



CITY OF FORT PIERCE

100 NORTH US HWY 1
FORT PIERCE, FLORIDA 34950
(772) 467-3065 fax (772) 467-3841

APPLICATION FOR APPOINTMENT/REAPPOINTMENT

Name of Board or Boards for which you are applying: SUNRISE THEATER ADVISORY BOARD

Name: <u>GARY MARIAROSSO</u>	Phone: <u>(321) 303-2058</u>
Home Address: <u>2200 MARINER BAY BLVD.</u> City/Zip Code: <u>FT. PIERCE, FL. 34949</u>	How long at this address? <u>2 yrs</u>
Are you a citizen of the United States? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Occupation: <u>GENERAL MANAGER - TREASURE COAST LEXUS</u>	
Do you own a business that operates within the City of Fort Pierce? If yes, list the address and nature of said business: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Do you now or in the future plan to do business with the City of Fort Pierce? If yes, in what capacity? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Are you employed by a business that is located within the City of Fort Pierce? If yes, state the business and location: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <u>TREASURE COAST LEXUS</u> <u>5121 SOUTH U.S. HWY 1</u> <u>FT. PIERCE, FL. 34982</u>	
Do you have special training or knowledge in the area of: Architecture: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Engineering: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Real Estate Brokering: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Contracting: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Land Development: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Other: Describe your education, background, training and knowledge - (feel free to attach a resume): <u>MOVED TO FLORIDA IN 1983. ATTENDED THE U.S. NAVAL ACADEMY</u> <u>I AM CURRENTLY THE GENERAL MANAGER AT TREASURE COAST LEXUS.</u> <u>MY KNOWLEDGE IS PRIMARILY IN RUNNING SUCCESSFUL BUSINESSES. MARRIED - 33 YRS.</u>	
Are you currently a member of a Commission-appointed board/committee? If yes, please specify: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Have you ever been convicted of a felony? If yes, what was the nature of the crime(s) you were convicted of: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Referred by:	Applicant Email Address:
Date: <u>5/6/19</u>	Applicant's Signature: <u>Gary Mariarosso</u>

APPLICATIONS EXPIRE 6 MONTHS FROM THE DATE OF SUBMISSION. PLEASE REAPPLY AS OFTEN AS DESIRED.
Please return form to: City Clerk's Office - 100 North US Hwy 1, Fort Pierce, Florida 34950
fax (772) 467-3841 or via email at lcox@city-ftpierce.com