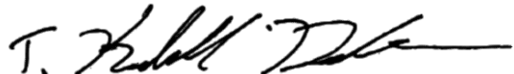


**CITY OF OCALA
DOWNTOWN OCALA CRA ADVISORY COMMITTEE APPLICATION**

1. Name: Kendall Drake Home Phone: _____
2. Home Address: 1962 SE Twin Bridge Circle, Ocala, FL 34471
3. City, State, Zip Code: _____
4. Business: Drake Construction Services Business Phone: 352-867-8101
5. E-mail address: kendall@drakeconstructionservices.com
6. Cell Phone: 352-286-7001
7. Business Address: 302 SE Broadway St STE 100, Ocala, FL 34471 Occupation: General Contractor
8. Are you a resident of Marion County Yes No _____
9. Do you reside within the City? Yes No _____
10. Do you own a business within the City? Yes No _____
11. Are you a registered City voter? Yes No _____
12. Do you hold a public office? Yes _____ No
13. Are you employed by the City? Yes _____ No
14. At the present time, do you serve on a Board, Commission, Organization or Committee? Yes _____ No
15. Name of Board, Commission, Organization or Committee _____


Signature

1/9/23
Date

Staff Only:

Date of Application: _____

Approval Date by City Council: _____