

QUESTIONNAIRE FOR GUBERNATORIAL APPOINTMENTS

The information from this questionnaire will be used by the Governor's office and, where applicable, The Florida Senate in considering action on your confirmation. The questionnaire MUST BE COMPLETED IN FULL. Answer "none" or "not applicable" where appropriate. Please type or print in black ink.

May 7, 2001

1. Name: Mr. O'Sullivan J. Date Completed Mort, III

2. Business Address: 316 S. Baylen St. Suite 200 Pensacola
PO Box 12646 Florida 32574 (850) 435-7400

3. Residence Address: 407 Bayshore Dr. Pensacola Escambia
Florida 32507 (850) 458-6191

Specify the preferred mailing address: Business Residence Fax # (850) 444-7230

A. List all your places of residences for the last five (5) years.

| ADDRESS | CITY & STATE | FROM | TO |
|--------------------|---------------|-------|---------|
| 407 Bayshore Dr. | Pensacola, FL | 6/00 | present |
| 1540 Bayshore Lane | Pensacola, FL | 8/97 | 6/00 |
| 405 Port Royal Way | Pensacola, FL | 11/86 | 8/97 |

B. List all your former and current residences outside of Florida that you have maintained at any time during adulthood.

| ADDRESS | CITY & STATE | FROM | TO |
|----------------|--------------|------|------|
| can't remember | Atlanta, GA | 6/73 | 2/75 |

5. Date of Birth: 01/19/51 Place of Birth: Pensacola, FL

6. Social Security Number: 267-02-9557

7. Driver License Number: 0241 433 51 019 0 Issuing State: FL

8. Have you ever used or been known by any other legal name? Yes No If "Yes" Explain
John Mortimer O'Sullivan, III

9. Are you a United States citizen? Yes No If "No" explain:

If you are a naturalized citizen, date of naturalization: _____

10. Since what year have you been a continuous resident of Florida? 1975

11. Are you a registered Florida voter? Yes No If "Yes" list:

A. County of Registration: Escambia B. Current Party Affiliation: Democrat

12. Education

A. High School: Pensacola Catholic High School; Pensacola, FL Year Graduated: 1969
(NAME AND LOCATION)

B. List all postsecondary educational institutions attended:

| NAME & LOCATION | DATES ATTENDED | CERTIFICATES/DEGREES RECEIVED |
|---|--------------------|-------------------------------|
| <u>Washington & Lee</u> | <u>9/69 - 5/71</u> | <u>(Freshman, Sophomore)</u> |
| <u>University - Lexington, VA</u> | | |
| <u>University of West Florida - Pensacola, FL</u> | <u>9/71 - 5/73</u> | <u>Bachelor of Arts</u> |

13. Are you or have you ever been a member of the armed forces of the United States? Yes No If "Yes" list:

A. Dates of Service: _____
 B. Branch or Component: _____
 C. Date & type of discharge: _____

14. Have you ever been arrested, charged, or indicted for violation of any (federal, state, county, or municipal law, regulation, or ordinance? (Exclude traffic violations for which a fine or civil penalty of \$150 or less was paid.) If "Yes" give details.

No

15. Concerning your current employer and for all of your employment during the last five years, list your employer's name, business address, type of business, occupation or job title, and period(s) of employment.

| EMPLOYER'S NAME & ADDRESS | TYPE OF BUSINESS | OCCUPATION OR TITLE | PERIOD OF EMPLOYMENT |
|-------------------------------------|------------------|------------------------------|-----------------------|
| <u>O'Sullivan Hicks Patton, LLP</u> | <u>CPA firm</u> | <u>CPA, Managing Partner</u> | <u>1981 - present</u> |

16. Have you ever been employed by any state, district, or local governmental agency in Florida? Yes No If "Yes", identify the position(s), the name(s) of the employing agency, and the period(s) of employment:

| POSITION | EMPLOYING AGENCY | PERIOD OF EMPLOYMENT |
|----------|------------------|----------------------|
| | | |

17. A. State your experiences and interests or elements of your personal history that qualify you for this appointment.

I am the managing partner of a 90-person CPA firm. I have been actively involved in community service throughout my professional career, serving in leadership positions of many organizations. I graduated Magna Cum Laude from the University of West Florida in 1973. My service on the Foundation Board of Trustees has allowed me to "pay back" part of my debt to the University. Service on the new board would allow me to continue.

B. Have you received any degree(s), professional certification(s), or designations(s) related to the subject matter of this appointment? Yes No If "Yes", list:

C. Have you received any awards or recognitions relating to the subject matter of this appointment? Yes No If "Yes", list:

D. Identify all association memberships and association offices held by you that relate to this appointment:
None other than serving currently as non-voting advisor to the University of West Florida Foundation Board of Trustees.

18. Do you currently hold an office or position (appointive, civil service, or other) with the federal or any foreign government? Yes No If "Yes", list:

19. A. Have you ever been elected or appointed to any public office in this state? Yes No If "Yes", state the office title, date of election or appointment, term of office, and level of government (city, county, district, state, federal):

| OFFICE TITLE | DATE OF ELECTION OR APPOINTMENT | TERM OF OFFICE | LEVEL OF GOVERNMENT |
|--------------|---------------------------------|----------------|---------------------|
|--------------|---------------------------------|----------------|---------------------|

B. If your service was on an appointed board(s), committee(s), or council(s):

(1) How frequently were meetings scheduled: _____

(2) If you missed any of the regularly scheduled meetings, state the number of meetings you attended, the number you missed, and the reason(s) for your absence(s):

| MEETINGS ATTENDED | MEETINGS MISSED | REASON FOR ABSENCE |
|-------------------|-----------------|--------------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |

20. Has probable cause ever been found that you were in violation of Part III, Chapter 112, F.S., the Code of Ethics for Public Officers and Employees? Yes No If "Yes", give details:

| DATE | NATURE OF VIOLATION | DISPOSITION |
|-------|---------------------|-------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |

21. Have you ever been suspended from any office by the Governor or the State of Florida? Yes No If "Yes", list:

A. Title of office: _____ C. Reason for suspension: _____
 B. Date of suspension: _____ D. Result: Reinstated Removed Resigned

22. Have you previously been appointed to any office that required confirmation by the Florida Senate? Yes No If "Yes", list:

A. Title of Office: _____
 B. Term of Appointment: _____
 C. Confirmation results: _____

23. Have you ever been refused a fidelity, surety, performance, or other bond? Yes No If "Yes", explain:

24. Have you held or do you hold an occupational or professional license or certificate in the State of Florida? Yes No If "Yes", provide the title and number, original issue date, and issuing authority. If any disciplinary action (fine, probation, suspension, revocation, dishonoring) has ever been taken against you by the issuing authority, state the type and date of the action taken:

| LICENSE/CERTIFICATE TITLE AND NUMBER | ORIGINAL ISSUE DATE | ISSUING AUTHORITY | DISCIPLINARY ACTION TAKEN |
|--------------------------------------|---------------------|----------------------------|---------------------------|
| Certified Public Accountant #5065 | 09/15/75 | State Board of Accountancy | None |
| _____ | _____ | _____ | _____ |

25. A. Have you, or businesses of which you have been and owner, officer, or employee, held any contractual or other direct dealings during the last four (4) years with any state or local governmental agency in Florida, including the office or agency to which you have been appointed or are seeking appointment? Yes No If "Yes", explain:

| NAME OF BUSINESS | YOUR RELATIONSHIP TO BUSINESS | AGENCY OR AGENCY TO WHICH APPOINTED |
|------------------------------|-------------------------------|---|
| O'Sullivan Hicks Patton, LLP | Managing Partner | Audit services for Escambia and Santa Rosa Counties |
| _____ | _____ | _____ |

CERTIFICATION

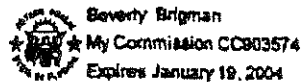
STATE OF FLORIDA, COUNTY OF

Before me, the undersigned Notary Public of Florida, personally appeared Mort O'Sullivan, who, after being duly sworn, say: (1) that he/she has carefully and personally prepared or read the answers to the foregoing questions; (2) that the information contained in said answers is complete and true; and (3) that he/she will, as an appointee, fully support the Constitutions of the United States and of the State of Florida.

[Signature]
Signature of Applicant-Affiant

Sworn to and subscribed before me
this 11th day of May, 2001.

[Signature]
Signature of Notary Public-State of Florida



(Print, Type, or Stamp Commissioned Name of Notary Public)

My commission expires: _____

Personally Known OR Produced Identification

Type of Identification Produced _____

(seal)

UNIVERSITY BOARD OF TRUSTEES QUESTIONNAIRE

PLEASE ANSWER THE FOLLOWING QUESTIONS AND RETURN WITH YOUR APPLICATION. *Please limit the response to each question to 200 words or less.*

1. Describe your involvement in and/or relationship to the university for which you are applying or another higher education institution with which you are/were affiliated.

I am a 1973 graduate from the accounting program at the University of West Florida. I served eight years on the UWF Foundation Board of Trustees, including service as chairman of the Investment Committee. I currently serve as a non-voting advisor to the Board of Trustees. Our firm has funded professorships in the Accounting Department and I taught one term as an adjunct professor.

2. Describe the ways you have personally helped to improve the quality of education (through specific actions, programs or leadership).

During my term on the Board of Trustees, I helped lead the decision of the Foundation to buy downtown Pensacola office facilities to renovate and rent to the UWF Institute for Human and Machine Cognition. This facility has been critical in the development of the Institute.

3. Describe your understanding of the role of a board of trustee member in ensuring the fiduciary and academic well-being of the university.

A trustee member works to ensure that the Board sets policy and guides strategic planning for current and future operations of the University. It must insure the safeguarding of resources and balance them with the academic needs of the University. The Board must strive to provide high quality programs in all its offerings while coordinating with the resources of the statewide university system to avoid overlap and duplication.

4. Describe your understanding of the new education governance structure in Florida, the role of the university board of trustees in this new structure, and how it relates to other segments of Florida's educational delivery system.

There will be a new Florida Board of Education that will govern all Florida education K-20. The Board of Regents shall cease to exist. Under the Board of Education, there shall be a Board of Trustees for each university in the state system, consisting of eleven members. Local school boards for K-12 will, together with each of the University Boards of Trustees, be governed under the Florida Board of Education.

5. Have members of your immediate family (spouse, child, parent(s), siblings), or businesses of which members of your immediate family have been owners, officers, or employees, held any contractual or other direct dealings during the last four (4) years with any state or local governmental agency in Florida, including the office or agency to which you have been appointed or are seeking appointment? Yes No If "Yes", explain.

| | | | |
|------------------|----------------|------------------|-------------------------|
| NAME OF BUSINESS | POSITIONS HELD | DATE OF DEALINGS | DESCRIPTION OF DEALINGS |
|------------------|----------------|------------------|-------------------------|

20. Have you ever been a registered lobbyist or have you lobbied at any level of government at any time during the past five (5) years? Yes No

A. Did you receive any compensation other than reimbursement for expenses? Yes No

B. Name of agency or entity you lobbied and the principal(s) you represented:

| | |
|---------------|-----------------------|
| AGENCY/ENTITY | PRINCIPAL REPRESENTED |
|---------------|-----------------------|

21. List three persons who have known you well within the past five (5) years. Include a current, complete address and telephone number. Exclude your relatives and members of the Florida Senate.

| NAME | MAILING ADDRESS | PHONE | TELEPHONE NUMBER |
|-----------------------------------|--|----------------|------------------|
| Morris Marx, President UWF | 11000 University Pkwy, Bldg. 10; Pensacola, FL 32514 | (850) 474-2200 | |
| Charles Atwell, President PJC | 1000 College Blvd; Pensacola, FL 32504 | (850) 484-1000 | |
| Collier Merrill, Board of Regents | 730 Bayfront Pkwy; Pensacola, FL 32501 | (850) 438-0955 | |

22. Name any business, professional, occupational, civic, or fraternal organizations(s) of which you are now a member, or of which you have been a member during the past five (5) years, the organization address(es), and date(s) of your membership(s).

| NAME | MAILING ADDRESS | OFFICE/POSITION & TERM | DATE(S) OF MEMBERSHIP |
|----------------------------------|-------------------------------------|--|--------------------------|
| UWF Foundation | 11000 University Pkwy; P'cola 32514 | Board Member/Advisor | 6/92-6/98 & 6/99-present |
| Pensacola Sports Assn. | PO Box 12465; P'cola 32582 | Board Member | 6/96 - present |
| Baptist Health Care | PO Box 17500; P'cola 32522 | Advisor/Chairman Finance & Investment Committees | 1990 - present |
| Greater Escambia Comm Foundation | PO Box 12950; P'cola 32576 | Board Member | 6/96 - present |
| Florida Institute of CPAs | PO Box 5437; Tallahassee 32314 | Member | 6/75 - present |

23. Do you know of any reason why you will not be able to attend fully to the duties of the office or position to which you have been or will be appointed? Yes No If "Yes", explain:
