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PUBLIC COMMENT - REQUEST TO SPEAK / REGISTER

PLEASE PRINT	*Name & Address are required
NAME: 5/1	gun MSeggroves DATE: 3-19-24
ADDRESS:8	146 Amber word C+ PHONE: 546-532-745
CITY:	achsenulle county: Duval STATE: To ZIP: 30049
REPRESENTING	· Coppliatis
SIGNATURE:	☐ I DO NOT WISH TO SPEAK
COMMENTS FRO	om the public subject: Adult Buthroom ging tubles

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



*Name & Address are required

NAME: SUSAN DAWOOD	DATE: WARCH 19, 2024
ADDRESS: 7830 LINKSIDE DR	PHONE: 404-290-2240
CITY: DUVAL COUNTY: DUVAL	STATE: E ZIP: 32256
REPRESENTING: LINKSIDE	
SIGNATURE: Dunan Dawnod	I DO NOT WISH TO SPEAK
COMMENTS FROM THE PUBLIC SUBJECT: 2024	0069

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: Alice Mauro	DATE: 3/19/24
ADDRESS: 7701 Bay Meadows Cir W	
CITY: Jacksonville COUNTY: Dewal	
REPRESENTING: Village Green at Baymeadows	One and some community
REPRESENTING: Villege Green at Baymeadows of SIGNATURE: Cilice M. Mauro	I DO NOT WISH TO SPEAK
COMMENTS FROM THE PUBLIC SUBJECT: 0024-00	by approve the amend ments
COMMENTS FROM THE PUBLIC SUBJECT: 0024-00	prove our neighborhood and our
Also support 2023-0780 Family Box	h room) city

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

2024-0069

PUBLIC COMMENT - REQUEST TO SPEAK / REGISTER

PLEASE PRINT *Name & Address are required
NAME: Carol Eich ling DATE: 19 MAR 2024
ADDRESS: 7623 Boy mentows Cir W#2076 PHONE: 901-891-0226
CITY: Jacksonville county: Duval state: Fl zip: 32256
REPRESENTING: BOLD / Village Green 2 HOP
SIGNATURE: Aud Sull 1 DO NOT WISH TO SPEAK
Am orestable for oftions
COMMENTS FROM THE PUBLIC SUBJECT: SUPPLY TOTA - WIGH, NEEDED 40
CITOW for bond 195089 for Street reports, Storm GRUDET
a sacsament a repairs, etc for Bowlmentous "private" areas CHY
SPEAKING TIME IS LIMITED TO THREE (3) MINUTES PER SPEAKER. 18415CG 40
NO SPEAKER MAY GIVE OR TRANSFER THEIR TIME TO ANOTHER PERSON, TO THE TOWN A PORTION OF THE TOWN AND THE TOWN
(PLEASE READ THE REVERSE SIDE FOR INSTRUCTIONS ON SPEAKING BEFORE THE CITY COUNCIL.)

Chi, JULY SETTLEMENT TRIPI FOR \$100,000,000; THAT WIN GO TO PUBLIC COMMENT - REQUEST TO SPEAK / REGISTER FUND PUBLIC ROCKS. MROTIC KASILIANCY NOOPRY DATE: 3/19/2024 ADDRESS: 8356 BROOM Rp. PHONE: 904-434.0839 COUNTY: DUVAI STATE: Fly ZIP: 30216 REPRESENTING: JAMES RICHARDSON, ADAM HOYLES CHERYL POMACK EPB PUBLIC DORLY PARK INAT IS CATEGORY I WESTLANDS NEXT FRIMA HOUSE PART SHOULD HAVE BEEN DEMOLISHED COMMENTS FROM THE PUBLIC SUBJECT: RESTORK THE PUBLIC TRUST TO OUR WATERWAYS. McMillions-4BO DOEVMENTARY MCPARKS-FIND DOUGKS NA (FRARRAI) DUANS 2024-0034 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.)

FBI-FULL BLOWN INHALM-OPERATION-SUPER DRAG!

OF POTTSBURGERER

NPLIA RECOGNIZES ING RECENTATIONAL BENEFIT FUBLIC PARK

PLEASE PRINT	*Name & Address are required		
NAME: Rob	bin Brydges	DATE:	19/24
ADDRESS:	2018 Ambrosia (PHONE:	
CITY: Jac	Ksonville county: Do	eval state:	F ZIP: 32223
REPRESENTING	Diagram	Support	
SIGNATURE:	Lawn Brydge		DO NOT WISH TO SPEAK
COMMENTS FR	OM THE PUBLIC SUBJECT:	80	

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

PLEASE PRINT	*Name & Address are requ	<u>iired</u>		
NAME: S. H.	ing+ Dream B	enartrosting	DATE: 3/19/2	4
ADDRESS:	76 Provate Gunt		PHONE:	
CITY: Sack	elinos	COUNTY: DWa	STATE:	ZIP: 32246
REPRESENTING SIGNATURE:	i ARI	7		OT WISH TO SPEAK
COMMENTS FR	OM THE PUBLIC SUBJI	ECT: 0780-p	page support	-thanks!

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

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uu	

Name & Address are re	equirea	
NAME: Brittany Cun	ningham D	ATE: 3/19/24
ADDRESS: 4686 Sandler	Laukes Dr	PHONE: 544-2432
CITY: JAX	COUNTY: Duval	STATE: _ PLZIP: _ 32222
REPRESENTING: Adult ch	anging tables	
SIGNATURE:		I DO NOT WISH TO SPEAK
COMMENTS FROM THE PUBLIC SUB	SJECT: 2023-0780	

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

DI EACE DEINE	1 40 781
PLEASE PRINT *Name & Address are required	02/4-27
NAME: / OLIVE /	DATE:
ADDRESS: OF E haam 5't	DWONE
ADDRESS:	PHONE:
CITY:COUNTY: DULL	STATE: # ZIP: 822
REPRESENTING:	
SIGNATURE:	I DO NOT WISH TO SPEAK
1 C/9C/1 OH.	
COMMENTS FROM THE PUBLIC SUBJECT:	
COMMENTS FROM THE PUBLIC SUBJECT:	
CHAPTER RENISION COMMISSION - RE	DUCK FROM 10/KARS
TYZALO CDEAKING TIME ICH IMITED TO TUDER (2) MI	NITION OF A IZED
O 7 YEARS. SPEAKING TIME IS LIMITED TO THREE (3) MI NO SPEAKER MAY GIVE OR TRANSFER THEIR TIME	NUTES PER SPEAKER.
NO SPEAKER MAY GIVE OR TRANSFER THEIR TIN	ME TO ANOTHER PERSON.

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EVERY AMMINDMENT OR REFERENCE OF COUNCIL.