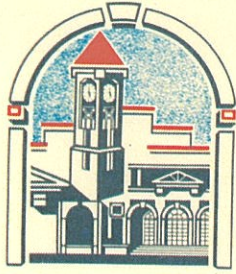


City of Venice

Request to Speak (print legibly)



Name: JEFFERY A. BOONE Date: 4/13/21

Address: _____

City: _____ State: _____ Zip: _____

City Resident: ☒ Yes ☐ No City Property Owner: ☒ Yes ☐ No

City Business Owner: ☒ Yes ☐ No Telephone No: _____

Organization (if any): BOONE LAW FIRM

Please Check One

☐ Audience Participation – Topic: _____

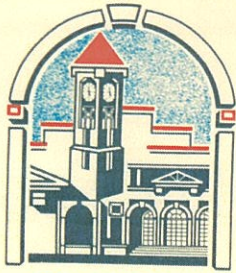
☒ During Agenda Item - Topic: CATALYST (3)

If you are going to present evidence and/or testimony during a public hearing, you are required to complete and sign the following oath. You are not required to sign the oath if you are speaking at Audience Participation or at a workshop.

I swear or affirm, under penalty of perjury, that the evidence or factual representation, which I am about to give or present at the public hearing, held this 13 day of APRIL 20 21 is truthful.

Signature: _____

Comments at public hearings and during audience participation are limited to five minutes per speaker for city residents, property owners and business owners, and two minutes for all others, unless otherwise noted.



City of Venice
Request to Speak (print legibly)

Name: TOM PERGO Date: 4-13-21

Address: 1700 S TAMiami TR

City: SARASOTA State: FL Zip: 3334239

City Resident: ☐ Yes ☐ No City Property Owner: ☒ Yes ☐ No

City Business Owner: ☒ Yes ☐ No Telephone No: 941-917-2048

Organization (if any): SARASOTA MEMORIAL Hosp.

Please Check One

☐ Audience Participation – Topic: _____

☒ During Agenda Item - Topic: 2021-12 & 2021-13

If you are going to present evidence and/or testimony during a public hearing, you are required to complete and sign the following oath. You are not required to sign the oath if you are speaking at Audience Participation or at a workshop.

I swear or affirm, under penalty of perjury, that the evidence or factual representation, which I am about to give or present at the public hearing, held this 13 day of April 2021 is truthful.

Signature: _____


Comments at public hearings and during audience participation are limited to five minutes per speaker for city residents, property owners and business owners, and two minutes for all others, unless otherwise noted.

From: noreply@formstack.com
To: [Christophe St. Luce](#); [Lori Stelzer](#); [Mercedes Barcia](#); [Danielle Lewis](#); [Toni Cone](#)
Subject: Virtual Request to Speak for meeting/workshop on Apr 13, 2021
Date: Tuesday, April 13, 2021 8:32:53 AM

Caution: This email originated from an external source. **Be Suspicious of Attachments, Links and Requests for Login Information**



Formstack Submission For: Request to Speak
Submitted at 04/13/21 8:32 AM

Your name:	Nicole Tremblay
Address:	401 W. Venice Ave Venice, FL 34285
Email:	ntremblay@venicegov.com
City Resident:	No
Phone:	
City Property Owner:	No
Meeting Date:	Apr 13, 2021
City Business Owner:	No
Organization (If any):	City of Venice
Public Participation:	During Agenda Item
Agenda Item:	2021-12, 2021-13, 2021-14
Signature:	

[Direct Link to Image](#)

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Formstack, 11671 Lantern Road, Suite 300, Fishers, IN 46038

From: noreply@formstack.com
To: [Christophe St. Luce](#); [Lori Stelzer](#); [Mercedes Barcia](#); [Danielle Lewis](#); [Toni Cone](#)
Subject: Virtual Request to Speak for meeting/workshop on Apr 08, 2021
Date: Thursday, April 8, 2021 4:29:46 PM

Caution: This email originated from an external source. **Be Suspicious of Attachments, Links and Requests for Login Information**



Formstack Submission For: **Request to Speak**

Submitted at 04/08/21 4:29 PM

Your name:	Brandon McFarren
Address:	412 N Jefferson 4th Floor PENSACOLA, FL 32502
Email:	bmcfarren@catalysthre.com
City Resident:	No
Phone:	(850) 698-6068
City Property Owner:	No
Meeting Date:	Apr 08, 2021
City Business Owner:	No
Organization (If any):	Catalyst Healthcare Real Estate
Public Participation:	During Agenda Item

Agenda Item:

Catalyst Healthcare Real Estate Comp Plan,
Rezone, Annexation

Signature:

[Direct Link to Image](#)

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From: noreply@formstack.com
To: [Christophe St. Luce](#); [Lori Stelzer](#); [Mercedes Barcia](#); [Danielle Lewis](#); [Toni Cone](#)
Subject: Virtual Request to Speak for meeting/workshop on Apr 13, 2021
Date: Monday, April 12, 2021 12:59:11 PM

Caution: This email originated from an external source. **Be Suspicious of Attachments, Links and Requests for Login Information**



Formstack Submission For: [Request to Speak](#)
Submitted at 04/12/21 12:59 PM

Your name:	Phil Schuck
Address:	40 SE 11TH AVENUE Ocala, FL 34471
Email:	pschuck@catalysthre.com
City Resident:	No
Phone:	(352) 804-0872
City Property Owner:	No
Meeting Date:	Apr 13, 2021
City Business Owner:	No
Organization (If any):	Catalyst HRE
Public Participation:	During Agenda Item

Agenda Item:

ORD. NO. 2021-12, ORD. NO. 2021-13, ORD.
NO. 2021-14

Signature:



[Direct Link to Image](#)

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