5min

Toni Cone

From: noreply@formstack.com
Sent: Tuesday, June 14, 2022 7:17 AM
To: Mercedes Barcia; Toni Cone; Mary Seville; Kelly Michaels
Subject: Virtual Request to Speak for meeting/workshop on Jun 14, 2022

formstack

Formstack Submission For: RequestToSpeak

Submitted at 06/14/22 7:17 AM

Your name:	Mrs Jill Pozarek
Address:	161 Portofino Drive North Venice, FL 34275
Email:	spqr63bc@hotmail.com
City Resident:	Yes
Phone:	(862) 222-7999
City Property Owner:	Yes
Meeting Date:	Jun 14, 2022
City Business Owner:	No
Organization (If any):	North Venice Neighborhood Alliance
Public Participation:	During Agenda Item

5 min

Toni Cone

From: noreply@formstack.com
Sent: Monday, June 13, 2022 6:21 PM
To: Mercedes Barcia; Toni Cone; Mary Seville; Kelly Michaels
Subject: Virtual Request to Speak for meeting/workshop on Jun 14, 2022

formstack

Formstack Submission For: RequestToSpeak

Submitted at 06/13/22 6:21 PM

Your name:	Ms Leonore Pirrotti
Address:	114 Medici terrace North Venice, FL 34275
Email:	leepirrotti@hotmail.com
City Resident:	Yes
Phone:	(914) 523-2330
City Property Owner:	Yes
Meeting Date:	Jun 14, 2022
City Business Owner:	No
Organization (If any):	
Public Participation:	General
Agenda Item:	

5 min

Toni Cone

From: noreply@formstack.com
Sent: Monday, June 13, 2022 6:18 PM
To: Mercedes Barcia; Toni Cone; Mary Seville; Kelly Michaels
Subject: Virtual Request to Speak for meeting/workshop on Jun 14, 2022

formstack

Formstack Submission For: RequestToSpeak

Submitted at 06/13/22 6:17 PM

Your name:	Mr Anthony Pirrotti
Address:	114 Medici terrace North venice, FL 34275
Email:	leepirrotti@hotmail.com
City Resident:	Yes
Phone:	(914) 523-2338
City Property Owner:	Yes
Meeting Date:	Jun 14, 2022
City Business Owner:	No
Organization (If any):	
Public Participation:	General = During CPR
Agenda Item:	

Did not Speak

Simi - not present

City of Venice

Request to Speak (print legibly)

"City on the Gulf"

Name: Richard Coldwell Date: 6/14/22

Address: 246 Montelluna Drive

City: N. Venice State FL Zip 34275

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

City Business Owner: ☐Yes ☐No Telephone No:

Organization (if any): North Venice Neighborhood Alliance

Please Check One

☐ Audience Participation – Topic:

☒ During Agenda Item - Topic: LDR

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 14 day of June 2022 is truthful.

Signature: Richard Coldwell

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.

5 min

City of Venice

Request to Speak (print legibly)

"City on the Gulf"

Name: Debbie Geriche Date: 6/14/22

Address: 146 Bella Vista Terrace C

City: North Venice State FL Zip 34275

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

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

Organization (if any): _____

Please Check One

☒ Audience Participation – Topic: LDR

☐ During Agenda Item - Topic: _____

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 14 day of June 2022 is truthful.

Signature: Deborah Geriche

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.

3 min.

City of Venice

Request to Speak (print legibly)

"City on the Gulf"

Name: ED MARTIN Date: 6/14/22

Address: 409 EVERGLADES DR.

City: VENICE State FL Zip 34285

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

City Business Owner: ☐ Yes ☐ No Telephone No: 941-486-0502

Organization (if any): _____

Please Check One

☐ Audience Participation – Topic: _____

☑ During Agenda Item - Topic: LDRs

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 14 day of June 20 22 is truthful.

Signature: Edward Martin

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)

"City on the Gulf"

Name: Murray Chase Date: 6/14/22

Address: _____

City: _____ State _____ Zip _____

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

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

Organization (if any): VENICE THEATRE

Please Check One

☐ Audience Participation – Topic: _____

☐ During Agenda Item - Topic: LDRs

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 14 day of JUNE 20 22 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.

Representing: First Baptist Church 5min. 2.

City of Venice

Request to Speak (print legibly)

"City on the Gulf"

Name: Jeffery A. Boone Date: 6/14/22

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: LDR1

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 14 day of June 20 22 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.

5min:

City of Venice

Request to Speak (print legibly)

"City on the Gulf"

Name: FRANK WRIGHT Date: 14 June

Address: 521 Harbor Dr. S.

City: Venice State FL Zip 34285

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

City Business Owner: ☐Yes ☐No Telephone No: 941.441.8695

Organization (if any): Venice Area Historic Society

Please Check One

☒ Audience Participation – Topic: LDRs

☐ During Agenda Item - Topic: _____

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 14 day of Jun 20 22 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.

5 min

City of Venice

Request to Speak (print legibly)

"City on the Gulf"

Name: LISA Jarvio Date: 6/14/22

Address: 231 AIRPORT AVE

City: Venice State FL Zip 34285

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

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

Organization (if any): _____

Please Check One

☒ Audience Participation – Topic: LDR

☐ During Agenda Item - Topic: _____

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 ____ day of _____ 20____ is truthful.

Signature: Lisa Jarvis

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.

Presenter

5 min

City of Venice

Request to Speak (print legibly)

"City on the Gulf"

Name: Bill Willson Date: 6/14/22

Address: 708 Apalachicola Rd

City: Venice State FL Zip 34285

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

City Business Owner: ☐ Yes ☐ No Telephone No: 928-2/946

Organization (if any): _____

Please Check One

☐ Audience Participation – Topic: _____

X During Agenda Item - Topic: Planning

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 14 day of June 2022 is truthful.

Signature: W Willson

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.

Presente

City of Venice

Request to Speak (print legibly)

"City on the Gulf"

Name: Nicole Tremblay Date: 6/14/22

Address: 401 W. Venice Ave

City: Venice State FL Zip 34285

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

City Business Owner: ☐Yes ☑No Telephone No: 882-7449

Organization (if any): CoV

Please Check One

☐ Audience Participation – Topic:

☑ During Agenda Item - Topic: 20-24AM discussion (22-5628)

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 14th day of June 2022 is truthful.

Signature: [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.

Representing: Venice Theatre, Inc.

5min.

City of Venice

Request to Speak (print legibly)

"City on the Gulf"

Name: Jeffery A. Boone Date: 6/14/22

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: _____

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 14 day of June 2022 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.

Detail by Entity Name

Florida Limited Liability Company
NEAL SIGNATURE HOMES, LLC

Filing Information

Document Number	L10000023831
FEI/EIN Number	27-2174682
Date Filed	03/03/2010
Effective Date	03/02/2010
State	FL
Status	ACTIVE

Principal Address

5800 LAKEWOOD RANCH BLVD
Sarasota, FL 34240

Changed: 02/27/2013

Mailing Address

5800 LAKEWOOD RANCH BLVD
Sarasota, FL 34240

Changed: 02/27/2013

Registered Agent Name & Address

Curran, Pamela
5800 LAKEWOOD RANCH BLVD
Sarasota, FL 34240

Name Changed: 02/01/2022

Address Changed: 02/27/2013

Authorized Person(s) Detail

Name & Address

Title VP

SCHIER, JAMES R
5800 LAKEWOOD RANCH BLVD
Sarasota, FL 34240

Title VP

,OCHAR, MARK
5800 LAKEWOOD RANCH BLVD
Sarasota, FL 34240

Title MGR

NCDG MANAGEMENT LLC
5800 LAKEWOOD RANCH BLVD
Sarasota, FL 34240

Title Manager, President

Storey, Michael
5800 LAKEWOOD RANCH BLVD
Sarasota, FL 34240

Title Secretary

Curran, Pamela
5800 LAKEWOOD RANCH BLVD
Sarasota, FL 34240

Annual Reports

Report Year	Filed Date
2020	04/08/2020
2021	04/23/2021
2022	02/01/2022

Document Images

02/01/2022 -- ANNUAL REPORT	View image in PDF format
04/23/2021 -- ANNUAL REPORT	View image in PDF format
04/08/2020 -- ANNUAL REPORT	View image in PDF format
04/09/2019 -- ANNUAL REPORT	View image in PDF format
03/09/2018 -- ANNUAL REPORT	View image in PDF format
04/20/2017 -- ANNUAL REPORT	View image in PDF format
01/25/2016 -- ANNUAL REPORT	View image in PDF format
01/06/2015 -- ANNUAL REPORT	View image in PDF format
08/26/2014 -- AMENDED ANNUAL REPORT	View image in PDF format
02/05/2014 -- ANNUAL REPORT	View image in PDF format
04/08/2013 -- AMENDED ANNUAL REPORT	View image in PDF format
02/27/2013 -- ANNUAL REPORT	View image in PDF format
02/29/2012 -- ANNUAL REPORT	View image in PDF format
02/17/2011 -- ANNUAL REPORT	View image in PDF format
03/03/2010 -- Florida Limited Liability	View image in PDF format

SARASOTA, FL 34240

Current Mailing Address:

5800 LAKEWOOD RANCH BLVD
SARASOTA, FL 34240 US

FEI Number: 27-2174682

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CURRAN, PAMELA
5800 LAKEWOOD RANCH BLVD
SARASOTA, FL 34240 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: PAMELA CURRAN 02/01/2022

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	VP
Name	SCHIER, JAMES R
Address	5800 LAKEWOOD RANCH BLVD
City-State-Zip:	SARASOTA FL 34240

Title	VP
Name	SOCHAR, MARK
Address	5800 LAKEWOOD RANCH BLVD
City-State-Zip:	SARASOTA FL 34240

Title	MGR
Name	NCDG MANAGEMENT LLC
Address	5800 LAKEWOOD RANCH BLVD
City-State-Zip:	SARASOTA FL 34240

Title	MANAGER, PRESIDENT
Name	STOREY, MICHAEL
Address	5800 LAKEWOOD RANCH BLVD
City-State-Zip:	SARASOTA FL 34240

Title	SECRETARY
Name	CURRAN, PAMELA
Address	5800 LAKEWOOD RANCH BLVD
City-State-Zip:	SARASOTA FL 34240

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JAMES R SCHIER VP 02/01/2022

Electronic Signature of Signing Authorized Person(s) Detail — Date

FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 24, 2010

JAMES R. SCHIER
NEAL COMMUNITIES, INC.
8210 LAKEWOOD RANCH BLVD.
LAKEWOOD RANCH, FL 34202

SUBJECT: NEAL SIGNATURE HOMES
Ref. Number: W10000055012

We have received your document for NEAL SIGNATURE HOMES and your check(s) totaling $175.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Class(es) "37" would appear applicable to your specific mark. Please delete the class(es) you have on line 2 (d) and insert the pertinent class(es) "37".

The notary public's acknowledgement is incomplete. The seal, signature, and expiration date must be affixed. A notary public cannot notarize his own signature.

Pursuant to s. 495.035(5), F.S., this application will be considered abandoned if the applicant fails to reply or resubmit the corrected/amended application within three months from date of this letter.

If you have any questions concerning the filing of your document, please call (850) 245-6918.

Nanette Causseaux
Document Specialist Supervisor

Letter Number: 910A00027568