

# Print

## Application For Appointment/Reappointment - Submission #22754

Date Submitted: 9/3/2024

Name of Board or Boards for which you are applying:\*

Arts and culture advisory board

Name:\*

Michael Daddesi

Home Address:\*

701 Atlantic Ave

City:\*

Fort Pierce

State:\*

FL

Zip:\*

34950

How long at this address?\*

1 year

Telephone Number\*

2154074091

If less than two years, provide prior address:

78 Aqua Ra Drive Jensen beach Florida 34957

Are you a citizen of the United States? \*

Yes

No

Occupation: \*

Retired

**Employer:\***

Self employed

**Do you own a business that operates within the City of Fort Pierce?\***

Yes

No

**If yes, list the address and nature of said business:**

Online plant retail sales 701 Atlantic Ave

**Do you now or in the future plan to do business with the City of Fort Pierce or the Fort Pierce Utilities Authority(FPUA)?\***

Yes

No

**If yes, in which organization and in what capacity?**

Building and construction. City of Fort Pierce

**Are you employed by a business that is located within the City of Fort Pierce?\***

Yes

No

**If yes, state the business and location:**

MegansPlantBoutique 701 Atlantic. Owner/operator

**Do you have special training or knowledge in the area of:**

**Engineering:\***

Yes

No

**Architecture:\***

Yes

No

**Real Estate Brokering:\***

Yes

No

**Finance/Accounting:\***

Yes

No

**Contracting:\***

Yes

No

**Land Development:\***

Yes

No

**Utilities:**

Yes

No

**Management:\***

Yes

No

**Describe your professional background and what expertise you will bring to this Board. (Attach your resume or other applicable information below if desired) \***

Strong background in arts and cultural development of neighborhoods. Business creation. Marketing, branding and project management experience. Very strong sales experience. Knowledge of many different business types and what a city needs to attract commerce and development in order to thrive.

**Are you currently a member of a Commission-appointed board/committee?\***

Yes

No

**If yes, please specify:**

---

**Have you ever been convicted of a felony?\***

Yes

No

If yes, what was the nature of the crime(s) you were convicted of:

If appointed, are you willing to attend a training session which could last several hours?\*

Yes

No

Referred by:\*

Facebook

Applicant Email Address:\*

Madjr333@yahoo.com

Date:\*

9/03/2024

Applicant's Signature:\*

Michael Daddesi

APPLICATIONS EXPIRE 6 MONTHS FROM THE DATE OF SUBMISSION. PLEASE REAPPLY AS OFTEN AS DESIRED.

For additional information, please contact the City Clerk's Office at 772.467.3065 or email [lcox@cityoffortpierce.com](mailto:lcox@cityoffortpierce.com).

Upload Resume (Optional)

Choose File

No file chosen