

City of Coral Gables Request to Address City Commission

PLEASE PRINT

	2 P 1/414 :	
Date:	Time:	
Agenda/Item Number:		
Issue:	oxutill'il	
Name: LARRY SCI	two dut 2	
Mailing address: 3250 Riving Dr		
City: C G	State/Zip: 33 L3Y	
Phone: 240 654 79 42		
Are you a registered lobbyist with the	ne City of Coral Gables?	
Representing:		
I wish to speak	Proponent	
I do not wish to speak	Opponent	
I have been requested to speak	k To provide information	
Comments regarding this issue:		
Signature		

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City of Coral Gables Request to Address City Commission

Agenda/Item Number: 6 -	12
Issue:	
Name: Cony Cuth ber	rtson
Mailing address: 4511 SW 15	m Terr
City: MIMMI Phone: 239-572-2694	tate/Zip: 33134
239-572-2684	comskrock®
Phone:	-mail:
Are you a registered lobbyist with the C	-Slammer
Are you a registered lobbyist with the C	City of Coral Gables?
Are you a registered lobbyist with the C Yes	City of Coral Gables?
Are you a registered lobbyist with the C	City of Coral Gables?
Are you a registered lobbyist with the Company Yes Representing:	No Proponent
Are you a registered lobbyist with the Company Yes Representing: I wish to speak I do not wish to speak	No Proponent Opponent

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City of Coral Gable Request to Address	City Commission
Date: 82422 PLEASE PRIN	lime:
Agenda/Item Number:	
Issue: ANNE BLUE	TCIN
Nume:	
Mailing address: $43305.$ W.	15 Street
City: M Am (State	Zip: F133134
Phone: 205 449 9008 E-ma	ill: lynnag sin ia y also
Yes No Representing:	
I wish to speak	Proponent
I do not wish to speak	Opponent
I have been requested to speak	To provide information
Comments regarding this issue:	
I eppose	

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Signature



City of Coral Gables Request to Address City Commission

PLEASE PRINT
Date: 8-24-22 PLEASE PRINT Time: 10:00
Agenda/Item Number: 6-/2
ssue: Little Gables Annexation
Name: Maria E. Sequeira
Mailing address: 4327 SW 10 Street
City: Miami State/Zip: F/ 33/3
City: Miami State/Zip: F/ 33/3 Phone: 305-793-3779 E-mail: hotmail. G
Are you a registered lobbyist with the City of Coral Gables?
Yes
Representing: myself
I wish to speak Proponent
I do not wish to speak Opponent
\Box I have been requested to speak \Box To provide information
Comments regarding this issue:
I am very much in favor
of Little Gables Annexation to
the City of Coral Gibbs.
Signature Askled Squelled
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City of Coral Gables Request to Address City Commission

PLEASE PRINT	
Date: 8-24-22 PLEASE PRINT Time:	
Agenda/Item Number: 6-12	
Issue: LITE GABLES ANNEX	MOITE
Name: ROBERTO SEQUEIR	A
Mailing address: 4327 5. W · 10 5	1.00
City: MIAMI State/Zip:	
Phone: E-mail: K5E00	UEIRO T.NGT
Are you a registered lobbyist with the City of Coral Gables?	
Yes It No	
Representing: MY SELF	
T wish to speak Proponent	.
I do not wish to speak Opponent	
	e information
Comments regarding this issue:	
I AM IN AGREEMENT OF	
THE ANCEXATION	
Allert Lagran	
Signature / / / / / / / / / / / / / / / / / / /	

Parsuant to Article I, Section 24 of the Florida Constitution,

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City of Coral Gables Request to Address City Commission

Date: 9/24/20 22 PLEASE PRINT Time:	
Date: 4/27/06 22 Time:	
Agenda/Item Number:	
ssue: an weggtroo LIHO	e Gables
Name: 62+DYS SqeNZ	
Mailing address: <u>433</u> 1 SW 15 S	5+
City: State/Zip: _	33134
Phone: 305 4479973 E-mail: 3	saewzs o
Are you a registered lobbyist with the City of Coral	
Representing: Lattle Galales	
□ I wish to speak □ Pr	oponent
	pponent
	provide information
Comments regarding this issue:	100
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6 ona Calstes	
Signature HOstes	3
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	City	of Co	oral (
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Gables ddress City Commission

PORIUM	
Date: PLEASE PRIN	T 9:45 am
Agenda/Item Number: <u> </u>	ation 6-12
Issue: annexation	
Name: Myraph all	nan maderical
Mailing address: 14 25 SW 40	Ave
City: Man State	Zip:
Phone: 30571667 84 E-ma	III dramaria e
Are you a registered lobbyist with the City o	f Coral Gables?
Representing:	
☐ I wish to speak	Proponent
I do not wish to speak	Opponent
I have been requested to speak	To provide information
Comments regarding this issue:	
in support for	anelation

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Signature_

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Signature

City of Coral Gables Request to Address City Commission

LORIUM	
Date: 1022-08-24 PLEASE PRINT	9:40
Agenda/Item Number: <u>Annexa</u>	fion
Issue: Support for Little	e gables
Name: Ricardo Lo Mailing address: 4291 SW	pez
Mailing address: 429/ SW	12 5+
City / / / A M / State/Zi	n: FL/33/3T
Phone: 305-775-2859 E-mail:	RLOPEZ, STUDIO
(& Bmail. Com
Are you a registered lobbyist with the City of C	
□ _{Yes} No	
Representing: Self	
~	/
I wish to speak	Proponent
I do not wish to speak	Opponent
I have been requested to speak	To provide information
Comments regarding this issue:	
Loral gables comm	art of the
Coral gables comm	mity and
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City of Coral Gables Request to Address City Commission

PLEASE PRINT

Date:	Time:
Agenda/Item Number:	3-12
Issue: Annexation	eling - 148
Name: _ Christing	villamil
Mailing address: 4637	SW 10
City: & Miami	
Phone:	E-mail:
Are you a registered lobbyist with Yes Representing:	No
I wish to speak	Proponent Opponent
I have been requested to specific comments regarding this issue:	ak ^{LL} To provide information
Signature	

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City of Coral Ga	Order of receipt
E) All Malerial Roll	ress City Commission
	RINT 940 AM
Agenda/Item Number:	12
Issue: ANNEXATION	
Name: KAREN SH	
Mailing address: 4375 5	W 134hSt.
City: Midmi S	tate/Zip: FL 33134
Phone: 305 812 441/	-mail: Karenska@ao/
Are you a registered lobbyist with the C	lity of Coral Gables?
□ _{Yes} ▽	No
Representing:	
I wish to speak	Proponent
I do not wish to speak	Opponent
I have been requested to speak	To provide information
Comments regarding this issue:	
1/0	

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Signature.

Request to Address City Commission
Date: 8 24 22 PLEASE PRINT Time: 9.39 am
Agenda/Item Number: 22- G-12
Issue: ANNEXATION
Name: LUCIANA L. GONZález
Mailing address: 4605 SW 12 ST
City: MICMI State/Zip: FL 35/3
Phone: 305-609-2879 E-mail: Luciara Geat
Are you a registered lobbyist with the City of Coral Gables?
Representing:
I wish to speak Proponent
I do not wish to speak Opponent
\square I have been requested to speak \square To provide information
Comments regarding this issue:
I support annexation
0 000

City of Coral Gables

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Signature

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City of Coral Gables Request to Address City Commission

PLORIS	JA.		
Date: _	8 24 202 PLE	ASE PRINT Time:	
Agendo	a/Item Number: _	Annexation	G12
Issue: _	Annexation	<u> </u>	
Name: .		McAllister	
Mailing	address: 8000	NW 21.51	
- V	A NI HAW I	thehe/7im	1 レ ング・レー
Phone:	305 593 -61	66 E-mail:	residenta
Are you	a registered lobbyist w	ith the City of Coral No	Gables?
X I w	nting: Mctol		roponent poponent provide information
Comme	nts regarding this issue:		
	MA		

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City of Coral Gables

Request to Address City Commission

CORIUM	
PLEASE	PRINT
Date: 8/21/22	Time:
	2-17
Agenda/Item Number:	7);
Issue: Aunita	from _
Name: AARIA	C. CAUZ
Mailing address:	
City:	State/Zip:
Phone:	E-mail:
A	City of Court Cololod
Are you a registered lobbyist with the	
Yes	No
Representing:	
	-
wish to speak	Proponent
I do not wish to speak	Opponent
I have been requested to speak	To provide information
Comments regarding this issue:	
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Agenda/Item Number: 7446 648127

Issue:

Phone:

PMP. LE

Representing: __

I do not wish to speak I wish to speak

| I have been requested to speak

To provide information Proponent D Opponent

Comments regarding this issue:

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