



"City on the Gulf"

## City of Venice

Request to Speak (print legibly)

Name:

JEFFERY A. BOONE

Date:

11/27/18

Address:

City:

State:

Zip:

City Resident: ☐ Yes ☐ No

Telephone No:

Organization (if any):

Please Check One

☐ Audience Participation – Topic:

☐ During Agenda Item - Topic:

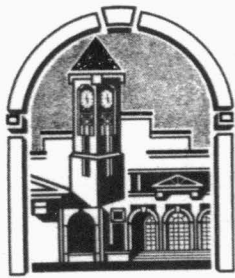
MURPHY OATH

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 27 day of NOV 20 18 is truthful.

Signature:

Comments at public hearing and during audience participation are limited to five minutes per speaker unless otherwise noted.



"City on the Gulf"

## City of Venice

Request to Speak (print legibly)

Name:

Dick Lombro

Date:

4/27/18

Address:

295 Marsh Creek Rd

City:

Venice

State:

FL

Zip:

34292

City Resident: ☒ Yes ☐ No

Telephone No:

9414851269

Organization (if any):

CVC

Please Check One

☐ Audience Participation – Topic:

☒ During Agenda Item - Topic:

Murphy Oaks

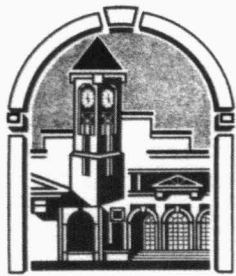
If you are going to present evidence and/or testimony during a public hearing, you are required to complete and sign the following oath. You are not required to sign the oath if you are speaking at Audience Participation or at a workshop.

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 27 day of Nov 20 18 is truthful.

Signature:

[Signature]

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"City on the Gulf"

## City of Venice

Request to Speak (print legibly)

Name: GREGG SINGLETON Date: 11-27-18

Address: 10225 FOUNTAIN CT

City: NEW PORT RICHEY State: FL Zip: 34654

City Resident: ☐ Yes ☒ No

Telephone No: 813 433 1150

Organization (if any): Singleton Engineering

Please Check One

☐ Audience Participation – Topic: \_\_\_\_\_

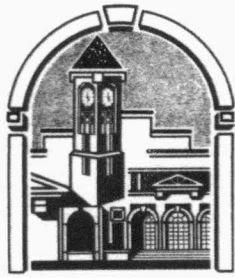
☒ During Agenda Item - Topic: MURPHY DAKS

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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 27 day of Nov 20 18 is truthful.

Signature: [Signature]

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## City of Venice

Request to Speak (print legibly)

Name: ROGER CLARK Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

City Resident: ☐ Yes ☐ No Telephone No: \_\_\_\_\_

Organization (if any): CITY OF VENICE

Please Check One

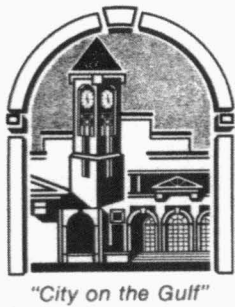
- ☐ Audience Participation – Topic: 17-16RC  
☐ During Agenda Item - Topic: \_\_\_\_\_

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 27 day of NOV. 2018 is truthful.

Signature: Roger Clark

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## City of Venice

Request to Speak (print legibly)

Name: Jeff Wright Date: 11/27/18  
Address: 8889 Pelican Bay Blvd #400  
City: Naples State FL Zip 34108  
City Resident: ☐ Yes ☒ No\* Telephone No: \_\_\_\_\_  
Organization (if any): Henderson Franklin

\*representing property owner/applicant

Please Check One

☐ Audience Participation – Topic: \_\_\_\_\_

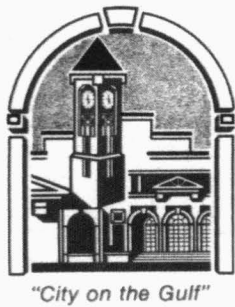
☒ During Agenda Item - Topic: Murphy Oaks PWD

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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 27 day of Nov. 2018, is truthful.

Signature: [Signature]

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## City of Venice

Request to Speak (print legibly)

Name: Herb Lawson Date: 11-27-18  
Address: 36400 Woodward  
City: Bloomfield Hills State MI Zip 48301  
City Resident: ☐ Yes ☒ No Telephone No: 248-290-5300  
Organization (if any): Winthrop Development Inc

Please Check One

☐ Audience Participation – Topic: \_\_\_\_\_  
☒ During Agenda Item - Topic: Murphy Oaks

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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: Herbert Lawson

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"City on the Gulf"

## City of Venice

Request to Speak (print legibly)

Name: Clint Cuffe Date: 11/27/18  
Address: 7978 Cooper Creek Blvd, Ste 102  
City: University Park State: FL Zip: 34201  
City Resident: ☐ Yes ☒ No Telephone No: 813 362-5088  
Organization (if any): WRB Engineering

Please Check One

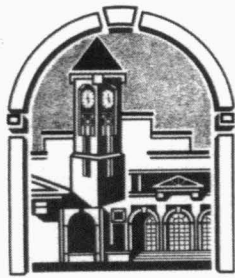
- ☐ Audience Participation – Topic: \_\_\_\_\_  
☒ During Agenda Item - Topic: MURPHY OASIS

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 27<sup>th</sup> day of November 2018 is truthful.

Signature: [Signature]

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"City on the Gulf"

## City of Venice

Request to Speak (print legibly)

Name: Kimberly Farrell Date: 11/27/18

Address: PO Box 400

City: Venice State: FL Zip: 34284

City Resident: ☐ Yes ☐ No

Telephone No: 941-809-6365

Organization (if any): Fox hea Farm, Inc.

Please Check One

☐ Audience Participation – Topic: \_\_\_\_\_  
☒ During Agenda Item - Topic: Morphing Oaks

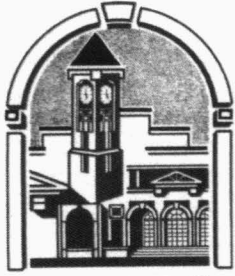
If you are going to present evidence and/or testimony during a public hearing, you are required to complete and sign the following oath. You are not required to sign the oath if you are speaking at Audience Participation or at a workshop.

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 27 day of Nov 20 18 is truthful.

Signature: Kimberly Farrell

Comments at public hearing and during audience participation are limited to five minutes per speaker unless otherwise noted.





# City of Venice

Request to Speak (print legibly)

Name: Laurie Birnbach Date: 11/27/18

Address: PO Box 400

City: Venice State FL Zip 34284

City Resident: ☐ Yes ☒ No Telephone No: 941-320-2018

Organization (if any): Fox Lea Farm

Please Check One

☐ Audience Participation – Topic: \_\_\_\_\_

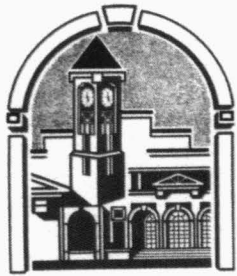
☒ During Agenda Item - Topic: Murphy Oats

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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 27 day of Nov 2018 is truthful.

Signature: [Signature]

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"City on the Gulf"

# City of Venice

Request to Speak (print legibly)

*m*

Name: JACK WORRELL Date: 11/27/2018

Address: 762, SGRIST WALK LANE

City: VENICE State FL Zip 34292

City Resident: ☒ Yes ☐ No

Telephone No: (941) 480-9578

Organization (if any): \_\_\_\_\_

Please Check One

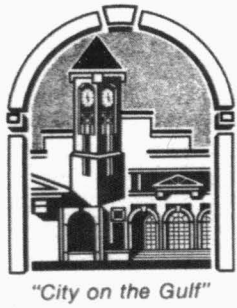
- ☐ Audience Participation – Topic: MURPHY OAKS  
☐ During Agenda Item - Topic: \_\_\_\_\_

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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 27 day of NOV 2018 is truthful.

Signature: B. J. Worrell

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## City of Venice

Request to Speak (print legibly)

Name: Henry von der Linde Date: 11/27/18

Address: 740 Sawgrass Bridge Road

City: Venice State FL Zip 34292

City Resident: ☒ Yes ☐ No

Telephone No: 941-882-8970

Organization (if any): \_\_\_\_\_

Please Check One

☐ Audience Participation – Topic: \_\_\_\_\_

☒ During Agenda Item - Topic: Murphy Oaks

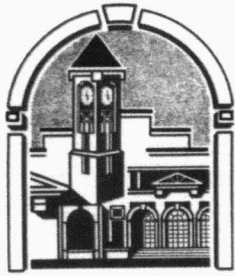
If you are going to present evidence and/or testimony during a public hearing, you are required to complete and sign the following oath. You are not required to sign the oath if you are speaking at Audience Participation or at a workshop.

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 27 day of Nov 20 18 is truthful.

Signature: Henry von der Linde

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"City on the Gulf"

## City of Venice

Request to Speak (print legibly)

Name: Lynette Edmonds Date: 11/27/18

Address: 476 Arborview Lane

City: Venice State FL Zip 34292

City Resident: ☒ Yes ☐ No Telephone No: 703 273-4888

Organization (if any): \_\_\_\_\_

Please Check One

☒ Audience Participation – Topic: Murphy Oaks

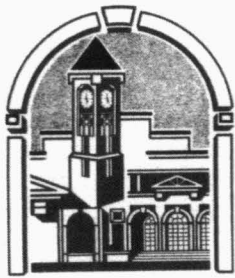
☐ During Agenda Item - Topic: \_\_\_\_\_

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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 27 day of Nov 2018 is truthful.

Signature: Lynette Edmonds

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"City on the Gulf"

## City of Venice

Request to Speak (print legibly)

Name: Greg Prill Date: 11/27/18  
Address: 737 Misty Pine Dr.  
City: Venice State: FL Zip: 34202  
City Resident: ☒ Yes ☐ No Telephone No: 941-800-5155  
Organization (if any): Sawgrass

Please Check One

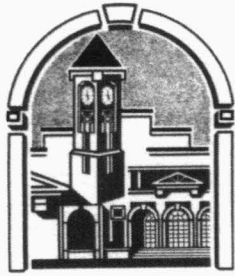
- ☐ Audience Participation – Topic: \_\_\_\_\_  
☐ During Agenda Item - Topic: Murphy Oaks Zoning

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 27 day of Nov 20 18 is truthful.

Signature: Greg Prill

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"City on the Gulf"

## City of Venice

Request to Speak (print legibly)

Name: Joyce Lyons Date: 11/27/18  
Address: 521 MARSH CREEK RD.  
City: Venice State FL Zip 34292  
City Resident: ☒ Yes ☐ No Telephone No: 941-480-9588  
Organization (if any): \_\_\_\_\_

Please Check One

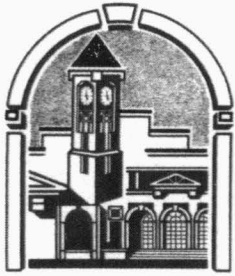
- ☐ Audience Participation – Topic: \_\_\_\_\_  
☒ During Agenda Item - Topic: MURPHY OAKS

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Signature: Joyce Lyons

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"City on the Gulf"

## City of Venice

Request to Speak (print legibly)

Name: Pam Schierberg Date: 11/27/18

Address: 1624 Lis court Dr.

City: Venice State: FL Zip: 34292

City Resident: ☒ Yes ☐ No

Telephone No: 941 485 0405

Organization (if any): WATERFORD MASTER OWNERS ASSN.

Please Check One

☒ Audience Participation – Topic: Murphy Oaks

☐ During Agenda Item - Topic: \_\_\_\_\_

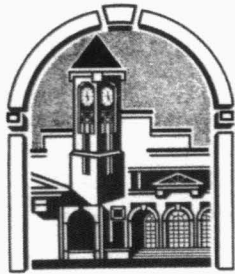
If you are going to present evidence and/or testimony during a public hearing, you are required to complete and sign the following oath. You are not required to sign the oath if you are speaking at Audience Participation or at a workshop.

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Signature: Pam Schierberg

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"City on the Gulf"

## City of Venice

Request to Speak (print legibly)

Name: ROBERT ZIRINGER Date: 11-27-18

Address: 558 SAWGRASS BRIDGE RD

City: VENICE State: FL Zip: 34292

City Resident: ☒ Yes ☐ No Telephone No: 412 996 1539

Organization (if any): \_\_\_\_\_

Please Check One

☒ Audience Participation – Topic: MURPHY OAKS

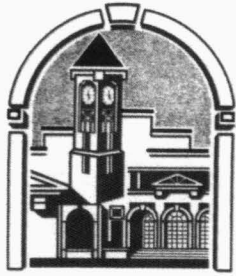
☐ During Agenda Item - Topic: \_\_\_\_\_

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Signature: [Signature]

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"City on the Gulf"

## City of Venice

Request to Speak (print legibly)

Name: JOHN PUTNOKY Date: 11/27/18  
Address: 350 MARSH LANDING WAY  
City: Venice State FL Zip 34292  
City Resident: ☒ Yes ☐ No Telephone No: 941 882 3970  
Organization (if any): \_\_\_\_\_

Please Check One

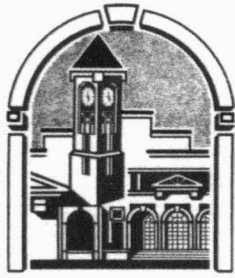
- ☐ Audience Participation – Topic: \_\_\_\_\_  
☒ During Agenda Item - Topic: MURPHY DAKS

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Signature: \_\_\_\_\_

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"City on the Gulf"

## City of Venice

Request to Speak (print legibly)

Name: JAMES LAWSON Date: 11/27/18

Address: 335 TURTLEBACK CROSSING

City: VENICE State FL Zip 34292

City Resident: ☒ Yes ☐ No

Telephone No: 941-484-6239

Organization (if any): \_\_\_\_\_

Please Check One

☒ Audience Participation – Topic: MURPHY OAKS

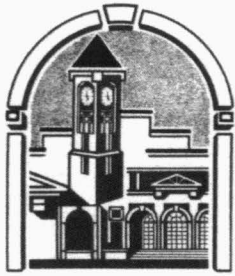
☐ During Agenda Item - Topic: \_\_\_\_\_

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Signature: 

Comments at public hearing and during audience participation are limited to five minutes per speaker unless otherwise noted.



"City on the Gulf"

## City of Venice

Request to Speak (print legibly)

Name: JONATHAN ROMINA Date: 11.27.18

Address: 2401 FIRST ST, SUITE 201

City: FORT MYERS State FL Zip 33901

City Resident: ☐ Yes ☒ No

Telephone No: 239 226 0024

Organization (if any): EN SITE, INC.

Please Check One

☐ Audience Participation – Topic: \_\_\_\_\_

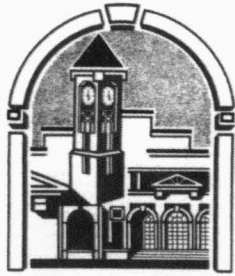
☒ During Agenda Item - Topic: MURPHY OAKS

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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 27th day of Nov 20 18 is truthful.

Signature: [Signature]

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"City on the Gulf"

## City of Venice

Request to Speak (print legibly)

*declined*

Name: Paul McCulloch Date: 11/27/2018

Address: 476 Arborview Lane

City: Venice State: FL Zip: 34292

City Resident: ☒ Yes ☐ No

Telephone No: 203 321 9722

Organization (if any): \_\_\_\_\_

Please Check One

☒ Audience Participation – Topic: Murphy Oaks

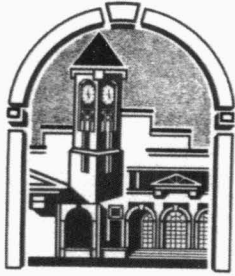
☐ During Agenda Item - Topic: \_\_\_\_\_

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Signature: \_\_\_\_\_

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"City on the Gulf"

## City of Venice

Request to Speak (print legibly)

*declined*

Name: Barbara Hutton Date: 11/27/18

Address: 741 Misty Pine

City: Venice State: FL Zip: 34292

City Resident: ☒ Yes ☐ No

Telephone No: 941 412-3141

Organization (if any): \_\_\_\_\_

Please Check One

- ☐ Audience Participation – Topic: Murphy Oaks  
☐ During Agenda Item - Topic: \_\_\_\_\_

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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 27 day of Nov 20 18 is truthful.

Signature: Barbara Hutton

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