

Received 6-4-12 3:56



STATE UNIVERSITY SYSTEM of FLORIDA  
Board of Governors

Application Form  
University Board of Trustees Position  
State University System of Florida

Name: Ullman, Patricia Daphne Date Completed: 6/4/2012  
Last First Middle and/or Maiden

**INSTRUCTIONS**

The information submitted will be used by the Board of Governors in considering action on your application. If appointed, please be advised that your appointment is subject to confirmation by the Florida Senate and you will be required to file an annual financial disclosure statement with the Florida Commission on Ethics.

Please type or print clearly. Please do not leave any questions blank - answer "none" or "not applicable" where appropriate.

All applications must be signed and witnessed by a Notary. Submit the original completed application via mail, email, or facsimile by the posted deadline to:

State University System of Florida, Board of Governors  
325 W. Gaines Street, Suite 1614  
Tallahassee, FL 32399-0400

Fax 850.245.9685 [Chancellor@fibog.edu](mailto:Chancellor@fibog.edu)

**PLEASE NOTE:** any application submitted by facsimile or email must be received by the posted deadline and followed by the original signed application to above address.

**EXCLUSIONS**

The following conditions exclude eligibility for appointment as a University Board of Trustee member.

Registered Lobbyist: No  Yes  Dual Office Holding: No  Yes

Authority:

Section 112.313(17), Florida Statutes, prohibits any citizen member of a university board of trustees from having any employment or contractual relationship as a legislative lobbyist requiring annual registration under section 11.045, Florida Statutes.

Article II, section 5(a) of the Florida Constitution prohibits any person from holding more than one office under the government of the state, counties, and municipalities at the same time, except for certain exclusions stated therein (notary public, military officer, member of a statutory body having only advisory powers, etc.)

**EXEMPTION FROM PUBLIC RECORDS**

AS A GENERAL MATTER, APPLICATIONS FOR ALL POSITIONS WITHIN STATE GOVERNMENT ARE PUBLIC RECORDS THAT MAY BE VIEWED UPON REQUEST. HOWEVER, THERE ARE SOME EXEMPTIONS FROM THE PUBLIC RECORDS LAW FOR CERTAIN IDENTIFYING INFORMATION RELATING TO PAST AND PRESENT LAW ENFORCEMENT OFFICERS AND THEIR FAMILIES, VICTIMS OF CERTAIN CRIMES, ETC. IF YOU BELIEVE AN EXEMPTION FROM THE PUBLIC RECORDS LAW APPLIES TO YOUR SUBMISSION, PLEASE CHECK THIS BOX.

Yes, I assert that identifying information provided in this application should be excluded from inspection under the Public Records Law.

IF YOU NEED ADDITIONAL GUIDANCE AS TO THE APPLICABILITY OF ANY PUBLIC RECORDS LAW EXEMPTION TO YOUR SITUATION, PLEASE CONTACT THE GENERAL COUNSEL FOR THE BOARD OF GOVERNORS.

Vikki R. Shirley  
General Counsel  
State University System of Florida, Board of Governors  
325 W. Gaines Street, Suite 1614  
Tallahassee, FL 32399-0400  
(850) 245-0466

**PERSONAL INFORMATION**

Name: Ullman, Patricia Daphne Date Completed: 6/4/2012  
Last First Middle and/or Maiden

1. University Board of Interest: Are you applying for reappointment? Yes  No

FAMU  FAU  FGCU  FTU  FPU  PSU  NCF  OCF  UF  UNF  USF  UWF

2. Residence Address: [Redacted] Tampa, FL 33611  
Street City State County Zip Code  
813.839.7785 973.760.9627  
Area Code/Phone Cell Phone

3. Current Employer or Occupation: The Pearl Group Inc.  
Business Address: 4950 Bayshore Blvd #7 Tampa, FL 33611  
Street Office City State  
973.760.9627  
Post Office Box Suite Zip Code Area Code/Phone Number  
E-mail Address: daphne@thepearlgroupinc.com

4. Specify the preferred mailing address: Business  Home  Fax # 877.390.9627

5. List all places of residence for the past five (5) years.  
Address City and State From To  
[Redacted] Tampa, FL 33611 10/02 - present

6. List all former and current residences outside of Florida that you have maintained at any time during adulthood.  
Address City and State From To  
56 Mews Lane South Orange, NJ 07079 9/98 - 11/02  
3234 Black Walnut Drive Annapolis, MD 21403 10/92 - 8/98  
16 Spur Circle Scottsdale AZ 85201 6/86 - 10/92  
217 Highland Ave Orange, NJ 07050 10/70 - 12/86

7. Date of Birth: [Redacted] \* Place of Birth: Bethpage, NY \*

8. Social Security No.: [Redacted] \*

9. Driver License No.: [Redacted] \* Issuing State: FL \*

**\*ALL INFORMATION MARKED WITH AN ASTERISK IS REQUIRED FOR CONDUCTING BACKGROUND SCREENING AND WILL BE REDACTED PRIOR TO DISTRIBUTION OF THE APPLICATION TO THE TRUSTEE NOMINATING COMMITTEE MEMBERS. REFER TO ATTACHED NOTICE ON USE OF SOCIAL SECURITY NUMBERS.\***

10. Have you ever been known by any other legal name? Yes  No  If "Yes" explain.  
My full name is Patricia Daphne Ullman. I am known professionally as Daphne (or P. Daphne) Ullman.

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

12. If you are a naturalized citizen, date of naturalization: \_\_\_\_\_

13. Since what year have you been a continuous resident of Florida? 2002

14. Are you a registered Florida voter? Yes  No

15. 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.) Yes  No  If "Yes" give details:

Date	Place	Nature	Disposition
11/95	Scottsdale, AZ	traffic accident	Reckless driving ticket

16. 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

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

Title of Office: \_\_\_\_\_ Reason for Suspension: \_\_\_\_\_

Date of Suspension: \_\_\_\_\_ Result: Reinstated  Removed  Resigned

18. Are there any pending lawsuits against you or are you a party to a lawsuit in any court in which you are the plaintiff or defendant? Yes  No  If "yes", what type and where?

19. Have any judgments been entered against you as a result of any civil or administrative proceeding(s)? Yes  No  If "yes", identify the proceeding(s) that resulted in the judgment and the date the judgment was entered.

NONE

---



---

20. Are you now engaged in activities, or have you engaged in activities in the past, that will reflect unfavorably on the board to which you seek appointment? Yes  No  If "yes", explain.

NONE

---



---

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

NONE

---



---

**EDUCATION, LICENSURE, MEMBERSHIPS**

22. Education:

A. High School: Our Lady of the Valley, Orange, NJ Year Graduated: 1978  
(Name and Location)

B. List all postsecondary educational institutions attended:

<u>Name and Location</u>	<u>Date Attended</u>	<u>Certificates/Degrees Received</u>
The University of Arizona	1978-79	
The Ohio State University	1979-82	BS Accounting
Central Michigan University	1998-2000	MSA

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

CPA Certified Public Accountant

CFF Certified Financial Forensics

---



---

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, and/or disbarment) has ever been taken against you by the issuing authority, state the type and date of the action taken:

<u>License/Certificate Title &amp; Number</u>	<u>Original Issue Date</u>	<u>Issuing Authority</u>	<u>Disciplinary Action/Date</u>

25. Identify all association memberships and association offices held by you that relate to this appointment:

Member American Institute of Certified Public Accountants

Member Arizona State Board of Accountancy

26. Name any business, professional, occupational, civic, or fraternal organization(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(s) Held & Term	Date(s) of Membership
AICPA	1211 Avenue of the Americas	member	1989- present
AZ State Board of Accountancy	100 N. 15th ave Phoenix, AZ	member	1988- present

85007

27. Are you now, or have you within the past four (4) years, been a member of any club or organization that, to your knowledge, in practice or in policy, restricts membership or restricted membership during the time that you belonged, on the basis of race, religion, national origin or gender? Yes  No  If "yes", detail the name and nature of the organization, relevant policies and practices, and state whether you intend to continue as a member if appointed by the Board of Governors.

**EMPLOYMENT HISTORY AND PROFESSIONAL BACKGROUND**

28. Concerning your current employer and for all of your employment, including self-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 Name and Address	Type of Business	Occupation/Title	Period of Employment
The Pearl Group, Inc. 4950	consulting	Principal	2002 - present
The University of Tampa 401	educational	Adjunct Professor of	2008-present
Ronald McDonald House 28	Not for Profit	Volunteer	2008-present

See by ID for address

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

Position	Employing Agency	Period of Employment
NONE		

30. Have you ever been responsible or played a role in managing a business or other corporate entity? Yes  No  "Yes", state the name of the business, the dates of your involvement, and provide a brief description of your involvement.

I currently manage my own consulting practice. In this capacity, I frequently assist in the management of small businesses primarily as a CFO or controller. I provide training to businesses on audit, financial management and the implementation of controls.

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

A. Dates of service: \_\_\_\_\_

B. Branch or component: \_\_\_\_\_

C. Date and type of discharge: \_\_\_\_\_

32. Do you currently hold an office or position (appointive, civil service, or other) with the Federal or any foreign government? Yes  No  If "Yes", please list:  
NONE

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

Title of Office: \_\_\_\_\_

Term of Appointment: \_\_\_\_\_

Confirmation results: \_\_\_\_\_

34. 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 or state):

Office Title	Date of Election or Appointment	Term of Office	Level of Government
NONE			

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

A. How frequently were meetings scheduled? NONE

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

Meetings Attended	Meetings Missed	Reason for Absence

35. Have you ever served on any profit or not-for-profit board? Yes  No  If "Yes", state the title, date of appointment, length of service, and provide a brief description of your involvement.  
 Bayshore on the Boulevard Condo Association - Treasurer since 2006  
 Perform as treasurer and board member for condominium association

36. Have you ever been a registered lobbyist or have you lobbied at any level of government at any time during the past five years? Yes  No  If "Yes", please explain:  
 A. Did you receive any compensation other than reimbursement for expenses? Yes  No   
 B. Name of agency or entity you lobbied and the principals you represented:  
 Agency Lobbied \_\_\_\_\_ Principals Represented \_\_\_\_\_

37. Describe your experiences and interests or elements of your personal history that qualify you for this appointment.  
 As a CPA I have the required budgetary and controls skills to perform effectively as a board member. Currently, I teach a graduate level accounting course at The University of Tampa, thus I am familiar with the administration of a college level educational institution. I provide controllership consulting services. I focus on providing audit oversight, the implementation of controls and and training in financial management.

38. Describe your understanding of the role of a member of a university board of trustees.  
 Members are volunteers chartered with the oversight and direction of implementing the university's goals and objectives related to the educational, budgetary and policies in compliance with Florida regulations and academic standards

**CONFLICT OF INTEREST**

39. Describe any involvement with and/or relationship to the university to which you are applying (other than as a student).  
 NONE

40. Have you, or any business of which you have been an owner, officer, or employee, held any employment or contractual relationship during the last four (4) years with the university to which you are seeking appointment? Yes  No  If "Yes", identify:

<u>Name of Business</u>	<u>Your Relationship to Business</u>	<u>Business' Relationship to University</u>
NONE		



41. Have members of your immediate family (spouse, child, parent(s), sibling(s)), or businesses of which members of your immediate family have been owners, officers, or employees, held any employment or contractual relationship during the last four (4) years with the university to which you are seeking appointment? Yes  No  If "Yes", explain:

<u>Name of Business</u>	<u>Family Member's Relationship to you</u>	<u>Family Member's Relationship to Business</u>	<u>Business' Relationship to University</u>
NONE			

42. Do you know of any reason why you will not be able to attend fully the duties of the position to which you have been or will be appointed? Yes  No  If "yes", explain:  
NONE

---



---



---

**REFERENCES**

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

<u>Name</u>	<u>Mailing Address</u>	<u>Zip Code</u>	<u>Area Code/Telephone Number</u>
Dr Lisa Bostick (1)	The University of Tampa	401 W Kennedy Tampa	813.257.3251
Janice Davis (2)	Ronald McDonald House Charities	28 Columbia	813.258.6430
Donna Lee Fabian	4950 Bayshore Blvd #8	Tampa, FL 33611	407.252.0112

(1) The University of Tampa  
401 W Kennedy  
Tampa FL 33606

(2) RMH  
28 Columbia Drive  
Tampa FL 33606

CERTIFICATION

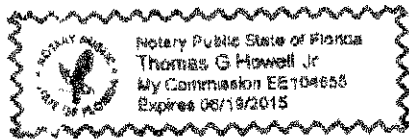
STATE OF Florida  
COUNTY OF Hillsborough

Before me, the undersigned authority, personally appeared Patricia Ullman who after being duly sworn, says: 1) that he/she has carefully prepared or read the answers to the foregoing question; 2) that the information contained in said answers is complete and true; 3) that he/she will, as an appointee, fully support the Constitutions of the United States and the State of Florida. Be it further known that in signing this document the undersigned understands that a background check by the Florida Department of Law Enforcement will be performed on all nominees who are recommended to the Florida Board of Governors and that he/she has received a copy of the Board of Governors' Statement on the Collection, Use or Release of Social Security Numbers.

[Signature]  
Affiant's signature

Sworn to and subscribed before me on this 4 day of June, 2012 by

\_\_\_\_\_



[Signature]  
(signature of notary)  
Thomas G. Howell Jr.  
(typed, printed or stamped name)  
Notary Public  
Commission No.:  
My Commission Expires:

Personally Known \_\_\_\_\_ OR Produced Identification ✓

Type of Identification Produced FL Driver's License

**Statement on the Collection, Use, or Release of Social Security Numbers  
(Master Document - Revised August 2010)**

Florida law requires that public entities provide individuals with a written statement identifying the state or federal law governing the collection, use, or release of social security numbers for each purpose for which the entity collects an individual's social security number. The collection of social security numbers by the Board of Governors is either specifically authorized by law or imperative for the performance of the Board's responsibilities as prescribed by law and the Florida Constitution. The following list identifies the purposes for which social security numbers may be collected, used, or released, and the pertinent authority.

Applicants for University Board of Trustee Positions

- For Level 1 and level 2 criminal background checks conducted by the Florida Department of Law Enforcement for employees and/or Board appointees to university boards of trustees [Required by Fla. Admin. Code 11C-6.003 and Fla. Stat. § 119.071(5) (a) 6]
- The disclosure of the social security number is expressly required by federal or state law or a court order [Authorized by Fla. Stat. § 119.071(5) (a) 6]
- The individual expressly consents in writing to the disclosure of his or her social security number [Authorized by Fla. Stat. § 119.071(5) (a) 6]