY: Jax COUNTY: Dur	AL STATE: PL ZIP: 32211
REPRESENTING: St. Johns Riverke	eper
REPRESENTING: St. Johns Riverke SIGNATURE: Lije Rinami	I DO NOT WISH TO SPEAK
COMMENTS FROM THE PUBLIC SUBJECT:	2-0820

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PLEASE PRINT <u>*Name &amp; Address are required</u>	
NAME: ALLAN ASSAF	DATE: 12-14-22
ADDRESS: 15775 SIANNI	R RD W PHONE:
CITY: JAR CO	DUNTY: \$ DUVAL STATE: RZZIP: 32226
REPRESENTING: SELF	
SIGNATURE:	I DO NOT WISH TO SPEAK
COMMENTS FROM THE PUBLIC SUBJECT:	2022 - 0820

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