

TRANSCRIPT OF THE MEETING OF THE
COLLIER COUNTY PLANNING COMMISSION
Naples, Florida
September 1, 2022
LDC AMENDMENT

LET IT BE REMEMBERED, that the Collier County Planning Commission, in and for the County of Collier, having conducted business herein, met on this date at 5:27 p.m., in SPECIAL SESSION in Building "F" of the Government Complex, East Naples, Florida, with the following members present:

Edwin Fryer, Chairman
Karen Homiak, Vice Chair
Karl Fry
Paul Shea
Robert L. Klucik, Jr.
Christopher T. Vernon
Amy Lockhart, Collier County School Board Representative

ABSENT:
Joe Schmitt

ALSO PRESENT:
Mike Bosi, Planning and Zoning Director
Heidi Ashton-Cicko, Managing Assistant County Attorney
Derek Perry, County Attorney's Office

PROCEEDINGS

CHAIRMAN FRYER: And the evening session of September 1, 2022, meeting of the Collier County Planning Commission will please come to order. And let the record show that it is 27 minutes after 5:00 p.m., and we will dispense with --

(A brief recess was had.)

CHAIRMAN FRYER: All right. Back to the evening session. Then we have -- well, we're going to dispense with some things. Utmost respect for our country and our flag, we're going to defer repeating the Pledge of Allegiance.

We don't have -- let's see. We have the same quorum with the exception of Commissioner Schmitt, so we don't need to call the roll again.

We don't have any addenda to the agenda, I don't believe. No minutes. BCC report, we've covered. Chairman's report, none. Consent agenda.

***Public hearings, we have only one to come before us this evening, and that is PL20220004273. Do I have -- do I have the year right? It doesn't sound right. Mr. Bosi, is it 20220004350?

MR. BOSI: Yes.

CHAIRMAN FRYER: Okay.

COMMISSIONER SHEA: 4273.

MR. BOSI: 4273.

CHAIRMAN FRYER: Ah, yes, yes, thank you, 4273. I was looking at the wrong one. Thank you.

All right. This matter is purely legislative in nature so that we are not sitting quasi-judicially. We don't need to swear in witnesses, we don't need to make disclosures, and we can proceed forthwith with a presentation from our staff.

MR. BOSI: Chair, Mr. Youngblood has to set up the Zoom aspect of the file. As soon as it's done, we can get going.

CHAIRMAN FRYER: How many minutes do you need or are you --

MR. BOSI: Seconds.

CHAIRMAN FRYER: Seconds, okay.

MR. HENDERLONG: Mr. Chairman, for the record, Principal Planner Rich Henderlong in the Zoning Division, Land Development Code section.

For the record, I want to first pass out before we get going the last two emails that we received. One from Sheriff Rambosk and the other one is right here from Dr. Carol Roberts, and they'll pass out to you copies of the emails, and you can read them while I go through the PowerPoint presentation for you.

CHAIRMAN FRYER: Okay.

MR. HENDERLONG: Okay.

CHAIRMAN FRYER: Are you going to summarize them, or are you just going to --

MR. HENDERLONG: Yes, I'll go through real quick the best I can for you.

CHAIRMAN FRYER: Okay. Good.

MR. HENDERLONG: The Board or this -- now to move to the next slide.

CHAIRMAN FRYER: I don't want people reading the handouts while you're talking.

MR. HENDERLONG: No, okay.

CHAIRMAN FRYER: So would you please summarize what the handouts say.

MR. HENDERLONG: Commissioner -- or Sheriff Rambosk is recommending you recommend denial of the amendment.

CHAIRMAN FRYER: Uh-huh.

MR. HENDERLONG: And the other person is recommending approval of the amendment, Dr. Carol.

CHAIRMAN FRYER: Okay. Dr. Carol is a doctor of what?

MR. HENDERLONG: Yes, of --

CHAIRMAN FRYER: Medicine.

MR. HENDERLONG: She's with Naples Center for Functional Medicine.

CHAIRMAN FRYER: Okay.

MR. HENDERLONG: And she talks about the benefits of medical marijuana, and she has a list of that on the second page.

CHAIRMAN FRYER: Okay. But we don't know if she's a medical doctor.

COMMISSIONER VERNON: She is.

CHAIRMAN FRYER: She is. Does it say so?

COMMISSIONER VERNON: Naples.

CHAIRMAN FRYER: Oh, M.D.

COMMISSIONER VERNON: Well-respected Naples physician.

CHAIRMAN FRYER: Okay. Mr. Henderlong, go ahead, sir.

MR. HENDERLONG: Okay. The Board, on May 10th, directed by a vote of the 5-0 to advise and bring back for consideration this LDC amendment to allow medical marijuana dispensaries in the same zoning districts as pharmacies. In addition, they had a caveat to that, and that was for staff to look into law enforcement issues as they related to the existing dispensaries that are along -- in the city -- in Bonita Springs, in particular, the three or 4 that are on Bonita Beach Road.

So this slide is to give you an overview of what the statute requires local -- the county to do. You have two options, okay: To ban or, in this case, this amendment is to determine the criteria for the location and the permitting requirements that do not conflict with state law or department rule for medical marijuana treatment center dispensing facilities located within -- the key is the unincorporated areas of the county.

If the county doesn't ban, then it may not do one of these four things. That is, place a limit on the number of dispensaries; two, enact an ordinance that determines the locations of dispensing facilities which are more restrictive than those for pharmacies; three, charge a license or permit fee in an amount greater than a pharmacy; and, four, be located within 500 feet of real property that comprises a public or private school.

CHAIRMAN FRYER: Let me ask a question. With respect to No. 2 or B, if a pharmacy allows drive-through pickup, does that mean a marijuana dispensary would have to do the same, would have the right to do the same?

MR. HENDERLONG: No. This -- this is limited just to location. We do allow -- some pharmacies do have drive-through, and when -- in my presentation I'll get to where recommendations were made by staff and a team of people to prohibit drive-through because the concern is not to allow additional exposure for youth advertising and access to it and for security measures.

CHAIRMAN FRYER: Okay. So this prohibition only has to do with locations?

MR. HENDERLONG: Correct.

CHAIRMAN FRYER: Okay. Thank you.

Commissioner Fry.

COMMISSIONER FRY: Rich, am I reading that sentence correctly? A county that does not ban dispensing facilities may not do any of those things?

MR. HENDERLONG: Exactly.

COMMISSIONER KLUCIK: So it's all or nothing.

COMMISSIONER FRY: All or nothing, okay.

MR. HENDERLONG: So what are the state-related standards that we're going to be talking about? The first one talks about, out of the Florida Administrative Code, two definitions: Dispensing facility and a derivative product. When -- put it on the record that a dispensing facility, by administrative code, is an area designated to be accessible by the public where derivative product and marijuana delivery devices will be dispensed at retail, and a derivative product is the form of medical -- or marijuana suitable for medical use. Later in the presentation,

I'll go through the four different definitions that we're codifying.

So the other state-related standard pertains to the dispensary site itself. A dispensary site has to have an indoor waiting area.

COMMISSIONER KLUCIK: Mr. Chairman.

MR. HENDERLONG: I'm sorry.

COMMISSIONER KLUCIK: On this slide, this dispensary site -- which is what you're reading right now; is that right?

MR. HENDERLONG: Yes, sir.

COMMISSIONER KLUCIK: I'm just trying to figure out, it seems like it contradicts itself. Not that -- I mean, I guess the details don't matter too much. But it says, has to have an indoor area where derivative product and marijuana delivery devices are dispensed, and then it says, may not display products or dispense marijuana or marijuana delivery devices in the waiting area. Those seem to be the opposites.

MR. HENDERLONG: Well, how it's in the -- when I toured, along with the County Attorney, a facility, basically, you walk into this door. You have a waiting area. They can't dispense in that area. That security -- secured area is basically to determine whether you should or should not be there. The actual dispensing occurs in a different room.

COMMISSIONER KLUCIK: We have two waiting areas?

MR. HENDERLONG: No. One's officially a waiting area. The other one is an educational dispensing area.

COMMISSIONER KLUCIK: Yeah. Then -- your slide is, you know, blatantly incorrect on that point, then. The last sentence contradicts the first sentence.

MR. HENDERLONG: Well, the last sentence is correct. You don't dispense. The first -- well, that is taken from the statute.

COMMISSIONER KLUCIK: May not dispense marijuana in the waiting area, and then the first one says -- oh, waiting area where derivative product and delivery devices are dispensed.

MR. HENDERLONG: Let me back up. It would be a consultation area. That's the different. At least one private consultation area from the dispensing.

COMMISSIONER KLUCIK: Okay. It probably doesn't make too much of a difference, but I just --

MR. HENDERLONG: No. I appreciate your legal --

COMMISSIONER KLUCIK: To show that I'm reading it.

MR. HENDERLONG: -- sharpness there. Okay. Very good.

The next issue is signage. The statute's very clear on this. A sign has to be affixed to the outside or hanging in a window of the premise identifying that dispensary by the business name, trade name, or an approved Florida Department of Health logo. That -- they have to certify that, and then the county, through the codifying process or permitting process, would approve it.

The second part to that is the trade name and the logo may not contain wording or images commonly associated with marketing targeted toward children or which would promote recreational use of marijuana.

The next site-related standard relates to security measures. They have to maintain an operational security alarm system. There has to be a video surveillance system, and a marijuana transportation manifest that's maintained for at least three years from a seed to point of sale tracking system. The seed to point of sale originates from the cultivation processing center all the way, is tracked and followed up to the point of its -- it being dispensed when it's changed into a derivative product or into what form.

The last indicator is that it cannot dispense from the premise. The marijuana and the marijuana device cannot be dispensed between the periods of 9:00 p.m. and 7:00 a.m. So basically daytime is fine. A person comes in, gets their prescription, they can carry it. They can't -- if it's going to be in a smoke form, they can't smoke it on site. They have to take it home. They have to smoke it indoor, just so you know. So that's one of the forms.

Okay. So in terms of the LDC text, we have four elements to it: The new definitions, what are allowable locations, what would be the security measures, and the prohibitions.

As it relates to the definitions, these are the four definitions within your LDC within the text, and the main one is low THC cannabis. The statute describes that. And I can either read the definition if you want it for the record, I can enter it into it, or you can accept it as shown on the slide, because it is verbatim from the statute both for all three with the exception of medical use. It has the same meaning of 381.986, Florida Statute, meaning that the acquisition, possession, use, delivery, transfer, or administration of marijuana authorized by a physician certification, but it lists a very comprehensive -- in your packet on Page 7, there are a list of exclusions, and you'll also see it on -- in your text, Page 4.

CHAIRMAN FRYER: I think this material was in the agenda packet, so it's already part of the record, yeah.

MR. HENDERLONG: It is there for you.

So the allowable locations would be in a C-2 because these are where pharmacies are located -- will be in a C-2 zoned district, which has a limitation to a 1,800-square-foot gross floor area, C-3, C-4, and C-5, a business park district, research technology park PUD, and the Santa Barbara Commercial Overlay District. For previously approved PUDs, they will be permitted as a use when the SIC Code 5912, a drugstore, pharmacy, or any other zoning districts that are stated as allowable use within that PUD that would allow any one of those three.

COMMISSIONER KLUCIK: Mr. Chair?

CHAIRMAN FRYER: Go ahead, sir.

COMMISSIONER KLUCIK: So this is -- this slide is telling us what is being proposed?

MR. HENDERLONG: Yes, sir.

COMMISSIONER KLUCIK: We would be approving what we're reading right now?

MR. HENDERLONG: Where it would be allowed, the locations where it would be allowed. And, again, there's no numbers on caps for dispensaries.

So staff, back in 2017, when we did this study, found that there are 46 PUDs, and 12 of them had these classifications identified. So that identified -- we were aware that at least -- it would also be allowed within 46 PUDs that have these four different type of categories, or five.

COMMISSIONER VERNON: So, conceptually, we could have 46 dispensaries?

MR. HENDERLONG: No. You would have more than that. Wherever you see a pharmacy, if it's in a shopping center --

COMMISSIONER VERNON: Oh.

MR. HENDERLONG: -- wherever a pharmacy, a drugstore, or a 591 [sic] code is where it would be allowed. There's no limitation.

MR. BOSI: I would only say you're limited by the market demand. And, I mean, anywhere that a pharmacy could be permitted, a medical marijuana dispensary could be permitted. I know the numbers in Lee County, which is double our population, they have close to 900,000 of permanent population, and the number of dispensaries within Lee County --

MR. HENDERLONG: There's 28 there today in Lee County.

MR. BOSI: So if -- modeling that, there could be potentially 14, you know, based upon the 400,000 population within the county. So there could be numerous opportunities, because pharmacy -- C-2, C-3, C-4 provide for those opportunities.

MR. HENDERLONG: So in the context of the LDC amendment, there are two different provisions that we added back in 2016 after touring a facility.

The first one is a Dark Sky compliant outdoor lighting system design with light fixtures that are full cutoff with flat lens. The importance here is that we learn that a person late in the evening needed to be able to be identified, and law enforcement felt that was an appropriate requirement.

The second one is the transport or delivery vehicle should be enclosed in a structure when not in use for delivery. DSAC asked the question: Why was that brought in? It was brought in

because there are two people that occupy that delivery vehicle when they leave the dispensing facility to take it -- say you make an order, you go in there, you call in, you don't have to physically be there. You can call, and they can deliver it to your house from either that location or another location. And they drive in there and so forth. But if they've got advertising there, again, they're trying to protect the children in advertising.

The question was, where does that truck go? Could it be left outside? We were told they were parking in the front -- the one that we toured in North Fort Myers, they're out in the front in the off-street parking area in front of the shopping center, and we all felt that's not appropriate.

When we toured and talked to a cultivation processing center, Grow Healthy, some of their staff members recommended -- they were showing us what those trucks look like, and they agreed with us, that facility did, that they thought that was a prudent thing for local government to do as an added security protection, so that's why it's there.

The fourth issue is prohibitions. As you mentioned, Mr. Chairman, no drive-through facility, curbside pickup, takeout windows, or similar outdoor transactions from facilities. As you know, a prescription is issued at a pharmacy. They have drive-throughs. They get it. Because of the security requirements for who enters into that facility to dispense, they have to confirm and verify by ID and their presence and, therefore, we thought a drive-by [sic] would be inappropriate, and it also would bifurcate the consultation requirement and education for the products that they're going to be consuming.

Next, no display of the product marijuana or marijuana delivery device in that waiting area. That is a Florida Statute requirement.

The next prohibition is also -- the next two are all Florida Statute requirements. One, no dispensing from the premise, as I said earlier, 9:00 p.m. to 7:00 a.m., and that it not be located within 500 feet of a private or public school.

Now, on this point, this is relating to the second part of the Board direction on law enforcement, and I just wanted to read to you -- I prepared for this. As a result of this indication that the direction was to evaluate police reports on existing dispensaries in Bonita Springs, we met with Collier County Sheriff's Office, Captain Scott Forth (phonetic) of the Homeland Security, and Lieutenant Gary Gambino, the Vice and Narcotics Bureau, who is present here today, to coordinate a law enforcement issue report. And in that email we were asking to identify the frequency of trespassing, burglary, theft, robbery, diversion of products, outside parking and loitering, breach of security system be it indoor or outdoor, crime and any violation of medical use in marijuana pursuant to the statute, which could be associated with the existing dispensary.

So for Lee and Collier County, what's on your screen, this is -- apparently this is out of order. This is the old one. There it is. Sorry. Here we go. This was the initial report. So when we did this initial report, we found that when talking with Marco Island Police Department, there was no issue. A new facility had just opened there about -- within two to three weeks ago in June, and the dispensary is MuV, M-u-V. Collier County Sheriff's Office does not have any dispensaries so it's a nonissue. Lee County Sheriff's Office, who has oversight for Bonita Springs and the unincorporated area, said that there was nothing higher than a normal prevalency, and that they only have two incidences of assault and aggravated assault at Trulieve, and they did not seem to cause any issues for enforcement.

So after we received that report, we went back and had a discussion subsequently -- we followed up -- to make an evaluation. We felt that the initial report, one sent to the Collier County Sheriff's Office, that they offered to us to provide additional assistance to get more details on the facts as it related to service calls and incidences that occurred at each of the dispensaries.

So what you have on the board in front of you is all the 10 dispensaries that are identified at Bonita Springs. And, basically, I'll summarize briefly for you what it says. There's a total of 647 covering a period from 2014 to July 6th of 2022 that had originated at -- from each of these locations and addresses. We condensed that information in this checklist, and it's in your packet, Page 22.

The next photo we put together to show you what do these dispensaries look like. These are four of the 10 of them. Two of them are in Bonita Springs, the upper two. One is Trulieve on the left-hand side, upper left, and upper right is a stand-alone building. It used to be an old bank. Curaleaf is located there. In the lower left is MuV on South Tamiami Trail which is in a multistrip center, as well as Grow Healthy on the right. You can see they're very clean operations. Very -- they don't draw any -- in our opinion any extraordinary attention to other than the fact that they're -- they fit very well within the shopping centers.

So after we got into the Bonita Springs evaluation for the service calls, the Sheriff's Office provided us with, in greater detail, an update on incidence reports and calls that were for 122 that occurred in 2018 to 2022 on seven qualified physician certification locations here within Collier County where a qualified physician can issue a physician certification before the state Department of Health can issue a qualified patient medical-use ID card. That is on your screen.

What is interesting is that it spans a period of four years, two months, and you can see some of them are very new here, and those are the isolated incidences.

So in summation with this report, all of these incidences do not fully evaluate or constitute a complete police report. It's important to understand that. A more in depth into each of the incidents in every record would have to be conducted to determine if, in fact, there is a link to the specific dispensary business or merely an incident that occurred in the vicinity of the dispensary's address.

All right. So with that, I'm going to -- we're going to take it to the summary for what is before you, what was prior and what is proposed in the recommendation.

On April 30th, 2018, at a nighttime hearing, the Planning Commission reviewed the LDC amendment with minor changes that were presented in the amendment today to conform with the current 2021 Florida Statutes that you have not seen that is in front of you in your packet, and that's highlighted in yellow in your text.

CHAIRMAN FRYER: Commissioner Vernon.

COMMISSIONER VERNON: Minor questions, but I saw the Marco Island. So there's a dispensary in Marco Island?

MR. HENDERLONG: Yes, sir.

COMMISSIONER VERNON: Okay. And then the area check -- and I know you may not know the answer to this, but when I was looking at the police reports, area check on that first police --

MR. HENDERLONG: I can answer that question for you because Sheriff Don Hunter --

COMMISSIONER VERNON: Just so everybody knows why I'm asking the question, the vast majority of those incident reports were just area checks.

MR. HENDERLONG: Correct. And what -- an area check is a call for an extra patrol. It does not mean there's an incident or any case. Sheriff Don Hunter -- Ex-Sheriff Don Hunter at the DSAC committee was asked the same question, and that's what he reported.

CHAIRMAN FRYER: Commissioner Klucik.

COMMISSIONER KLUCIK: Yes. Okay. So Bullet 1 says what happened in the past, and that was a ban that was enacted, 4-2; is that what that slide says, 4-2?

MR. HENDERLONG: Correct, that's correct.

COMMISSIONER KLUCIK: The ban was enacted. And then the second bullet is not about that amendment. It's about the amendment that you just reviewed.

MR. HENDERLONG: Yes. The amendment today --

COMMISSIONER KLUCIK: Which is not to ban but to allow.

MR. HENDERLONG: Either deny the amendment, the ordinance -- this is an ordinance -- to deny the amendment which --

COMMISSIONER KLUCIK: But the amendment, though, is the new thing that you just talked about today. It's not Item 1 that was already -- that was a ban. What we're passing today -- or asked to look at today is the opposite, which is an approval?

MR. BOSI: Clarification. Staff is taking no recommendation, either approval or denial. You have two actions that are --

(Simultaneous crosstalk.)

COMMISSIONER KLUCIK: No, I'm just -- no, no.

COMMISSIONER VERNON: Can I just hear what he has to say? Go ahead.

MR. BOSI: Your two choices, you either approve or approve with modifications the proposed allowance of the medical marijuana facilities where a pharmacy is at, or you would recommend denial.

COMMISSIONER KLUCIK: Right. So when we're using the word "amendment," then my original question, the word "amendment" in the first paragraph is the old amendment, and the new amendment is the opposite of that.

MR. BOSI: It's the current proposal, yes.

MR. HENDERLONG: Correct.

MS. ASHTON-CICKO: And the first --

COMMISSIONER KLUCIK: And the recommendation by the DSAC is to deny this amendment?

MR. HENDERLONG: Yes. That vote was 10-2.

CHAIRMAN FRYER: Ms. Ashton.

MS. ASHTON-CICKO: Oh, I was just going to clarify that the 2018 recommendation did go to the Board of County Commissioners, and they did not pass the LDC amendment in 2018 due to a lack of a required vote.

COMMISSIONER KLUCIK: Right, they rejected the ban.

MS. ASHTON-CICKO: That's correct. So there was a recent meeting where they directed staff to come back with another LDC amendment for their consideration after taking it to you-all.

CHAIRMAN FRYER: Commissioner Vernon.

COMMISSIONER VERNON: Yeah. So if we deny the amendment as opposed to either approving the amendment or approving the amendment with conditions or modifications, where does the county -- where do we stand if we deny the amendment?

MR. BOSI: Both -- once again, once again, you're a recommending body to the Board, just as DSAC, on this proposed amendment. So you would make a recommendation either to deny it or a recommendation to adopt or adopt with conditions. Ultimately, the Board of County Commissioners will take that advice, and they will make a decision. If they cannot get four individual Board of County Commissioners to agree that this amendment should be passed, then it's going to -- then it will still -- in the status where it's not approved, but unless they get three to say we want to ban -- we want to ban dispensaries, it will be in this nebulous status that we've been in for the past four years.

MR. JOHNSON: Right. Another way of looking at it, if you don't approve the amendment, you're not approving the use. If there's not a use that's listed in the list of permitted uses, it's not allowed.

MR. HENDERLONG: Yeah. And that's a prohibited use by LDC code definition. If the use is not allowed within our zoning districts, our code says it's a prohibited use.

COMMISSIONER VERNON: Effectively a ban, effectively.

MR. HENDERLONG: I'm not attorney, but I've heard it argued it isn't -- or it isn't. It isn't technically in terms of the statute, the way the statute is written, because the City of Naples did pass an ordinance that says -- it specifically says "bans dispensaries" and other things in there.

So some communities did do that. And you'll probably hear from some of the citizens today who are familiar and have already experienced medical marijuana IDs, applications, et cetera, and hear their position in the public comment period.

CHAIRMAN FRYER: I'm going to raise an issue right now, and it has to do with, perhaps, what could be seen as a 400-pound gorilla in the room. It hasn't been mentioned, wasn't

mentioned in the material in the agenda packet. It hasn't been mentioned today. And the issue in question -- and I'm going to raise this without taking a position one way or another because I really genuinely don't have -- I'm neutral on the underlying issue, but I've got a concern that I need to put out there, and that has to do with, well, federal law.

Interestingly, the folks in Tallahassee expressly preempted counties and municipalities from intruding into their prerogative on medical marijuana. Doesn't the same argument obtain with respect to the federal government's preemption of the states by means of ascribing Schedule 1 narcotic status to marijuana and then, therefore -- and a finding -- which, again, I am not -- I'm not in a position to comment on the finding. But the finding that they have made is that it serves no medical purpose.

Do I agree or disagree? First of all, it doesn't matter. But, second, I don't know. But since -- since it's prohibited at the federal level -- and you've got the Tenth Amendment to the Constitution, which is the Supremacy Clause, and -- do we have any authority to do what we're doing? And that's a genuine question that I'm asking. And I'm going to turn to Ms. Ashton and ask her to comment on federal law.

MS. ASHTON-CICKO: Well, the State of Florida does allow medical marijuana, and it went to the voters who voted that they wanted medical marijuana. So the legislature is giving the county an opportunity to allow it to be dispensed in the county or not depending on how the local government wants to handle it. As to the federal law, that will be up to the federal law enforcement agencies to enforce it if they desire to.

CHAIRMAN FRYER: All right. So -- but you don't disagree with me that it's illegal under federal law, or do you disagree with me?

MS. ASHTON-CICKO: I'm not going to get into whether or not federal law, in this instance, preempts state law. We have legislators who -- and voters who allow it. There are states across the United States that allow both recreational and medical marijuana, you know, despite the status of the federal law. So, you know, the county has the opportunity to ban it or allow it to be dispensed, and we're the regulators for zoning.

COMMISSIONER KLUCIK: I take your point that I think if the federal government -- if we had a federal government that wanted to prosecute the use of marijuana in Florida, which is allowed under the state constitution and this legislation as well, that they could. It seems to me that, you know -- and that's the concern is that since that is the case, that that actually could be prosecuted, theoretically. It's doubtful that they would -- that you're concerned that since we would be in direct violation of federal law, that the fact that the state law contradicts federal law in this case seems to be established that the federal government does relegate narcotics, and that this is still a narcotic.

CHAIRMAN FRYER: So, really, what we're resting our authority or connecting our authority to is that this current federal administration has decided or apparently has decided not to prosecute but, nonetheless, it is still unlawful under federal law. And I'll ask my --

COMMISSIONER KLUCIK: So we would be approving federally -- we would be approving dispensaries that are in violation of federal law, essentially; that's your concern?

CHAIRMAN FRYER: That's my concern, yeah.

COMMISSIONER SHEA: What's the advantage of doing it? Why do we want to do it other -- I mean, is there an advantage to the county? I mean, it's a 15-minute drive up to Bonita Beach Road where they have more than enough dispensaries. What's the advantage to having it here and taking on some of those issues that Ned's talking about?

CHAIRMAN FRYER: I'd be interested to hear from Commissioner Vernon, who's also a lawyer and thinks about things kind of the way we do. And I'm not asking for --

COMMISSIONER VERNON: Thanks, Commissioner. This is just what I want to do at 6:00 at night.

CHAIRMAN FRYER: I'm not asking for your opinion --

COMMISSIONER VERNON: I think I got a C in constitutional law, so I wouldn't -- and

that was 30 years ago. So I don't think I'd rely on me.

I guess my thought -- because you know me, I'm always trying to take stuff in a practical sense. I'm not that worried about that unless it involves some kind of federal funding we're going to lose. But there's so many states that are ahead of us on making this legal that it doesn't really worry me. Plus, although it might not be technically right, as a practical matter, I think if the federal government comes looking for somebody, they're going to look for the State of Florida and not a particular county.

So I feel like, as a practical matter, I more to -- if I have to answer to somebody, I want to answer to our governor, our state lawmakers, as opposed to the federal government. So that's -- that's not a very technical analysis of it, but as a practical matter, I'm not that concerned about that unless somebody tells me we could lose a bunch of federal funding as a county. That would scare the bajeebers out of me, but I don't see that happening.

CHAIRMAN FRYER: Yeah. Certainly not under this administration.

Well, I think my question has been answered in the sense that we're relying on the current administration's apparent decision not to prosecute rather than whether this is lawful or unlawful.

COMMISSIONER KLUCIK: Are you worried that we're going to be strung up under the guillotine some day if we approve this?

CHAIRMAN FRYER: I'm just -- I'm just wanting to put this issue out for -- because there was nothing in the material about federal law, and I think it's a discussion that we -- was entirely proper for us to have. And I'm not sure how I'm going to vote on this, but I think that that's just something that we have to think about.

Mr. Henderlong.

MR. HENDERLONG: Okay. So the final -- let me go back one second here.

So those are your three options: Deny, approve the amendment, or approve with conditions.

And we want to let you know that this is tentatively scheduled in two daytime hearing meetings before the Board on October 11th and the 25th. We also have coming up before the Board a request to waive the nighttime meeting in lieu of the fact that the Planning Commission is holding a nighttime hearing. In terms of our LDC requirement, that's our procedure and process.

So with that, we turn it over to you for any questions -- further questions from us and public comment.

CHAIRMAN FRYER: All right. I want to find out before we have a further discussion, again from Mr. Youngblood, remind me the numbers, speakers here and online.

MR. YOUNGBLOOD: We have nine in-person speakers, but we have two registered that are ceding time to folks who are not here yet.

CHAIRMAN FRYER: Okay.

COMMISSIONER KLUCIK: Mr. Chair?

MR. YOUNGBLOOD: And we have two online.

CHAIRMAN FRYER: Commissioner Klucik.

COMMISSIONER KLUCIK: Yeah. I would just go ahead and like to ask a few questions.

So I notice -- we have the -- you didn't speak to it, the Florida auditor, the health report, Department of Health report. Can you speak to that at all and, you know, what the general -- it seems as though it's not a very favorable report.

MR. HENDERLONG: That was a piece of evidence and document that were submitted by the -- from the general public. You'll hear from Ms. Verona [sic] Little about that. She can go further into detail on it. Staff did not review that nor are we taking a position on it. It's just a technical report.

COMMISSIONER KLUCIK: Who was the witness that you mention?

MR. HENDERLONG: She will be speaking, Mrs. Little. Veora Little. She's here.

COMMISSIONER KLUCIK: Could she raise her hand just so I know who she is.

MS. LITTLE: (Raises hand.)

COMMISSIONER KLUCIK: Okay. Thank you.

CHAIRMAN FRYER: We received emails from her as well.

All right. Commissioner Shea.

COMMISSIONER SHEA: Well, I'll ask my same question again. I don't quite get what is the upside of approving? What is the downside of disapproving?

COMMISSIONER FRY: I would say we have --

COMMISSIONER SHEA: Other than that somebody decided we should do this.

COMMISSIONER FRY: I think it's a very good question. I share the question, but I think that I would look to some of the public comment and additional speakers to try to fill in those gaps.

COMMISSIONER SHEA: Well, I'm talking about us. Our staff has recommended this.

CHAIRMAN FRYER: They're not recommending.

COMMISSIONER HOMIAK: Not recommending.

MR. HENDERLONG: No, we're not. We were directed by the Board to bring it back to you.

COMMISSIONER SHEA: Oh, so the --

MR. HENDERLONG: Yes. And just to clarify that, I can add a little more background why there is no staff recommendation. At the time when it was brought up in June before the Board, this is when Mr. Callahan had -- it became known to the Board -- he had been hired by the previous County Manager. He did some consulting work with a medical marijuana treatment facility, and Commissioner Taylor was concerned that there was an ethical question that any staff member might have a relationship, could that open it up.

And Mr. Klatzkow went on the record saying, we'll set the record very clear that when this comes back, direct the staff to bring it back in its other form, re-vet it through DSAC and the Planning Commission, but there shall be no recommendation from any of the staff members.

CHAIRMAN FRYER: And I think that was prudent advice.

Commissioner Vernon.

COMMISSIONER KLUCIK: Mr. Chairman?

COMMISSIONER VERNON: Yeah. This is certainly not a comprehensive answer, but -- and I think it may be affected by -- and informative to hear from everybody. But I'm guessing -- I don't know this. I'm guessing the reason there's 10 in Bonita Springs out of 28 in Lee County is because a lot of people from Collier County are cruising up there to do it, and that means there's a want and a need for it in Collier County. So I think that's the reason we ought to consider doing it.

And I think the reasons considering not to do it is you've got Rambosk saying it's a bad idea, you know, and there's certainly people who believe that it's a slippery slope to go down, and do we really want to go down that road if we have the right to ban it altogether. That's me trying to answer your question.

CHAIRMAN FRYER: Thank you.

Commissioner Klucik.

COMMISSIONER KLUCIK: Yes. Let's see. What was my question? I forget it because you were saying something compelling.

CHAIRMAN FRYER: Well, we'll be here all evening.

Commissioner Fry.

COMMISSIONER KLUCIK: I'll do my best.

COMMISSIONER FRY: I just feel that we're in deliberation earlier than we should be. We should take all the input in, and then I think that question is something that we discuss once we have the full information. So we're just -- it's conjecture now, my personal opinion.

COMMISSIONER KLUCIK: I remember now.

CHAIRMAN FRYER: Commissioner Klucik.

COMMISSIONER KLUCIK: So I guess I'm a little frustrated because it seems as though now we're denied the staff's professional opinion and -- you know, because one person on the staff was, I don't know, caught doing something that seemed like it was not right. And I just think that that's sad that we can't have that input. That's -- you know, we base our decisions on staff input, and now we don't have it. I just -- I wouldn't go that route, but --

COMMISSIONER FRY: We have to think for ourselves tonight.

COMMISSIONER KLUCIK: Yeah.

COMMISSIONER SHEA: At this time; at this hour.

COMMISSIONER FRY: At this time of night.

CHAIRMAN FRYER: Thank you.

Well, I think the point that has been made is perhaps now's the time to hear from the public. And so without objection, we will do that.

Mr. Youngblood, who's up first?

MR. YOUNGBLOOD: Steve Brooder is going to be our first speaker, followed by Veora Little.

MR. JOHNSON: Mr. Chair.

CHAIRMAN FRYER: Yes.

MR. JOHNSON: Eric Johnson here. I think it would be appropriate if you reminded the public how many minutes they're allowed to speak.

CHAIRMAN FRYER: Planning Commission, what's your pleasure? The norm is five minutes, but in some cases we've gone to three.

MR. HENDERLONG: And if it would help time, maybe have the second speaker on call up here at this podium. That will help move it along a little bit.

CHAIRMAN FRYER: Yeah. That's a good idea.

COMMISSIONER VERNON: I'm okay with five, because I think there's not that many, and it seems to be an issue we need to hear.

CHAIRMAN FRYER: Okay. Five it is. And we'll ask Mr. Youngblood to mention two names so then we have the batter up at the other podium.

Go ahead, sir. State your name.

MR. BROODER: Okay. Steve Brooder. I'm the chief executive officer at St. Matthew's House. Good evening, Commissioners.

I'm here really on behalf of our board of directors, our leadership team, and our program staff to state St. Matthew's House opposition to lifting the ban or approving the amendment, whichever way we want to phrase it.

We're opposed to having the medical dispensaries in Collier County. First, some facts. And, Mr. Chairman, you're right, the DEA considers marijuana a Schedule 1 drug, the same as heroin, LSD, or extasy, and says it is likely to be abused and is lacking in medical value.

The FDA has only approved marijuana for treatment of two rare and severe forms of epilepsy. The use of marijuana for other conditions is not proven. Also it's important to note that the FDA does not oversee medical marijuana as it does other prescription medications. And it's my understanding that if a Florida county allows medical dispensaries, the county loses some control. Enforcement and compliance goes to the state. And I think throughout some of the presentation, that that can become clear.

This also means that the amount of THC and other ingredients in the marijuana that is sold through county dispensaries is not monitored locally. Marketing and advertising may not be controlled, and from firsthand testimony, the marijuana purchaser is not asked about any medical condition, other drugs that they may be taking, and there's no blood test.

It's the THC in marijuana that produces the feeling that people get when they smoke or consume marijuana. THC acts on specific brain cell receptors. Marijuana overactivates parts of the brain that contain the highest number of these receptors.

So the content of THC, not long ago, was 2 or 3 percent. The National Institute on Drug

Abuse considers marijuana high in potency when it contains more than 10 percent THC. Today the average content of THC is 14 to 16 percent, and we see some products containing 30 percent and some as high as 80 percent THC. Some vaping devices and edibles and wax can contain nearly 100 percent pure THC.

Consuming these high levels of THC put people at higher risk of triggering psychotic episodes and becoming addicted. A report published by the Lancet Psychiatry just two days ago at Fox News found high cannabis potency products are associated with a greater risk of psychosis and addiction called cannabis-use disorder. Other side effects of marijuana use included altered senses, altered sense of time, changes in mood, difficulty with thinking and problem solving, impaired memory, delusions, depression, dizziness, accelerated heartbeat, hallucinations, and psychosis. The National Institute on Drug Abuse says marijuana can be addictive and is considered a gateway drug to using other drugs.

A new Gallup poll just done in July shows the number of people smoking marijuana is at the highest level ever recorded, and more people smoke marijuana today in this country than smoke cigarettes. A recent study in the journal called *Addiction* also found that the use of marijuana is increasing sharply across the country and is prompting major public health concerns. The National Institute for Health study finds that Americans are using more marijuana and hallucinogenic drugs than ever before.

St. Matthew's House --

CHAIRMAN FRYER: Mr. Brooder, ordinarily you'd be at five minutes, but since you're a representative of an organization that's right in the center of this, I want to allow you more time. But tell me how much you need.

MR. BROODER: I'll be very quick; 30 seconds.

CHAIRMAN FRYER: Okay. Thank you.

MR. BROODER: St. Matthew's House operates the only long-term residential addiction recovery programs in Collier County. We estimate that as many as 80 percent of the men and women that enter our programs have used marijuana before they moved on to alcohol or other harder substances. At this time we intake about 20 men and women every month into our recovery program, and there's a waitlist today of 56. Our homeless shelter is screened for drug use, and marijuana commercialization --

COMMISSIONER KLUCIK: Mr. Chairman?

MR. BROODER: -- has a direct --

CHAIRMAN FRYER: Commissioner Fry, and then I'll get to you.

COMMISSIONER FRY: Well, I was letting him finish.

CHAIRMAN FRYER: Yeah, let's --

COMMISSIONER KLUCIK: Well, I wanted to find out more about what he just said.

CHAIRMAN FRYER: Okay. Then go ahead.

COMMISSIONER KLUCIK: So do you have any of your clients -- is that the best word for them?

MR. BROODER: That works.

COMMISSIONER KLUCIK: Yeah, okay. That are -- that, you know, have -- have had their problem exacerbated by this legalization, expressly, like their source was --

MR. BROODER: They start with marijuana, and that moves on to other substances.

COMMISSIONER KLUCIK: No, but I mean medical -- like legal marijuana, that legal marijuana is what caused their problem?

MR. BROODER: Some may.

COMMISSIONER KLUCIK: Okay.

MR. BROODER: Yeah, some may.

But I said our homeless shelter is also screened for drug use, and marijuana commercialization has a direct impact on the demand for homeless services.

New research through 2017 data shows that states passing medical marijuana laws saw a

23 percent higher-than-expected death rate due to opioids. Research shows that children that live near pot shops have more access to marijuana and are more likely to use it and other drugs. The densities of pot shops and delivery services was positively correlated in studies to frequency of child abuse and neglect. And communities that have more access to marijuana see an increase in traffic accidents and hospitalizations.

For all these reasons and more, St. Matthew's House opposes medical dispensaries in the community. Thank you, Commissioners.

CHAIRMAN FRYER: Thank you.

Commissioner Fry.

COMMISSIONER FRY: Mr. Brooder.

MR. BROODER: Yes.

COMMISSIONER FRY: First of all, thank you. You've been here before, and we sure appreciate what you and St. Matthew's House do.

You've given a lot of data, a little bit of data relevant to St. Matthew's House in terms of you feel that it's been a gateway drug for a lot of your clients to move on to harder substances. There are dispensaries in Bonita we've talked about. I just wondered if your staff -- I guess I'm looking for a little bit more personal St. Matthew's oriented input in terms of how it has tangibly affected your population of clients, your staff in terms of, as Robb mentioned, the legalized medical marijuana that's available as close as Bonita. So there's -- certainly some of your residents have had access to that, and I just wondered if you could give us some tangible results or impacts on St. Matthew's House.

MR. BROODER: Well, because it is a Class 1 drug, we don't allow the use, even if it's medical marijuana, anywhere in our programs or with our staff. So people may have gone to the dispensaries outside of Collier County before coming to us or before being in our employ, but we don't permit it in the programs or among our staff.

COMMISSIONER FRY: And your clients are tested, and if they test positive for marijuana, they're not -- they do not stay with you?

MR. BROODER: That's reason for discharge, right. So we do drug screens and Breathalyzer daily. So those -- if those pick up a trace of marijuana, that's a reason for discharge.

COMMISSIONER FRY: So, in effect, medical marijuana, easy accessibility to it, would -- would, I would say, disqualify additional people that might be -- start to use it when it's more accessible from your services?

MR. BROODER: It could, yes, it could. If it was more available, that could allow more people access which could preclude them from our programs, yes.

COMMISSIONER FRY: Thank you.

CHAIRMAN FRYER: Thank you.

Commissioner Shea.

COMMISSIONER SHEA: Just a quick clarification. Did I hear you -- at the beginning you quoted a lot of numbers, and you said, percent THC. THC is usually measured in milligrams, so I'm not sure what that number is, percentage.

MR. BROODER: It's the content of the ingredients, so the percentage of THC --

COMMISSIONER SHEA: So it doesn't tell you how much THC you're taking?

MR. BROODER: In milligrams? I'll let a doctor speak to that.

COMMISSIONER SHEA: No. I just was confused by that. I've never seen it rated in percentages.

MR. BROODER: So I think the relation is when 2 to 4 percent maybe 10, 20 years ago, now it's 10 to 14 percent, and we're seeing much higher concentrations of THC.

COMMISSIONER SHEA: Again, THC doesn't mean anything, percentage. It's the milligrams. If you go buy it, it doesn't say percentage on it. It says milligrams.

MR. BROODER: The higher concentration of THC leads to these addictions and psychotic episodes because it's -- it's that ingredient in the marijuana that attaches to these brain

receptors, which causes all the issues. So the higher the concentration of THC the more likely you are to have problems.

CHAIRMAN FRYER: Another witness may be able to give us the milligrams.

COMMISSIONER SHEA: I just wanted to know if the numbers he was quoting was actually milligrams instead.

CHAIRMAN FRYER: Yeah.

Commissioner Vernon.

COMMISSIONER VERNON: Yeah. You used the -- and thank you for what you do. I'll echo what Karl said. But you used the term "pot shop." Is that just your terminology for a dispensary, or is that something different?

MR. BROODER: It's a common term in the literature and the studies, so they refer to marijuana dispensaries as pot shops.

CHAIRMAN FRYER: Okay. Anybody else have anything at this point?

(No response.)

CHAIRMAN FRYER: Thank you, Mr. Brooder.

MR. BROODER: Thank you, Commissioners.

MR. YOUNGBLOOD: Mr. Chairman, before we move on to Ms. Little, I have a speaker slip for Yvonne Isecke or Isecke. Yvonne, are you here?

MS. ISECKE: Here.

CHAIRMAN FRYER: So we need --

MR. YOUNGBLOOD: Okay. Are you ceding time to somebody?

MS. ISECKE: Yes.

MR. YOUNGBLOOD: Who?

MS. ISECKE: Veora Little.

MR. YOUNGBLOOD: Okay. Okay. Our next speaker is going to be Ms. Little, Veora Little. She is being ceded time by John Little, by Hari Jacobsen, and by Yvonne Isecke.

CHAIRMAN FRYER: Fifteen plus five is 20. So you have until 6:38.

MS. LITTLE: I will not take that long.

CHAIRMAN FRYER: Okay.

COMMISSIONER VERNON: Can you grab the mic.

MS. LITTLE: Okay. Can you hear me?

CHAIRMAN FRYER: Yep.

MS. LITTLE: Hello, good afternoon, or good evening by now, Chairman Fry [sic], Vice Chairman Homiack.

COMMISSIONER HOMIAK: Homiak.

MS. LITTLE: Homiak. Hello, everybody and members of the team. I know you're all volunteers, too, so this is a tough job, folks.

My name is Veora Little. I live at 7442 Little Lane, which is in Mooring Park Grand Lake. I am in District 4.

I have been a certified registered nurse anesthetist and citizen here in Collier County for 32 years.

Today I come in front of you with a grave concern about our community. Changing the Land Development Code to allow the sale of marijuana and establish dispensaries would change the beautiful atmosphere of this public -- of our community and would -- and would be contrary to the interests of public safety, wellness, and the welfare of our citizens.

While I certainly have great compassion for those who legitimately are helped by forms of marijuana in Collier County, it is not necessary for pot shops to be here because, as you've already asked the question, how do they get it. And, you know, there are actually 49 dispensaries -- I think 49 is the number in Lee County. There are 12 in Bonita. If I'm wrong, you can correct me, and one on Marco Island, and they deliver. They deliver right to your home. They'll come to your front door, so you can order them on the phone. You do not have to go once you get your

card.

So my plea only is to not have pot shops in Collier County. Basically, please do not pass this.

I'm going to pass out a letter. Mr. Henderlong has two things in the letter. First of all is a letter from Mayor Heitmann, and I'm going to read what it says. The second is -- Mr. Fryer, you'll appreciate this, is the update on March 2, 2022, from the DEA. It has actually the regulations why marijuana is a controlled substance to this day, the federal law, okay.

CHAIRMAN FRYER: I think it's more than a controlled substance. I think it's an illegal substance.

MS. LITTLE: All Schedule 1 drugs are illegal.

CHAIRMAN FRYER: Yeah.

MS. LITTLE: Heroin and --

CHAIRMAN FRYER: Morphine would be a controlled substance. Heroin's an illegal -- (Simultaneous crosstalk.)

MS. LITTLE: Morphine is a Schedule 2 because it is a drug that is used clinically. Used it in anesthesia all the time, so -- but there's no medical use for marijuana, which is a plant, and I'm going to go on and discuss some of that.

But Mayor Heitmann says, I urge you to be extremely cautious in expanding or allowing medical marijuana dispensaries in Collier County. Short-term and long-term effects of marijuana have been studied, and it has been shown that it can be a gateway drug. As always, we should be looking at the safety and well-being of our community in all our policy making.

Tonight we are here about zoning and whether we need or want pot shops or marijuana dispensaries in Collier County. They're pot shops. Marijuana is a harmful, addictive drug, okay. It can change and damage a child's growing brain.

The latest data, which just came out yesterday, shows a 23 percent increase in opioid deaths this year. Our county -- our Collier County Medical Examiner, Dr. Coburn, states, virtually everyone who comes into my facility dying from a drug overdose has a history of marijuana use. That is out of her mouth. She supports this for us.

Once the pot shops are approved -- again, you've heard this time and again -- there are no limits. No local control at all. It becomes a state-run program, and the Health Department is the department that runs this. It's not law enforcement. It's not any -- it's the Health Department, okay.

The compliance and enforcement is something that has never ever been handled by the Health Department before, so they can't enforce, they can't -- they can neither control or enforce. Just like, you know, the law enforcement handles the -- you know, the alcohol and regulates all that. They go in and make checks to see if, you know, the kids are buying or whatever. There's no control and no supervision through the Department of Health because they don't have enough staff. It's a very, very important thing to remember that they're not monitoring what goes in and out of those shops.

Okay. And this statement comes directly from your website. It is the responsibility of the Board of County Commissioners to provide services that promote health, safety, and welfare along with the quality of life for its citizens. For the Commission at any level to allow pot shops without the ability for the county to determine for itself what kinds of restrictions would be applicable for this county would be irresponsible. We have to know what's going on before we say yes. I would also -- I'm just going to end with a couple of definitions because I find that this --

CHAIRMAN FRYER: Commissioner Klucik has a question or comment.

MS. LITTLE: Sure.

COMMISSIONER KLUCIK: Yes. If you would -- I don't know if you were here -- well, I think you were here because you raised your hand. I'm looking at that auditor.

MS. LITTLE: Yes, sir.

COMMISSIONER KLUCIK: The Florida auditor, the health -- Florida Department of

Health report.

MS. LITTLE: Yes.

COMMISSIONER KLUCIK: And if you are -- are you planning to speak to that specifically or no?

MS. LITTLE: No, sir. I think somebody else is in the room to speak to that Health Department report.

COMMISSIONER KLUCIK: Ah, okay. Only because the findings there are -- they support everything you're saying.

MS. LITTLE: Yeah.

COMMISSIONER KLUCIK: But that's -- okay.

MS. LITTLE: Thank you. I don't -- I'm not real knowledgeable about that.

COMMISSIONER KLUCIK: Okay.

MS. LITTLE: That was -- thank you. Okay.

So I'm going to give you a couple definitions, and you can ask any questions about that if you'd like.

The difference between marijuana and medicine. Marijuana is a plant, okay. It is a plant. Ninety percent of our medications are made from plants, but it's just a plant. So people smoke the plant for many number of -- whatever.

A medication is a compound that's extracted from a source, which is often a plant, that is prepared, dosed, and purified and then approved by the FDA. Some plants are poison as well as good for you. Belladonna stops your heart from beating. Now they make Inderal or beta-blockers out of them.

Okay. The difference between a recommendation and a prescription. You cannot issue a prescription for marijuana. You have to -- you have to offer a recommendation. A recommendation is a form that's filled out by a physician with two hours training that costs \$199 per person which has to be renewed every year. Sorry, every seven months. There's also a \$77 charge which you have to pay every year to re -- to reissue your marijuana card. Okay. That's for the state to register you.

But because marijuana is illegal on the federal level, they can't write a prescription because they can't document that because it's not legal. So they go to a recommendation by a doctor, again, who has two hours' worth of training.

Now, a prescription is a legal document written by a physician in preparation -- for a preparation [sic] that has been produced, dosed, and tested by the FDA. Drugs made from marijuana that are FDA approved -- there are actually three of them, and Mr. Brooder brought them up.

Marinol is a synthetic version of THC. THC is the hallucinogenic portion of marijuana. It prevents nausea and vomiting for chemotherapy patients. It's been a long-standing use.

There's another medication called Syndros, FDA approved, that's an oral treatment for anorexia. And then Epidiolex, which is a treatment for Dravet syndrome, which is a severe disorder for seizures.

Again, marijuana remains a federally illegal Schedule 1 drug because of its high potency abuse without current acceptable medical use.

And the last definitions I'm going to give you are the difference between a pharmacy and a pot shop. A pharmacy has a registered and trained pharmacist with six to eight years of training. A pharmacy tech has two years of training. This training allows them to handle medications according to the law. A pot shop or a marijuana dispensary are a place to go get marijuana products. You choose your own, and there's nothing prescribed. Nothing prescribed. It's your choice. And there is nothing -- nothing -- when you go to the doctor and get your pot card, he asks you -- because I've done this just for research. It's been pretty alarming.

He said, why are you here?

I said, I have arthritis.

He said, well, can't you do better than that?

I said, well, I have anxiety, too.

Okay. That'll do, and he starts writing it down.

He did not ask me if I was on medication. He did not ask me if I had high blood pressure.

He didn't ask me nothing. He signed the card.

And then I said to him, what do I do? How do I get something, you know?

And he goes, oh, go outside and talk to the girls out front. They'll tell you what to do.

I go, okay.

CHAIRMAN FRYER: Commissioner Vernon.

MS. LITTLE: Sir.

COMMISSIONER VERNON: I didn't mean to interrupt you.

MS. LITTLE: That's all right. I'll finish, and then you ask a question.

COMMISSIONER VERNON: Well, I'll go ahead and ask it.

MS. LITTLE: Sure.

COMMISSIONER VERNON: And I'm just showing my ignorance here. So I get a card from a doctor in order to get something from the dispensary, correct?

MS. LITTLE: Correct.

COMMISSIONER VERNON: And then I go to the dispensary, and whatever they sell, with that I can get?

MS. LITTLE: Correct.

COMMISSIONER VERNON: Okay.

MS. LITTLE: They have -- just yesterday they did an emergency -- I don't what you would even call it -- an emergency bill to limit the amount of THC that you can buy. And I don't know much about the percentages versus the milligrams, but they limited a person's ability to get marijuana to 24,500 milligrams in 70 days. Just saying.

So the pot shops -- so when I went to the pot shop, they said, you know, talk to the girls up front. They're going to tell you what to do and where to go.

So I had to take my husband with me because I was kind of anxious to go. But there was a bud tender who sells, okay. The bud tender runs the store. He was the manager of the store. The bud tender has no experience, no training, no certification. He's just an employee, okay.

CHAIRMAN FRYER: What word are you using?

COMMISSIONER VERNON: Bud tender.

MS. LITTLE: Bud tender. It's called -- the guy that runs the behind-the-scenes things at a pot shop are called bud tenders.

CHAIRMAN FRYER: Okay. Thank you.

MS. LITTLE: And the only thing that they have to have is that they have to have a criminal record background check, and they can't be a felon. That is the only description.

CHAIRMAN FRYER: Thank you.

MS. LITTLE: Please do not allow this Land Development Code to be changed to allow pot shops in our beautiful Collier County. Thank you.

CHAIRMAN FRYER: Thank you very much.

Next speaker.

MR. YOUNGBLOOD: Our next speaker is going to be Jonathan Maines. He has been ceded time by Larry Fieldhouse.

CHAIRMAN FRYER: All right. And who will succeed him at the podium?

MR. YOUNGBLOOD: Is -- let's see. Kathy Lowers is going to be our next speaker.

CHAIRMAN FRYER: All right. So she can be prepared at the other podium.

Go ahead, sir.

MR. MAINES: Could I pass a couple handouts to you?

CHAIRMAN FRYER: Yeah, sure.

MR. MAINES: I'm sorry I didn't make enough for everybody. But really the first couple

paragraphs are the only -- I'll start on the other side.

CHAIRMAN FRYER: Give your name again.

MR. MAINES: Yeah. My name's John Maines. I'm a 33-year resident of Collier County. I currently a licensed Florida realtor, but I'm also a retired Naples police lieutenant of 21 years.

CHAIRMAN FRYER: Now, you've been ceded some time; did I hear that correctly?

MR. MAINES: Yes.

CHAIRMAN FRYER: By whom?

MR. MAINES: The gentleman right there, I believe, in the white shirt. I don't recall his name.

CHAIRMAN FRYER: Raise your hand if you've --
(Raises hand.)

CHAIRMAN FRYER: Thank you very much. Please proceed.

MR. MAINES: Okay. So first of all, I'd just like to congratulate the Collier County Sheriff's Office, Sheriff Rambosk, for being recognized as making our county one of the safest places to live in the country. I would also like to acknowledge you folks and the Collier County Commission and prior commissions for the beauty that they've created out of our county. I mean, I've watched the transformation since 1989 when I moved here. Fabulous.

And we never want to jeopardize these two benefits. In fact, every citizen in Collier County should fully support our leaders that continue to make this happen.

There was an article written by *Washington Times* in 2014. I submitted it to the DSAC. I didn't bring one with me today. But basically that article said that George Soros financed 80 percent of the campaign to legalize medical marijuana in Florida. It went on to say that spokesman, John Morgan of Morgan & Morgan fame, was that campaign's major spokesperson.

Now, George Soros, if you don't know who he is, he's a globalist Marxist billionaire who wants to destroy the capitalist society of the United States as we know it, while John Morgan has bragged on TV about suing tobacco industries for billions of dollars. And if you think that these two guys have the best interest of our citizens in mind, you're mistaken. They don't.

What they're trying to accomplish, and they've already accomplished step one, is to get it passed. Step two is to try to get infrastructure set up around the state of Florida, and that infrastructure's medical marijuana dispensaries. And as you could see today, there's no limit to the number of dispensaries they can put up in Collier County as long as they're located in the right locations.

And what's going to happen -- and it's not a question of if. It's when it's going to happen. When Florida at some point down the line decriminalizes all these medical dispensaries, yeah, they're going to become pot shops.

And the amount of homeless people that are going to be coming into our county is going to be overwhelming. Just as an example, I don't know if -- what happened to the citizens when government was either bought or sleepless in Seattle, but I'm just going to take you down the path of a little history with the state of Washington and Seattle in general.

In 1998, the State of Washington passed the medical marijuana bill, and over the next 14 years that bill got amendments to it, and it increased the amount of marijuana people could have, they could grow, they could distribute to the point in the late 2000s, like 2010, the City of Seattle, the police department, would not enforce any marijuana laws, or very few, because they couldn't differentiate who had a legal right to have it and who didn't, so they just quit doing it.

CHAIRMAN FRYER: I see that Commissioner Klucik is signaling. We've gone an hour and a half now since our last break. I'm going to ask the court reporter if after this speaker we have a break, would that work?

THE COURT REPORTER: (Nods head.)

CHAIRMAN FRYER: Thank you. Okay. Commissioner Klucik.

COMMISSIONER KLUCIK: Yes, Mr. Chairman.

I just wanted -- to your point that you made about they're going to -- the dispensaries are going to become pot shops, they actually have -- for 2024 they actually have an initiative already going and, if approved, the measure would allow existing cannabis companies to begin -- medical cannabis companies to begin selling marijuana to adults over 21. So you're -- I mean, at least according to the news reports and the petition -- the petitions that they're circuiting now to have this new initiative, that is exactly what would happen. So it's not -- it's not a far-off fear. It's a fear that could be a concern that might happen very soon.

MR. MAINES: And just to kind of reiterate that point, I believe Marco has it in their ordinance that once marijuana's legalized or decriminalized in the state of Florida, that automatically transitions to a pot shop where they can sell everything. So it's already in our county.

In any event, on December 6th, 2012, the state of Washington became the first state of the United States to pass recreational-use marijuana. The article that I passed out to you a little while ago was written by a gentleman by the name of Christopher Rufo for the *City Journal*, a publication in the Washington state. This article is written in 2018, six years after the recreational marijuana passed. I'm just going to read you the first couple paragraphs of that, and then I would encourage you all to just read through the entire article on your own, and it's very interesting.

But, anyway, the article goes on to say, Seattle is under siege over the past five years -- and, again, this is written in 2018. The Emerald City has seen an explosion of homelessness, crime, and addiction. In its 2017 point-in-time count of the homeless, King County Social Services Agency all found -- found 11,643 people sleeping in tents, cars, and emergency shelters. Property crime has risen to a rate two-and-a-half times higher than Los Angeles and four times higher than New York City's. Cleanup crews pick up tens of thousands of dirty needles from city streets and parks every year.

At the same time, according to the *Puget Sound Business Journal*, the Seattle metro area spends more than one billion dollars fighting homelessness every year. That's nearly \$100,000 for every homeless man, woman, and child in King County, yet this crisis seems only to have deepened with more addiction, more crime, and more tent encampments in residential neighborhoods. By any measure, the city's efforts are not working.

And kind of just to conclude with that point, in January of 2020, Seattle did a one-day homeless count, and it showed they still had 11,751 homeless people even after spending a billion dollars a year for several years, and they did that count in January. Now, I can tell you, the weather in Naples is a lot nicer in January than it is in Seattle, Washington.

The state of Washington's problems started with the passing of medical marijuana and dispensaries. It was a gradual problem until the passage of the recreational use of marijuana. Then the problem quickly deteriorated.

From a crime standpoint, people think that police departments and sheriff's offices have a magic wand to deal with homeless people, drug addiction, and so on and so forth. We don't have -- or they don't have magic wands. If you have one homeless guy and, say, he's hanging out at a Walmart store and he's out there, whether he's passed out or not, that eats up so much of that officer who's assigned to that district, his time, it's unbelievable. He cannot go out and patrol speeders. He can't go look for burglars. He can't do all kinds of things because he's tied up with that one guy.

Now, can you imagine if we had 11,000 homeless people and the needles that Seattle does. That's what's going to happen in about 10 years after the state passes or decriminalizes medical marijuana. That's a prediction.

And I'd be really interested to see what Sheriff Rambosk wrote in his letter. I don't know if we'd be able to read that here, if I could get a copy of it. It would be very interesting. He's a super smart guy. He does a great job, and I was proud of him to put that out there, because I know a lot of sheriffs don't have the guts to do that.

Some of the things you might want to consider as well, where are some of the popular

places that some of these homeless people will set up camps? Well, I can tell you working 21 years at the city, fortunately we'd only have a couple of people that we would deal with over the winter months. But here are some of the typical places we'd find them: At the city beach ends under the boardwalks where you take little steps out onto the stand. They sleep under there; they sleep in the woods; they sleep in the county and city parks; they sleep under the jungle gyms; the doorways; the bathrooms; nearby wooded areas; they also sleep in unsecured construction sites, particularly if they have roofs on them; shopping centers that have overhangs, just to name a few.

I would just end with this: I, for one, completely reject the possibility of my grandkids stepping on hypodermic needles on the beaches, in the parks, because that's exactly what's going to happen if you guys -- if the County Commission votes to approve these dispensaries. When the State of Florida passes or decriminalizes marijuana, that's what's going to happen.

You guys have the opportunity to make your voices heard to the County Commission. Stop it. Don't let that bullet leave the gun, because once it's out, you're not getting it back, and we're going to have all kinds of problems.

CHAIRMAN FRYER: Thank you, sir. We're going to take a 10-minute recess, but I'm going to ask you not to go anywhere because when we come back, Commissioner Shea has a question or comment for you.

Stand in recess until 6:50.

(A brief recess was had from 6:40 p.m. to 6:50 p.m.)

MR. BOSI: Chair, you have a live mic.

CHAIRMAN FRYER: Thank you. Let's go back in session, please. And, Mr. Maines, Commissioner Fry has a question for you -- Commissioner Shea does, excuse me.

COMMISSIONER SHEA: So you used an example for Washington. Does anybody know anything about what's going on in Colorado, which came about right behind you? I came from Colorado, and I actually came here shortly thereafter. I don't hear a lot of those type of stories in Colorado, but I do know it's -- they walk around downtown streets, and it's very public. But I haven't heard a lot of strong negatives, but I haven't [sic] been out of touch. So I'm wondering if there's some more information -- because they're years ahead of where we are, and they're where you're talking about being in 10 years.

MR. MAINES: I don't think you're going to hear a lot of this from the mainstream media, is just my opinion, the Colorado's, the Portland, Oregon, where you can pretty much get everything from fentanyl to marijuana and not get any -- have any problems -- and there's probably a lot of political reasons for that.

I do have a friend who actually, a few weeks ago she -- well, she moved a few years ago from Denver to Naples, and she said, you know, I'm ashamed to say that I voted for recreational-use marijuana in Colorado, and I went back there, and she goes, it's a cesspool in Denver. But, anyway, I haven't been there, but I'm glad you brought that up.

One of the things that I'd like to compliment Rich on is he did a good job looking at the history of the medical dispensaries and any type of incidents with them. But I would say that's like looking at a swamp buggy before it hits the mud, and that's what you're looking at. You need -- somebody really should take a trip, in my opinion, from the Commission, or a couple of them, go to Seattle, check out the pot shops, see where we could be, because there's nothing that's going to prevent us from turning into that if they decriminalize marijuana.

COMMISSIONER SHEA: I would support that. I would support them going to Colorado as well, because I know what it was like before. I'd love to go back and see the difference, but --

COMMISSIONER VERNON: Let's go. Is it in the budget?

CHAIRMAN FRYER: Commissioner Vernon.

COMMISSIONER VERNON: Yeah. Just -- and this is completely anecdotal, and it's five years ago. But I jumped in an Uber in Denver. I was out there for a volleyball tournament for my kid, and I said, how's the marijuana going? And he was a young guy. And he goes, oh,

it's horrible. He said, everybody moved out here thinking, hey, I'm going to get a job -- all these young people -- and I'd love to have more young people in Collier County. All these young people moved here and said -- they said, okay, I'm going to move there, I'm going to get a job, and I'm going to have fun on the weekend.

And he said, they all forgot to get a job. They just moved here and had fun. It's funny, but it's not, because he was -- he was a guy of that age, and he's like, it's terrible. They're not working.

MR. MAINES: Yep.

COMMISSIONER VERNON: And that's very anecdotal.

I did -- a couple real quick. And it doesn't need to be answered by you, but somebody before we leave, Ms. Little said that they deliver. Are they delivering to Collier County?

MS. LITTLE: Yes, sir.

COMMISSIONER VERNON: Okay. And then also at some point, just a status of exactly what Marco Island did approve, didn't approve, because they have one.

CHAIRMAN FRYER: We can --

COMMISSIONER VERNON: It can wait till later.

CHAIRMAN FRYER: Do you want to call her up? You can.

COMMISSIONER VERNON: After you're done, I guess.

MR. MAINES: I just have one other comment. You know, I've been selling real estate now for 12 years. I pretty much --

CHAIRMAN FRYER: Just a moment, Mr. Maines. Commissioner Klucik has a question.

COMMISSIONER KLUCIK: I just want to make another anecdotal point, just in Michigan where I went to law school, so I went back up there a few weeks ago. And my wife and I were driving around and taking the roads that we used to always take and going back and forth into the center. You know, it's a university town, Ann Arbor. And I was just shocked at how, little by little, it evolved, you know, because it's legal recreationally there. Now, they have billboards like it's -- you know, appealing to people who want to just get high, and, you know, in the most base way, which advertising does, and that's -- that's what the main street is. It's all billboards for that.

And the pot shops are pot shops, and they're really just -- they're like -- I don't know. They just have the atmosphere that you would expect them to have. And I think we do have to worry about it deteriorating into that. I think -- we can't preserve our -- you know, prevent -- you know, if the state law changes and it's mandated that we have to have it everywhere recreationally, then there's nothing we can do about that.

MS. LOWERS: You can still ban it. Okay. Sorry.

COMMISSIONER KLUCIK: No. I -- no. Well, I'm talking about a future law that they wouldn't necessarily be able to still ban it. That's my fear. But at least in the meantime we do -- you know, the law does give us the autonomy to do what we want to do for our community in this county.

CHAIRMAN FRYER: Thank you.

Commissioner Shea.

COMMISSIONER SHEA: I just want to somehow, whatever we do, we put a recommendation together that we not live isolated, that we reach out to Seattle and Colorado that are years and years ahead of us and actually try and share some information with our peers.

CHAIRMAN FRYER: Thank you.

MR. MAINES: One last thing I'd like to just mention. Having been a realtor for 12 years, worked almost seven days a week for the last 12 years, I can honestly tell you, whenever I take a buyer into a community, if there's any sign that there's a criminal element there, heaven help us if we see a homeless person, they're not buying in there. Now, you -- again, 11,000 people. The people's property values in here are going to go in the toilet, so -- for whatever that's worth.

CHAIRMAN FRYER: Thank you very much.

Ma'am, you're on. State your name.

MS. LOWERS: Okay. My name's Cathy Lowers, and my husband and I have lived 15 years here in Collier, and we have six children, four teens and a 21-year-old and a 23-year-old. So we're at the age where this is a tsunami for these kids. I teach my kids to be drug free, but I will tell you something, a lot of their peers are just being devastated by this.

We have a teen vaping epidemic, and the numbers came out this summer that it was a big uptick. And you know what the average percentage of THC in the vapes is? Seventy percent.

And I'll tell you this: When I was 18 and 19 years old, I did work on two farms that grew pot, and it was about 2 percent in those days, recreational, that's what most baby boomers remember, and a lot of this tsunami is being fueled by a lot of baby boomers thinking, oh, that was just the 1 to 3 percent, no big deal, right?

Well, what these shops are selling is -- and several people have mentioned this -- up to 100 percent, okay. And what the teens are using continuously -- this is the scary thing, because it used to be periodic low-dose use. Now it's continual high-dose use.

And, you know, we have solid evidence that high THC is linked to suicide, and with youth we have the highest suicide rate. Even before COVID hit, you know this, that young teens and young adults have the highest suicide ever in the United States. And now you have a product that is linked solidly to that. It is linked absolutely, indisputably to schizophrenia, even in healthy people that don't have a genetic family predisposition, psychosis and violence that follows it.

So they often say, oh, you know, you can take pot, and you won't die from it. Well, there's been a lot of people that have killed people that are in psychotic states from marijuana, so that's not true.

So what I'm saying is for the sake of the youth, as a parent I'm saying, don't put these everywhere. And I know some -- I think the St. Matthew's House CEO mentioned there's been several studies that show when you put the physical shops there, people see it and use it more. And I -- the pot shops were quoted in NBC News saying we're chomping our bits to get into Collier, because they know that.

But especially youth are affected. And I'll just mention one study from Washington State University two years ago --

THE COURT REPORTER: Can you slow down, please.

MS. LOWERS: Okay -- two years ago that said, while there are restrictions against using advertising designed to target youth, it does appear to have influence to have these shops in their neighborhood. And they did a study on 13- to 17-year-olds that found study participants who live within five miles of a marijuana shop were more likely to report intentions to use.

So putting these everywhere -- and you don't have control over the number of them, okay. And people do get 24/7 statewide delivery to their home. There is really no reason to put these physical shops in here, okay. We're not denying anybody.

I'm not against real medical use for, you know, cancer or whatever, but what was done on the state level -- and this has been done in several -- in all the states that legalized was first it's medical, and the medical is really so loose that we're selling high THC, shatter, crumble, wax, all the drug dealer forms are sold in these shops.

So when you're inviting what you think are medical shops, you're actually inviting recreational shops in, okay. The average person, 71 percent voted for this, but when you ask people what they think are in these shops -- and probably all you thought that, too. You probably thought low-dose prescription. No. It's -- high-dose is -- the average thing that's sold in Florida is high-dose THC, high-percentage THC. And it's so -- I think the most common two were insomnia and stress. It wasn't, like, cancer patients.

So we're saying that -- I'm saying that as a parent we don't want these here. And I did come from -- so I was born in Florida, but we moved around places. I spent 16 years in California before we moved here, and I lived through the very first medical marijuana experiment ever done.

It was the first in the world, and it was in 1996. A lot of people think it was Colorado. It -- California was first, 1996.

This was funded entirely, as someone mentioned, by globalist George Soros. It wasn't a local movement. And it was the same thing we have now. You get a card, you go shopping and buy whatever you want.

So what happened -- you should understand the life cycle now, that currently in California 80 to 90 percent of all cannabis is sold by the black market, and this is true in all the states that have legalized first medical, because that's the life cycle. It starts out these guys with the flashy nice shops want to come in here, they're medical, and then they legalize as recreational, because then they know they can push it through.

CHAIRMAN FRYER: You have one minute.

MS. LOWERS: Then the cartels come in.

So I was just reading today Massachusetts, 90 percent of all cannabis sold, sold by the cartels. They promised us the black market would go. It's the opposite. The black market in California makes billions on this.

So when you're -- if you let them in here, your end result is letting in the cartels, and that is proven, okay. And I'm just saying right now you have the best of both -- the best -- best-of-both-worlds compromise. People get it to their house. Nobody's being denied. Nobody has to drive, okay. If they say, oh, we have to drive, that's not true. They all get it to their house, and we keep the shops out so the kids are not exposed to the storefront advertising, that we don't have these in every retail shop, et cetera.

So I would just say as a parent, please keep these out for the sake of our youth, and, you know, keep Collier County family friendly, which is why so many people moved here. Thanks.

CHAIRMAN FRYER: Thank you, ma'am.

COMMISSIONER VERNON: I had a quick question.

CHAIRMAN FRYER: Commissioner Fry.

COMMISSIONER FRY: Can you stay up there for just a moment, please?

MS. LOWERS: Yeah.

COMMISSIONER FRY: Just -- maybe I'm showing my ignorance, but you mentioned peers of your kids vaping THC?

MS. LOWERS: Oh, yes. It is the most popular thing now to vape.

COMMISSIONER FRY: Obtained through medical marijuana dispensaries?

MS. LOWERS: Yes. So that is a very popular way to get it. And I know my daughter is on Zoom, and she wants to talk about that, because she worked for the juvenile diversion program here, and she can talk more about that about how so many people are saying, I got it from my uncle's marijuana -- medical marijuana, I got it from my boyfriend's medical marijuana, because people say where -- the law enforcement will say, where did you get that from?

So just this week the -- was it the Florida Department of Health? Put an emergency order on to try to stop -- start limiting the amount -- I think Veora mentioned that -- of marijuana that people were getting because -- and I know Spencer Roach -- I don't have -- oh, here it is. Spencer Roach, who is the representative in Lee County, he's been really trying to reign the program back to medical, because he said right now we have a medical program -- I mean, a recreational program masquerading as a medical.

So on that note, he said that only 12 percent of the doctors -- they're getting it from 12 percent of the doctors, but he said even more alarming is the amount of marijuana each of these doctors is certifying per person. The top marijuana doctor in Florida is issuing 142,889 mgs per day, per patient. To put that in perspective, that would be the equivalent of taking 30 bottles of Tylenol per day.

So that's one of the problems with the program -- that's a very good question -- because you can get a lot more than you would use. So what do you do? And that's what he said. He says in here, where is all that marijuana going? So, yes, they're getting it from that, for sure.

COMMISSIONER FRY: Thank you.

CHAIRMAN FRYER: Thank you.

Commissioner Vernon.

COMMISSIONER VERNON: Don't run away. Take it as a compliment.

MS. LOWERS: Okay.

COMMISSIONER VERNON: What is the -- what is your understanding of the causation between the medical to recreational to cartel?

MS. LOWERS: Okay. So -- now, I'm not doing a conspiracy theory, but there was a globalist. His name is George Soros. He has funded almost every program 80 percent of the initiative here --

CHAIRMAN FRYER: Slow down a little bit, please.

MS. LOWERS: -- initiative here. And what they do --

CHAIRMAN FRYER: Ma'am --

COMMISSIONER VERNON: You've got to slow down.

CHAIRMAN FRYER: -- slow down, please.

MS. LOWERS: Sorry. I speak very fast.

COMMISSIONER VERNON: She has to write down what you say.

MS. LOWERS: So outside interests fund these, and they have, as I think the police officer, John Maines said, was there is a purpose behind a globalist coming in who has said that he wants to destroy America and he enters in these medical marijuana programs which are really recreational. So you just get your card, you get as much marijuana as you want, highest THC. There's no difference than the guy in the street, really, other than you have to pay the doctor fee. And then -- so what we saw in California -- because we were the first ones ever to have it. My whole neighborhood was filled with these pot shops suddenly. And what he mentioned about homelessness --

COMMISSIONER VERNON: Can you just -- just quick, because we've got a bunch more people.

MS. LOWERS: Okay. So what we saw in homeless was --

COMMISSIONER VERNON: Causation, a connection to the cartel.

MS. LOWERS: Okay. So the cartels can always undersell you.

COMMISSIONER VERNON: Okay. That's it.

MS. LOWERS: Okay. Taxes, regulations, and so it's kind of this weird thing where we want warning labels. We want -- wanted it to be real medicine, right? We want -- you know, we want it like pharmaceuticals, warning labels, you want -- then they always say, we're going to tax them for revenue, right.

COMMISSIONER VERNON: Fair to say the demand has increased through the medical and the recreational, the cartels come in with a cut-rate price, and they already have the built-in demand; fair?

MS. LOWERS: So you set up the network for them.

COMMISSIONER VERNON: Okay. Got it.

CHAIRMAN FRYER: Thank you very much.

How many more speakers do we have, Mr. Youngblood?

MR. YOUNGBLOOD: We have four in person, and I believe two online -- three online.

CHAIRMAN FRYER: Go ahead, Commissioner.

COMMISSIONER KLUCIK: I would just like to say that you have been one of the most informative speakers that I've heard in all of the hearings that I've been over the years, so thank you so much.

MS. LOWERS: Thank you.

CHAIRMAN FRYER: I want to ask the Planning Commission again with respect to the structure of our evening, would anyone agree with me that I think going forward we should ask that speakers be limited to five minutes rather than sharing time with nonspeakers?

COMMISSIONER HOMIAK: Yes.

CHAIRMAN FRYER: Anybody object to that?

(No response.)

CHAIRMAN FRYER: All right. Then that's what we're going to do going forward. No more sharing of time. We want to hear from you, but it's getting late.

Next speaker, please.

MR. YOUNGBLOOD: Next speaker is going to be Jose Jaramillo, followed by Diane Van Parys.

CHAIRMAN FRYER: All right. And we'll ask you to spell your name for us, sir.

MR. JARAMILLO: Yes, Jose Jaramillo, okay. It's J-a-r-a-m-i-l-l-o.

CHAIRMAN FRYER: Thank you.

MR. JARAMILLO: I'm an over-30-years resident of Collier County, and like they mentioned before, this is really a beautiful place. This is paradise. And I'm going to tell you why it's paradise. Where I grew up is in Mexico City until the age of 18, and I can testify to everything they have said right now. It makes total sense in my head, because the way I was -- the way I was brought up, I was brought up in a very nice home with values, and I understood, but I also grew up around people that used drugs, alcohol, anything. There was no limit. I was -- I can remember I was six years old, and I was able to go buy beer for my uncle and bring it to them.

So I also saw my cousins growing up, the drinking, abusing alcohol, some did drugs and so forth. That's just what I want to put on the side.

You're right about Kathy. She is the most informative person. That's how I got here. She invited me. She told me we've got this going on. They're trying to approve this. And from experience, the drug dealers, they control Mexico. You may not know it. I know it. I lived through it, and there is no of [sic] whatsoever. And how they getting in here, they just said it. I mean, law enforcement said it. I experienced it. I lived through it. I survived it. I'm alive.

And I also forgot to mention I have six children, too, and I had experience with the peers. I'm a drug-free person. I tell my kids this is -- you know, life is full of choices, and this is the choice that you don't want to go down the route.

Having said that, my two -- two of my kids, they have experienced with the vaping, and I can tell you, it's not a good thing. I'm living through it. If you put a dispensary out there, it's definitely going to make it easier for my younger siblings [sic]. My kids range from 27 to 15. So I have two teens at home still -- three teens at home, and I keep an eye on them. I keep communication with them, but not every parents have the ability to do so.

We all have said -- all I have said is just please say no to this dispensing. I mean, they giving you all the information that you need it, and I think they open to share more with you.

Thank you for allowing me to speak tonight, okay? Thank you very much.

CHAIRMAN FRYER: Thank you very much, sir.

Next speaker.

MR. YOUNGBLOOD: Next speaker is going to be Diane Van Parys, followed by Jerry Taricska.

MR. TARICKSKA: Yes, correct.

MS. VAN PARYS: Hi. Diane Van Parys, Collier County unincorporated; 34119's my ZIP code, and I've lived here for 12 years. Came from Atlanta, Georgia.

I'm a concerned citizen, and I want us to keep the medical ban on -- the ban on medical marijuana dispensaries.

First of all, I have compassion for all the people that get the card, and they need it, and they want it. And as everyone has said before, we have a 24-hour ability to get marijuana delivered to your door.

And you all remember COVID when we were shut in for two months, and Amazon, everybody delivered to your door. There were companies that made lots of money delivering alcohol to your door, because that was allowed. So you can get it here in Collier County. You do

not need the actual physical dispensaries.

I'd also like to talk about several areas that I feel are compelling. In Florida the medical marijuana industry in 2021 was 1.5 billion. We just got it approved on the books in 2016. 2018 the Florida Statutes came out. A \$1.5 billion industry right here in the state of Florida. You know that these people are gunning for a lot of stuff, 1.5 billion. In fact, 800,000 users right now of medical marijuana; 32,000 in Collier County.

A company headquartered in Seattle called KushCon, they are a cannabis marketplace company. They held their convention -- national convention. They moved their headquarters to Tampa, Florida, held their convention in Tampa, Florida, in August, and then they had 7,500 people attend, and they had 150 vendors. And just so you know, marketing -- we talked about billboards. Somebody mentioned the billboards in Michigan. Look at the marketing for the 150 companies. I'm telling you, it's a who's who of marketing. And I thought -- I worked for Coca-Cola, and I thought we were the marketing geniuses. Oh, no. This industry, they are the geniuses; 150 of them.

Now, I want to tell you about my experience calling up and finding out how to get my cannabis card. This is an ad that appeared in the *Naples Daily News*. It says, medical marijuana card, free evaluation by phone. Go to dispensary same day. No need to go to the doctor. Well, they changed that. You have to go to the doctor. So I can see the doctor on a Tuesday here in Naples for this office. They have one in Cape Coral. The lady I spoke to from Cape Coral was fabulous.

So she said to me, well, what's your problem?

And I said, well, I have a lot of stress and I have anxiety. You know, I'm a volunteer. That's all I do. What kind of stress and anxiety could I have in Naples?

But, anyway, I told her that, and she goes, oh, you'll get approved no problem.

And so I went through the process, and let me just tell you, you know how we used to shop pill -- well, people did, shopped pill mills for oxycodone and all that. We had the doctors. Well, now you've got to shop your doctors. We have 52 doctors in Collier County, and do you know this particular one that I talked to, \$377 to get your card and see them, and then you have to pay 150 every seven months to get your card renewed. So there's all kinds of ranges of what these doctors are charging. It's a moneymaker for them.

And then I said, well, how do I know -- how much can I get?

And she goes, oh, we have a bag, and we give you all this information, and you get to go in and pick how much you want.

We talked about prescriptions. There's no prescription for this. I had oxycodone. I had both my hips replaced. I had to get oxycodone. You only get a three-day script, and you have to have your husband or somebody go pick it up because you cannot call it in.

So on medical marijuana, like we were talking about the THC that is rampant from 3 to 70 percent to 100 percent, I get to go pick out what I want. This is unbelievable.

Now I want to give you some facts about the high schools.

CHAIRMAN FRYER: You have a minute.

MS. VAN PARYS: Oh, okay.

THE COURT REPORTER: And you can't talk faster.

MS. VAN PARYS: Oh, I can't talk that fast?

COMMISSIONER VERNON: You sure you're from Atlanta?

MS. VAN PARYS: I won't tell you where I'm original from. Massachusetts.

COMMISSIONER VERNON: There you go.

MS. VAN PARYS: Okay. What I want to just tell you, quickly, are some facts about Collier County Public Schools. We have an epidemic with our students. The Phoenix program is located in Naples and Immokalee, and that is the disciplinary alternative school that's allowed. We have five other alternative types of schools in Collier County.

But I want to just give you the increases. Most of the students that go to the disciplinary

program are for vaping. The student resource officers catch them doing it in the bathrooms, but they don't catch all of them, and 75 percent increase in Naples went to 187 students this last academic year, and in Immokalee a 92 percent increase; 113 students went into alternative school. So that is with our youth. It is -- you have to be 21 to vape; you have to be 21 to smoke. These kids all caught vaping; they're not 21 years old. So that's one problem.

Let me just quickly --

CHAIRMAN FRYER: You're at your stop --

MS. VAN PARYS: I'm at my minute. Anybody have questions for me?

(No response.)

CHAIRMAN FRYER: Thank you very much.

MS. VAN PARYS: Okay. Thank you.

CHAIRMAN FRYER: And going forward, all speakers please slow down a little bit, because it's awfully difficult for the court reporter to get everything that's said.

MR. TARICKSKA: Is this -- my name is Jerry Taricska.

CHAIRMAN FRYER: Spell.

MR. TARICKSKA: T-a-r-i-c-s-k-a. The c-s is very Hungarian.

But, anyway, I've been here since '93. I'm a retired engineer. My colleagues here are very versed in what they're talking about.

I have five children. They all live all over the country right now. But as I look around to other counties, I say -- I look back and I look at Collier County, and I say, I don't want to go any other place. I look over to, you know, Miami. I don't want to go over there. I look at Lee County. I don't want to go there.

Collier County is so unique, and we want to keep it that way, and I think it's very important. As an engineer I had to make decisions not based all the time on mathematics. It was based on what was the right thing to do. So I hope that you guys do what's right.

Thank you very much.

CHAIRMAN FRYER: Thank you, sir. Thank you.

Next speaker.

MR. YOUNGBLOOD: Our next speaker is Leonard Rutkowski, followed by Robert Coburn, and then we will go to our online speakers.

CHAIRMAN FRYER: All right. Spelling, please, sir.

MR. RUTKOWSKI: Good evening. You need my spelling?

CHAIRMAN FRYER: If you don't mind.

MR. RUTKOWSKI: R-u-t-k-o-w-s-k-i.

Good evening. I'm a retired neurosurgeon and Naples resident living in Quail Creek. As a disclaimer, I wish all presenters to make a similar statement be the claim of financial interest or not in any marijuana products.

I have a history of using no illicit drugs of any kind in my lifetime. For the record, I have no objections to medical marijuana, and under the auspices -- unless they are under the auspices of a doctor.

My objection lies in unregulated marijuana's potential gateway to other stronger and dangerous drugs.

To define unregulated to me means entrepreneurs who market the product, hire doctors to carte blanche, they approve all seekers of this product.

The motivation under the guise of compassion is purely monetary. Doctors hired to not -- to stay in the job, that if they refuse people who call up, they don't have a job eventually if their percentages of approval go down.

Number one, about 60 percent of the voters in Collier County approved marijuana but only 20 percent of the eligible voters voted. That's about 10 to 15 percent of the population -- voting population. Obviously, this is not a resounding mandate. Obviously influenced by millions of dollars who are proponents of marijuana marketing. My interests are related to long-term societal

issues.

Number 2, I have previously commented on complaints -- claims of compassion which I believe is a veil hiding of true motives. The exaggerated anecdotal testimonials, be it the seizure issues for Dravet's, which is a very rare disease, is implied that it is a cure-all for seizures across the board. Untrue.

Number 3, there is no question there are indications for medical marijuana. My concern is control. I do not believe that proponents who have invested millions in the marijuana industry have enough medical and ethical training and concern for the potential long-term potential consequences.

Number 4, sounds good initially, but long term without doctors and DOs on the forefront of control, the flood gates are open for the legal abuse of this drug.

Questions arise about a gateway drug which has been mentioned. One of the commissioners on May 10th is quoted in the newspaper stating in the process -- stating that he wanted to change the process for approval of dispensaries. It is basically based on a significant but misinformed piece of information. It is, indeed, a gateway drug, and I will provide you with that information here as requested.

And this is from July of 2020. Mr. Garalay (phonetic), who is a proponent of these dispensaries, made a statement that reiterated against the false narrative that marijuana's not a gateway drug, and he made this comment in May of this year: A marijuana lobby has said that no one has died of marijuana. There have been no overdoses of marijuana but, indeed, there are deaths associated with marijuana from motor vehicles accidents, psychoses leading to suicides, and the like.

Lastly, I will be glad and want to encourage any debate on this matter. I am quite confident in my facts and opinions based on research of the scientific literature.

Any questions?

CHAIRMAN FRYER: Thank you very much, sir.

Next speaker.

MR. YOUNGBLOOD: Our next speaker is Robert Coburn, and then we will go online to Catalina Lowers.

CHAIRMAN FRYER: Okay. Mr. Coburn.

MR. COBURN: My name is Robert Coburn, C-o-b-u-r-n. I live at 9200 The Lane, North Naples.

I just want to -- I agree with everything everybody said. I've been to their meetings. I've heard what's been said at them, and I -- and I always bring it back -- I'm a retired state trooper here, and I always bring it back to control. If you control it, you can change, even if it's just ever so slightly where we're headed. And right now the state has given you the opportunity to control. By banning it, you can wait until the state changes the regulation to allow you to regulate where they go. Would you rather see a pot shop on U.S. 41 downtown, or would you rather see it in an industrial park where it's well lit and can be regulated?

That's what you need to think about. City of Naples has said no, they're not having it. I think Collier County needs to follow their example. I would greatly appreciate it as having three boys myself. This is -- this is tough for me.

CHAIRMAN FRYER: I understand.

MR. COBURN: I went through it. And I'm just telling you, please do everything you can do. I know we're not going to stop it forever. Like you said, it will come up again, but right now we have the opportunity.

Thank you.

CHAIRMAN FRYER: Thank you very much, sir.

Now, when we go to the telephone, again, without objection from the Planning Commission, I'm going to limit the speakers to three minutes each, please.

Who's the first telephone speaker?

MR. YOUNGBLOOD: Our first speaker is going to be Catalina Lowers.

Catalina, can you hear us?

MS. CATALINA LOWERS: Yes. Can you hear me?

CHAIRMAN FRYER: Yes. You have three minutes.

MS. CATALINA LOWERS: Okay, great.

Good evening. My name is Catalina Lowers. For a little background, I'm 19 years old. Throughout high school I served in the juvenile diversion program called Teen Court as a volunteer attorney.

So teen court is a volunteer-based -- community-based alternative to the traditional juvenile court system, but it is still a real court dealing with real cases.

Teen volunteers, such as myself, handled everything from misdemeanors all the way to third-degree felonies committed by youth right here in Collier County.

I come here today to ask that for the sake of my generation you put the brakes on the influx of physical pot dispensaries here until more long-term, peer-reviewed studies are done on the effects of high THC marijuana on the youth's brain as well as specifically the effects of on-site advertising for pot.

I also ask you to consider waiting until the state can certify that pot for medical dispensaries is kept at low THC levels to ensure medical use, not recreational abuse.

While overseeing years of teen court cases in Collier, I personally witnessed a steady uptick of cases involving teens using pot at school, and more and more of the kids I talked to admitted that they got it from someone else's medical marijuana -- that the only reason they could have accessed it was because of medical marijuana. And when I questioned them, they had no clue about the potential health ramifications for using it.

Allowing physical pot shops to spring up in every corner of Collier will make things much worse. Teens will have much more access to this supposedly medical marijuana that has as much THC as pot from some back-alley drug deal.

Even before the pandemic, my generation had an astronomical depression and suicide rate. And the marijuana industry has touted pot as a cure-all for depression. I've seen it, that multiple studies show direct associations between frequent use of high THC pot and the development of health -- mental health issues like depression, psychosis, and suicidality.

The marijuana industry already relentlessly targets teens through online advertising, but unless something is done, we'll be targeted every time we drive through town. This is really just my generation's big tobacco. We're being bombarded with promises of health and happiness by the marijuana industry but when, in reality, just like with cigarettes in the past, we haven't had enough time to study and educate the public about its long-term health effects.

CHAIRMAN FRYER: Thirty seconds, please.

MS. CATALINA LOWERS: Right now anyone on the street could tell you that smoking cigarettes leads to lung cancer, yet these same desperate teens won't know that the sign on the local pot shop advertising the supposed cure to their depression and anxiety is just a bald-face lie.

So with that said, I implore you to wait. Wait until the state legislature eliminates loopholes which let these marijuana dispensaries give out limitless amounts of high-THC pot without consequence. Wait until more studies are done on the long-term effects of THC on the developing brain. Nobody is being hurt by waiting, but my generation is being hurt by the pot industry, which is rushing to get everyone hooked on high-THC pot to ensure a new generation of captive customers.

Thank you for your time, and I appreciate the opportunity to speak.

CHAIRMAN FRYER: Thank you very much.

Next speaker, please.

MR. YOUNGBLOOD: Our final speaker is going to be Diane Solomon.

Ms. Solomon, you are being prompted to unmute your microphone.

MS. SOLOMON: Thank you for the opportunity to say a few words.

My name is Diane Solomon, and I need to start with a disclosure. I do not receive any remuneration from a marijuana-related enterprise; however, I do have family members who are associated with a company.

I spent 27 years as a physician at the National Cancer Institute in the field of cancer prevention and research, and I learned to be somewhat skeptical of anecdotal reports of success.

In my review of the studies of medical marijuana, I have to say the findings consistently show there is efficacy of medical marijuana in alleviating certain types of pain, muscle spasms, nausea, particularly that associated with chemotherapy, and there are studies showing benefit in relieving stress and anxiety particularly associated with PTSD.

Nationally, the research has actually shown that opioid use decreases and overdoses decrease in areas where marijuana use is legalized.

I've actually just seen a study of a survey by Rosenthal that looked at medical marijuana patients in Florida, specifically in Florida, and the data really mirror what we -- I've just mentioned in terms of the national data. Florida patients, by and large, use medical marijuana to treat pain, muscle spasms, nausea, stress, and 80 percent of those in the survey reported significant benefits and, importantly, a majority were actually able to reduce or discontinue concomitant use of opioids.

So I understand that some of what I'm saying may be contrary to what has been presented thus far this evening, and I certainly respect other people's views on the data. I would really like the opportunity to present the findings a little more comprehensively at a future meeting, because I realize it's hard to absorb all of this at this late hour, particularly when some of the figures I'm citing may be contrary to what has already been -- already been discussed.

But let me just mention something on a local personal level. I, too, have lived in Collier County since -- for many years, since 2009, and particularly over the past five years I've seen a tremendous shift in attitudes about medical marijuana. In fact, without violating any HIPAA regulations, I can say that more than a few of my neighbors are registered medical marijuana patients. They want convenient access to safe, tested medical marijuana in an environment where they can ask questions and get guidance. They'd rather not travel to Lee County to do so.

So I would respectfully ask the Chair and the Board to allow me additional time at your next meeting, or whenever it would be convenient, to elaborate on some of these comments and present the minority alternative viewpoint.

So thank you very much.

CHAIRMAN FRYER: One -- just a moment. Mr. Youngblood, is this our last speaker?

MR. YOUNGBLOOD: We have one more.

CHAIRMAN FRYER: One more.

Okay. Well, thank you very much, ma'am.

Who's our next speaker?

MR. YOUNGBLOOD: Our final speaker is going to be Laura Brown.

Laura, you are being prompted to unmute your microphone. Can you hear us okay?

MS. BROWN: I can hear you, yes.

I would just like to echo the comments of Diane Solomon and say that I have also witnessed the incredible success that patients have found with medical marijuana and that sometimes people are not as comfortable speaking up about the benefits that they have found because they do find that it's still stigmatized among their friends and family.

But I do believe that it's difficult for some people to make longer journeys and that having a safe and friendly environment near by which is respectful to the neighborhood and their surroundings would be very beneficial to Collier County.

I do know that in other states, as well as several counties in Florida, there has been -- there has not been any increase in crime, and the medical marijuana dispensaries have very strict rules about making sure they are checking IDs and not allowing underage -- underage people who are not strict pediatric patients with serious disease to get into the stores or purchase any medicine.

So I just do hope that you will listen to doctors and those who think that there are people

finding real benefits from this product, this medicine, and that it can bring benefit to the county.

Thank you.

CHAIRMAN FRYER: Thank you very much, Ms. Brown.

Is that it, Mr. Youngblood?

MR. YOUNGBLOOD: (Nods head.)

CHAIRMAN FRYER: All right. We'll close the public comment portion of this hearing. And it's now appropriate for the Planning Commission to deliberate up to a point that someone might wish to make a motion.

COMMISSIONER KLUCIK: Mr. Chairman?

CHAIRMAN FRYER: Yes, sir.

COMMISSIONER KLUCIK: I would just like to summarize my own position at this point. I think -- we all know the law can change, and we don't know what the future law will be, so I don't -- I'm not going to speculate too much about that, but I am concerned. I'm talking about the state law.

I have -- I had a good friend, a young man, he's in medical school now, and he worked for over a year at a dispensary, and I would see him periodically at family events. And he was just -- he started out, you know, pretty much, you know, in support of it, but his experience as a dispenser at a dispensary, I mean, it just bothered him so much because he saw that in his experience -- and I think it was in Bonita -- most of the customers really didn't have a serious medical problem or have any medical problem. They got their card whatever way they got it, and they were there to get high, and they came back frequently, and they didn't really act much different than his friends who are potheads, and that was his experience.

Now, that's anecdotal. What does that mean? It doesn't mean anything except that's what I heard, and I'm here, you know, entrusted to make my vote on this, and I'm going to consider that.

We've had overwhelming opposition from the parties that have chosen to express themselves today, and I would say that no one is being harmed by saying no. And that stigma, the stigma is actually, I think, a good thing. To have a stigma against marijuana use is a wonderful thing and very beneficial to the community.

And I think having Collier County be different and not go with the rest of the state -- I don't even know what the statistics are, but the fact that, you know, we're different than what's going on in Lee County or, you know, the counties east, I think that's a good thing that makes our community different.

And that marijuana is readily available to those who need it, which -- and I'm sure there are some people who don't find pain relief or -- you know, or other -- there's other reasons where there may be some people that certainly they feel they need it. And a lot of times medical conditions, the way we feel, is just as important as what's actually happening, and there's benefit to things that make you think you have relief even if it doesn't -- we couldn't test whether or not it is effective.

So for all those reasons, I'm planning to vote against this.

CHAIRMAN FRYER: Thank you.

Commissioner Vernon.

COMMISSIONER VERNON: Yeah. Although the majority of people who spoke here were definitely against it, I think, you know, there's a lot of people who disagree, including the letter we got from staff from a physician and also the last couple of speakers.

So I think, in my view -- and some of this is just not knowing enough about it. Frankly, I didn't think I joined the Planning Commission so I could address marijuana issues. It's just -- it's not really my wheelhouse.

So my point of view is, there's two sides to this coin, and -- but -- but where I come down is with Sheriff Rambosk and with the young lady who spoke so eloquently by phone who said -- used the word "let's wait" and combine that with what Mr. Maines said, is once, you know, the bullet's out of the gun, you ain't going to put it back.

So rather than -- you know, I'm going to vote against it as well. I do think we ought to

look at it again at some point in the future because, again, there's a lot of -- a lot of competent people saying that, you know, we need to change the way we are right now. But right now I'm going to vote against it.

CHAIRMAN FRYER: Thank you.

Commissioner Shea.

COMMISSIONER SHEA: You know, I don't challenge that there's a medical benefit to it, but the most striking one was the young lady that said wait when I asked earlier why do we have to do something. We have a demand in Collier County that's easily met with deliveries.

I'm still amazed that we don't have -- I don't think we've done enough homework to open the door. I think we -- I sound like a broken record. I can't believe we haven't talked to the people in Colorado and Washington and California that are responsible in their health departments and look at the progression because, obviously, that's really what we're worried about is the progression. And there's people that are years and years ahead of us.

So I would -- I'm going to vote no just because I don't think we've done enough homework. And I recommend strongly that we do more homework on the transition when we get into the recreational side of it, because it's going to happen.

CHAIRMAN FRYER: Thank you.

Commissioner Fry.

COMMISSIONER FRY: A couple of observations. One is, first of all, I'm glad that a couple of speakers at the end expressed support for medical dispensaries. I always like to hear both sides of the coin.

I did not hear -- one observation, I did not hear a single person say they do not believe that there are applications for medical marijuana, that it doesn't help. Nobody's disputing that it helps certain people with certain ailments. And I happen to -- I happen to agree, and I believe that those people that really need it should be able to get it.

So I've got, I guess, three concerns with allowing medical marijuana dispensaries in Collier County. One is the -- what I'm hearing is a clear lack of barriers of entry to get a card. If I can walk in and for any -- for really no reason at all say, I need it, no justification. That just seems like there should be more -- a lack of any correlation between the ailment that you have that -- the justification for getting the card and the products, forms of products, or the concentrations of THC that you can get to treat it. It seems to me that if you have a real purpose for it, there should be some correlation between what products you get and the dosage of those products similar to, you know, a normal medical application.

And, finally, it's clear that it's a state mandate, and we have no control locally. In other words, we can't -- all those things we cannot limit.

So I think that marijuana users -- nobody is not able -- if we keep the ban on dispensaries here in Collier County, anybody that needs it is able to get it. They can either drive to Bonita Beach Road. And I believe everybody in this room has probably driven to Bonita Beach Road for some purpose, and if it's important enough for us to go to a restaurant up there or so and so, we might be willing to drive up there if we really need medical marijuana. And even if we aren't willing to drive up there, we can order it and have it delivered to our home. So nobody is really hurt by this other than in the terms of convenience.

So I guess I have more concerns, and I agree with the concept of waiting, getting more evidence, and perhaps having more control, so I also will vote for -- to keep the ban in place.

CHAIRMAN FRYER: Thank you.

Vice Chair.

COMMISSIONER HOMIAK: I think I would do the same thing. I don't think there's enough regulation on the -- how you get a card, you know. I see both points, both sides. But I think waiting is probably the best thing.

CHAIRMAN FRYER: Thank you.

From my part, I'm going to vote against it as well for the reasons that have been stated and

also this lingering issue of the federal law. And the young lady who made the point about the cartels coming in and underpricing the lawful stuff, that seems to be, first of all, tied to, I think, illegal immigration but also a very concerning point. The marketplace would encourage illegal purchases if that substance were less expensive than going through hoops of \$70 every seven months, or whatever the numbers were. So I'm going to be voting against it as well.

We've got two more signals. First, Mr. Klucik.

COMMISSIONER KLUCIK: Yes. I was just going to make a motion, but -- unless someone else wants to talk.

COMMISSIONER FRY: One quick comment is simply that we heard a lot of anecdotal testimony about what occurred, this study, that study. Not so much presented by experts. So I think that's one of the things that's very confusing for us up here is we heard the last speaker has evidence and quoted studies that it does help with cancer patients and such, and we had people talking about the cartels and other things. Some are very compelling.

I just think it is confusing, and I hope that as this dialogue continues and for the County Commission that there could be more expert testimony in terms of facts that -- you know, from an expert, just similar to how we rely on experts when we get into land-use matters. I feel like there's been a little bit of a lack of that in this. And to the last speaker that says she wanted to come and present the alternate viewpoint, I think we should make sure she knows about the County Commission meeting, and that's the appropriate time for her to go and present in person, so --

CHAIRMAN FRYER: Indeed.

COMMISSIONER FRY: -- I just wanted to add that.

CHAIRMAN FRYER: Thank you.

Commissioner Klucik, did you have a motion?

COMMISSIONER KLUCIK: Yes. I'm going to motion that we forward this with a recommendation to disapprove.

CHAIRMAN FRYER: Is there a second?

COMMISSIONER FRY: Second.

CHAIRMAN FRYER: Any further discussion?

(No response.)

CHAIRMAN FRYER: If not, all those in favor of the motion to recommend denial, please say aye.

COMMISSIONER SHEA: Aye.

COMMISSIONER FRY: Aye.

CHAIRMAN FRYER: Aye.

COMMISSIONER HOMIAK: Aye.

COMMISSIONER VERNON: Aye.

COMMISSIONER KLUCIK: Aye.

CHAIRMAN FRYER: Opposed?

(No response.)

CHAIRMAN FRYER: It passes 6-0. Thank you very much.

Thank you, staff, and thank you, members of the public, for being with us and helping us understand these issues.

Without objection, we're adjourned.

There being no further business for the good of the County, the meeting was adjourned by order of the Chair at 7:40 p.m.

COLLIER COUNTY PLANNING COMMISSION



EDWIN FRYER, CHAIRMAN

These minutes approved by the Board on _____, as presented _____ or as corrected _____.

TRANSCRIPT PREPARED ON BEHALF OF FORT MYERS COURT REPORTING BY TERRI L. LEWIS, RPR, FPR-C, COURT REPORTER AND NOTARY PUBLIC.