

# GOVERNOR'S OFFICE Boards and Appointments

## Application

Date Submitted: 10/30/2015 9:23:48 AM

As a general matter, applications for all positions within state Government are public records, which may be viewed by anyone upon request. However, there are some exemptions from the public records law for 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 portions of your application, please check this box.  Yes

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### Contact

#### 1- General

<b>Title</b>	Mrs.	<b>First Name</b>	Kimberly
<b>Middle/Maiden</b>	Bonder	<b>Last Name</b>	Rezanka
<b>Email Address</b>	Krezanka@deanmead.com	<b>Cell Phone</b>	s. 119.071(4)(d) F.S.
<b>Race</b>	Caucasian	<b>Gender</b>	Female
<b>Fax</b>	s. 119.071(4)(d) F.S.	<b>Disability</b>	No

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### Addresses

Specify the preferred mailing address:  Business

#### 2- Residence

<b>Address Line 1</b>	s. 119.071(4)(d) F.S.	<b>Address Line 2</b>	
<b>City</b>	s. 119.071(4)(d) F.S.	<b>State</b>	s. 119.071(4)(d) F
<b>County</b>	s. 119.071(4)(d) F.S	<b>Zip / Postal Code</b>	s. 119.071(4)(d)
<b>Phone Number</b>			

#### 3- Business

<b>Address Line 1</b>	7380 Murrell Road	<b>Address Line 2</b>	Suite 200
<b>City</b>	Melbourne	<b>State</b>	Florida
<b>Zip / Postal Code</b>	32940	<b>Phone Number</b>	321-258-8900

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### Other Residences

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4-A. List all your places of residence for the last ten (10) years.

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## Application

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Address	City & State	Start Date	End Date
s. 119.071(4)(d) F.S.	s. 119.071(4)(d) F.S.	10/03/1998	Present

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

Address	City & State	Start Date	End Date
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### Personal Information

5- Date of Birth s. 119.071(4)(d) F.S. Place of Birth Winter Park, Florida  
6- Driver License # R252502658220 Issuing State Florida  
7- Social Security # s. 119.071(5)(a) F.S.  
8- Have you ever used or been known by any other legal name? Yes  
9- A. Are you a United States citizen? Yes

Kimberly Beatrice Bonder, full maiden name

B. If you are a naturalized citizen, date of naturalization

10- Since what year have you been a continuous resident of Florida? 1965

11- Vote

Are you a registered Florida voter? Yes  
County of registration Brevard Current Party Affiliation Republican

### Education

12-A. High School Year Graduated

B. List all postsecondary educational institutions attended

Name & Location	Start Date	End Date	Certificates / Degrees Received
University of Florida	8/1983	12/1987	Bachelor of Science in Business Administration Finance
University of Florida College of Law	1/1989	12/1991	Juris Doctorate

### Employment

13- Are you or have you ever been a member of the armed forces of the United States? No

A. Date of Service

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### B. Branch or component

### C. Date & Type of Discharge

14- Concerning your current employer and for all of your employment during the last ten 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 / Job Title	Start Date	End Date
Dean Mead	Law Firm	Attorney	7/1/2001	Present

15- Have you ever been employed by any state, district, or local governmental agency in Florida? Yes

Position	Employing Agency	Start Date	End Date
Staff Attorney	18th Judicial Circuit	1/1992	7/1994
Assistant State Attorney	18th Judicial Circuit State Attorney	8/1994	5/1998

## Appointments

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

As an attorney, I hold myself and others in the field to the high standards required by the Rules of Professional Conduct adopted by the Florida Bar. I served as a member of the 18th Judicial Circuit Unlicensed Practice of Law Committee for several years and worked to enforce legal standards. As Brevard County Bar President in 2006-2007, my focus for my term was professionalism and civility in the legal profession. These experiences will assist me in evaluating issues related to breaches or concerns regarding the public trust held by public officers and employees.

C. Have you received any awards or recognitions relating to the subject matter of this appointment?  
Yes

Martindale-Hubbell AV Preeminent Rating (2012)

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

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

Home Builders & Contractors Association of Brevard  
Board of Directors (code of ethics in place and enforced)  
Lead Brevard, Board of Directors (code of ethics in place and enforced)

# GOVERNOR'S OFFICE Boards and Appointments

## Application

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17- Do you currently hold an office or position (appointive, civil service, or other) with the federal or any foreign government? No

18- Have you previously been appointed to any office that required confirmation by the Florida Senate? No

Title of Office	Term of Appointment	Confirmation Result
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19- A. Have you ever been elected or appointed to any public office in this state? No

Office Title	Date of Election or Appointment	Term of Office	Level of Government (city, county, district, state, federal)
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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 reasons(s) for your absence(s)

Meetings Attended	Meetings Missed	Reason for Absence
-------------------	-----------------	--------------------

### Violation

20- 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.) No

Date	Place	Nature	Disposition
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21- Has probable cause ever been found that you were in violation of the Code of Ethics for Public Officers and Employees, Part III, Chapter 112, F.S.? No

Date	Nature of Violation	Disposition
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22- Have you ever been suspended from any office by the Governor of the State of Florida? No

Title of Office	Reason of Suspension	
Date of Suspension	Result	Please Select

23- Have you ever been refused a fidelity, surety, performance, or other bond? No

# GOVERNOR'S OFFICE Boards and Appointments

## Application

Date Submitted: 10/30/2015 9:23:48 AM

### Certifications

**24- Have you held or do you hold an occupational or professional license or certificate in the State of Florida?** Yes

Error: Subreport could not be shown.

**25- 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

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

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

Agency Lobbies	Principal Represented
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### Disclosures

**26- If required by law or administrative rule, will you file financial disclosure statements?** Yes

**27- A. Have you, or businesses of which you have been an 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

Name of Business	Your Relationship to Business	Business Relationship to Agency
Dean Mead	Shareholder, Vice President	Brevard County Valud Adjustment Board, legal representation, City of Clearwater legal, Tampa Bay Water legal, Executive Office of the Governor legal, Pinellas County legal, Charlotte County legal
Dean Mead	Shareholder, Vice President	Manatee County legal, Florida Senate legal

**B. Have members of your immediate family (spouse, child, parents(s), siblings(s)), 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

Name of Business	Family Member's Relationship to You	Family Member's Relationship to Business	Business Relationship to Agency
DIOT, Inc.	Husband	Owner	City of Cocoa service contract, City of Cocoa Beach service contract

### References & Affiliations

**28- 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.**

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## Application

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Name	Mailing Address	Zip Code	Phone Number
Paul Gougelman	200 East Broward Boulevard, Suite 1900, Fort Lauderdale, Florida	33301	3215087800
Steve Charpentier	2285 West Eau Gallie Boulevard, Melbourne, Florida	32935	3212588448
Maureen Matheson	559 Coconut Street, Stellite Beach, Florida	32927	3217733979

**29- 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(s) Held & Term	Date of Membership
Home Builders and Contractors Association of Brevard	1500 West Eau Gallie Boulevard, Suite B2 Melbourne, Florida 32935	Board Member	#Error
Lead Brevard	123 Barton Boulevard, Suite 101 Rockledge, Florida 32955	Board Member	#Error
Vassar B. Carlton Inn of Court	1524 Palm Bay Road Northeast, Palm Bay, Florida 32905	Captain, Mentor	#Error
Brevard County Civilian military Community Relations Council	817 Dixon Boulevard, Suite 6B, Cocoa, Florida 32922	Member	04/30/2015
Junior League of South Brevard	1501 Avocado Avenue, Suite 2 Melbourne, Florida 32935	Member	#Error

**30- 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?** No

**31- Are you now, or in the past three years have you been, a member of any club or organization that, to your knowledge, in practice or policy, restricts membership or restricted membership during the time that you belonged on the basis of race, religion, national origin, or gender? If so, detail the name and nature of the club(s) or organization(s), relevant policies and practices, and state whether you intend to continue as a member if you appointed by the Governor?** No

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### Boards of Interest

**GOVERNOR'S OFFICE**  
**Boards and Appointments**  
Application

Date Submitted: 10/30/2015 9:23:48 AM

<b>Functional Category</b>	<b>Board Name</b>	<b>Seat</b>	<b>Seat Qualification</b>	<b>Reappointment</b>
Misc	Commission on Ethics	1	Governor's Appointees	No
Misc	Commission on Ethics	2	Governor's Appointees	No
Misc	Commission on Ethics	3	Governor's Appointees	No
Misc	Commission on Ethics	4	Governor's Appointees	No

# GOVERNOR'S OFFICE Boards and Appointments

## Application

Date Submitted: 9/15/2015 10:39:20 PM

As a general matter, applications for all positions within state Government are public records, which may be viewed by anyone upon request. However, there are some exemptions from the public records law for 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 portions of your application, please check this box.  Yes

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### Contact

#### 1- General

<b>Title</b>	Mr.	<b>First Name</b>	Guy
<b>Middle/Maiden</b>	William	<b>Last Name</b>	Norris
<b>Email Address</b>	gnorris@norrisattorneys.com	<b>Cell Phone</b>	s. 119.071(4)(d) F.S.
<b>Race</b>	Caucasian	<b>Gender</b>	Male
<b>Fax</b>	s. 119.071(4)(d) F.S.	<b>Disability</b>	No

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### Addresses

Specify the preferred mailing address:  Business

#### 2- Residence

<b>Address Line 1</b>	s. 119.071(4)(d) F.S.	<b>Address Line 2</b>	
<b>City</b>	s. 119.071(4)(d) F.S.	<b>State</b>	s. 119.071(4)(d) F
<b>County</b>	s. 119.071(4)(d) F.S.	<b>Zip / Postal Code</b>	s. 119.071(4)(d)
<b>Phone Number</b>	s. 119.071(4)(d) F.S.		

#### 3- Business

<b>Address Line 1</b>	253 NW Main Boulevard	<b>Address Line 2</b>	
<b>City</b>	Lake City	<b>State</b>	Florida
<b>Zip / Postal Code</b>	32055	<b>Phone Number</b>	386-752-7240

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### Other Residences

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4-A. List all your places of residence for the last ten (10) years.



# GOVERNOR'S OFFICE Boards and Appointments

## Application

Date Submitted: 9/15/2015 10:39:20 PM

Address	City & State	Start Date	End Date
s. 119.071(4)(d) F.S.	s. 119.071(4)(d) F.S.	January 1, 2002	Present

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

Address	City & State	Start Date	End Date
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### Personal Information

**5- Date of Birth** s. 119.071(4)(d) F.S. **Place of Birth** Lake City, Florida  
**6- Driver License #** N 620-299-62-183-0 **Issuing State** Florida  
**7- Social Security #** s. 119 071(5)(a) F.S.  
**8- Have you ever used or been known by any other legal name?** Yes **9- A. Are you a United States citizen?** Yes

Guy Williams Norris, Guy W Norris

**B. If you are a naturalized citizen, date of naturalization**

**10- Since what year have you been a continuous resident of Florida?** 1962

**11- Vote**

**Are you a registered Florida voter?** Yes  
**County of registration** Columbia **Current Party Affiliation** Republican

### Education

**12-A. High School** Columbia High School, Lake City Florida **Year Graduated** 1980

**B. List all postsecondary educational institutions attended**

Name & Location	Start Date	End Date	Certificates / Degrees Received
University of Florida, Gainesville, Florida	September 1980	August 1986	Bachelor of Science
Stetson University College of Law, St. Petersburg, Florida	January 1987	December 1987	NA Transferred to UF Law
University of Florida College of Law, Gainesville, Florida	January 1988	December 1989	Juris Doctor

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### Employment

13- Are you or have you ever been a member of the armed forces of the United States? No

A. Date of Service

B. Branch or  
component

C. Date & Type of  
Discharge

14- Concerning your current employer and for all of your employment during the last ten 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 / Job Title	Start Date	End Date
Norris and Norris, P.A., 253 NW Main Boulevard, Lake City, FL 32055	Law Firm	Attorney	April 1, 1993	Present

15- Have you ever been employed by any state, district, or local governmental agency in Florida? No

Position	Employing Agency	Start Date	End Date
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### Appointments

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

B. Have you received any degree(s), professional certification(s), or designations(s) related to the subject matter of this appointment? Yes

Juris Doctorate, University of Florida College of Law,  
December 1990

# GOVERNOR'S OFFICE Boards and Appointments

## Application

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I am a practicing attorney for more than 25 years, commencing April 26, 1990, following my graduation from UF Law in December, 1989. I was a member of the Florida Law Review. I am the external general counsel of The School Board of Columbia County, Florida. I have served The Florida Bar as a member of the Young Lawyers' Board of Governors, the Real Property, Probate and Trust Law Section of The Florida Bar Executive Council, and served as the chairman and co-chairman of numerous RPPTL sponsored continuing legal education seminars, and have served as a presenter at numerous RPPTL sponsored continuing legal education seminars. I am the author of chapters in RPPTL sponsored publications of Florida Real Property Complex Transactions and Florida Real Property Sales Transactions. I previously served as a member and Chairman of the Judicial Nominations Commission for the Third Judicial Circuit (Gov. Bush appointed), and as a member of the Third Judicial Circuit Bar Grievance Committee. I hold an AV Preeminent rating by peer attorneys through Martindale-Hubbell. I received The Florida Bar President's Pro Bono Service Award recognition on behalf of the Third Judicial Circuit in 2004. I am very active in the community with my service to the local Chamber of Commerce and Rotary Club, serving as president of both. I was appointed the Columbia County State Committeeman for the Republican Party of Florida in 1994 and elected to the position by general election in 1996. I have coached youth soccer for the last 12 years.

I believe it is essential that the general public has trust in its elected and appointed government office holders. The Florida Commission on Ethics serves the public by enforcing the ethics rules for all such office holders. During my 25 years of practice, I have strived to perform with the highest degree of professionalism in my service as an attorney and as a citizen.

An appointment to the Florida Commission on Ethics would provide an unique opportun

**C. Have you received any awards or recognitions relating to the subject matter of this appointment?**

Yes

The Florida Bar Presidents Pro Bow service Award, 2004

**D. Identify all association memberships and association offices held by you that relate to this appointment**

The Florida Bar  
Florida School Board Attorneys Association

**17- Do you currently hold an office or position (appointive, civil service, or other) with the federal or any foreign government?** No

# GOVERNOR'S OFFICE Boards and Appointments

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**18- Have you previously been appointed to any office that required confirmation by the Florida Senate?**  
No

Title of Office	Term of Appointment	Confirmation Result
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**19- A. Have you ever been elected or appointed to any public office in this state?** Yes

Office Title	Date of Election or Appointment	Term of Office	Level of Government (city, county, district, state, federal)
Commissioner, Judicial Nominations Commission for the Third Judicial Circuit Court	07/31/2001	4 years	State

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

**1- How frequently were meetings scheduled** As needed

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

Meetings Attended	Meetings Missed	Reason for Absence
10 or more	0	NA

### Violation

**20- 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.)** No

Date	Place	Nature	Disposition
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**21- Has probable cause ever been found that you were in violation of the Code of Ethics for Public Officers and Employees, Part III, Chapter 112, F.S.?** No

Date	Nature of Violation	Disposition
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**22- Have you ever been suspended from any office by the Governor of the State of Florida?** No

<b>Title of Office</b>	<b>Reason of Suspension</b>
<b>Date of Suspension</b>	<b>Result</b> Please Select

# GOVERNOR'S OFFICE Boards and Appointments

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23- Have you ever been refused a fidelity, surety, performance, or other bond? No

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### Certifications

24- Have you held or do you hold an occupational or professional license or certificate in the State of Florida? Yes

Error: Subreport could not be shown.

25- 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? No

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

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

Agency Lobbies	Principal Represented

### Disclosures

26- If required by law or administrative rule, will you file financial disclosure statements? Yes

27- A. Have you, or businesses of which you have been an 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

Name of Business	Your Relationship to Business	Business Relationship to Agency
Norris and Norris, P.A.	Managing Shareholder and President	External General Counsel to The School Board of Columbia County, Florida

B. Have members of your immediate family (spouse, child, parents(s), siblings(s)), 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? No

Name of Business	Family Member's Relationship to You	Family Member's Relationship to Business	Business Relationship to Agency

### References & Affiliations

28- 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.

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Name	Mailing Address	Zip Code	Phone Number
The Hon. Judge Edwin A. Scales	Third District Court of Appeal, 1901 S. Roosevelt Boulevard, No. 307N, Key West, FL	33040	3052293200
The Hon. Judge Leandra Johnson	Third Judicial Circuit Court, , Post Office drawer 2123, Lake City, FL	32056	3867192012
The Hon. Judge Gregory S. Parker	Chief Judge, Third Judicial Circuit Court, Post Office Drawer 1000, Perry, FL	32348	8508383520

**29- 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(s) Held & Term	Date of Membership
Lake City Columbia County Chamber of Commerce	106 S. Marion Street, Lake City, FL 32055	President, 2000	#Error
Rotary Club of Lake City, Florida	P.O. Box 1695, Lake City, FL 32056	President, 2004	#Error
Florida Alpha Educational Foundation PDT, Inc.	253 NW Main Blvd., Lake City, FL 32055	President, 2009	#Error

**30- 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?** No

**31- Are you now, or in the past three years have you been, a member of any club or organization that, to your knowledge, in practice or policy, restricts membership or restricted membership during the time that you belonged on the basis of race, religion, national origin, or gender? If so, detail the name and nature of the club(s) or organization(s), relevant policies and practices, and state whether you intend to continue as a member if you appointed by the Governor?** No

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### Boards of Interest

Functional Category	Board Name	Seat	Seat Qualification	Reappointment
Misc	Commission on Ethics	1	Governor's Appointees	No

**GOVERNOR'S OFFICE**  
**Boards and Appointments**  
Application

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Misc	Commission on Ethics	2	Governor's Appointees	No
Misc	Commission on Ethics	3	Governor's Appointees	No
Misc	Commission on Ethics	4	Governor's Appointees	No

## Questionnaire For Gubernatorial Appointments

### Contact

#### 1- General

<b>Title</b>	Dr.	<b>First Name</b>	Daniel
<b>Middle / Maiden</b>	Thomas	<b>Last Name</b>	Brady
<b>Email Address</b>	daniel.thomas.brady@gmail.com	<b>Cell Phone</b>	305-298-0335
<b>Race</b>	Caucasian	<b>Gender</b>	Male
<b>Fax #</b>	305-532-5322	<b>Do you have a disability?</b>	No

### Addresses

Specify the preferred mailing address  Residential

#### 2- Residence

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<b>Address Line 1</b>	1080 NE 95th Street	<b>Address Line 2</b>	
<b>City</b>	Miami Shores	<b>State</b>	Florida
<b>County</b>	Miami-Dade	<b>Zip / Postal Code</b>	33138
<b>Phone Number</b>	305-756-0476		

#### 3- Business

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<b>Address Line 1</b>	1680 Meridian Avenue	<b>Address Line 2</b>	Suite 401
<b>City</b>	Miami Beach	<b>State</b>	Florida
<b>Zip / Postal Code</b>	33139	<b>Phone Number</b>	305-531-5341

### Other Residences

4- A. List all your places of residence for the last ten (10) years.

Address	City & State	Start Date	End Date

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



Address	City & State	Start Date	End Date

**Personal Information**

5- Date of Birth                      12/03/1947                      Place of Birth                      Springfield, Mass  
 6- Driver License                      B630178474430                      Issuing State                      Florida  
 Number  
 7- Social Security                      s. 119.071(5)(a) F.S.  
 Number  
 8- Have you ever used or been known by any other legal name? No                      9- A. Are you a United States citizen? Yes

B. If you are a naturalized citizen, date of naturalization

10- Since what year have you been a continuous resident of Florida?                      1952

**11- Vote**

Are you a registered Florida voter? Yes

County of registration                      Miami-Dade                      Current party affiliation                      Democrat

**Education**

12- A. High School                      Hialeah High                      Year Graduated                      1968

**B. List all postsecondary educational institutions attended**

Name & Location	Start Date	End Date	Certificates / Degrees Received
Miami Dade College	9/1966	5/1968	AA
Florida State University	9/1968	4/1971	BS
Florida State University	9/1971	4/1973	MSW
Florida International University	9/1976	4/1979	MBA

### Employment

13- Are you or have you ever been a member of the armed forces of the United States? No

A. Date of service

B. Branch or component

C. Date & Type of Discharge

14- Concerning your current employer and for all of your employment during the last ten 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 / Job Title	Start Date	End Date
Douglas Gardens CMHC, 1680 Meridian Avenue, Suite 501, Miami Beach, Florida 33139	Mental Health Center	Executive Director	7/15/1979	current

15- Have you ever been employed by any state, district, or local governmental agency in Florida? Yes

Position	Employing Agency	Start Date	End Date
Adjunct Professor	Florida International University	8/2001	current

### Appointments

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

I have an excellent understanding of human behavior and motivation. I teach ethics in

C. Have you received any awards or recognitions relating to the subject matter of this appointment? No

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

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

17- Do you currently hold an office or position (appointive, civil service, or other) with the federal or any foreign government? No

18- Have you previously been appointed to any office that required confirmation by the Florida Senate? No

Title of Office	Term of Appointment	Confirmation Results

19- A. Have you ever been elected or appointed to any public office in this state? No

Office Title	Date of Election or Appointment	Term of Office	Level of Government (city, county, district, state, federal)

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 reasons(s) for your absence(s)

Meetings Attended	Meetings Missed	Reason for Absence

**Violation**

20- 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.) No

Date	Place	Nature	Disposition

21- Has probable cause ever been found that you were in violation of the Code of Ethics for Public Officers and Employees, Part III, Chapter 112, F.S.? No

Date	Nature of Violation	Disposition

22- Have you ever been suspended from any office by the Governor of the State of Florida? No

Title of Office	Reason for Suspension
Date of Suspension	Result

23- Have you ever been refused a fidelity, surety, performance, or other bond? No

Certifications

24- Have you held or do you hold an occupational or professional license or certificate in the State of Florida? No

License / Certificate Title & Number	Original Issue Date	Issuing Authority	Disciplinary Action
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25- 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? No

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

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

Agency Lobbied	Principal Represented
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Disclosures

26- If required by law or administrative rule, will you file financial disclosure statements? No

27- A. Have you, or businesses of which you have been an 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

Name of Business	Your Relationship to Business	Business Relationship to Agency
Dougals Gardens CMHC	Executive Director	The Agency is a vendor for the Department of Children and Families

B. Have members of your immediate family (spouse, child, parents(s), siblings(s)), 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

Name of Business	Family Member's Relationship to You	Family Member's Relationship to Business	Business Relationship to Agency
Miami Dade School System	Wife	employee	Teacher

**References & Affiliations**

28- 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	Zip Code	Phone Number
Nelson L Adams, MD	1060 NE 95th Street, Miami Shores, Florida	33138	3056534105
Margaret Lynn Duggar	1018 Thomasville Road, Suite 110, Tallahassee, Florida	32302	8502228877

29- 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(s) Held & Term	Date of Membership
Florida Council on Aging	1018 Thomasville Road, Suite 110, Tallahassee, Florida	Board Member	1985
Florida Council for CMH	316 East Park Avenue, Tallahassee, Florida	Board Member	2011
South Florida Hospital and Healthcare Association	1855 Griffen Road, Building A, Room A415, Danla Beach, Florida	Board Member	2008
South Florida Behavioral Healthcare Network	7205 Corporate Center Drive, Suite 200, Miami, Florida	Board Member	2012

Questionnaire Preview

National Association of Social Workers	750 First Street, NE, Suite 800, Washington, DC	Member	1985
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30- 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? No

31- Are you now, or in the past three years have you been, a member of any club or organization that, to your knowledge, in practice or policy, restricts membership or restricted membership during the time that you belonged on the basis of race, religion, national origin, or gender? If so, detail the name and nature of the club(s) or organization(s), relevant policies and practices, and state whether you intend to continue as a member if you appointed by the Governor? No

Boards of Interest

Functional Category	Board Name	Seats	Seat Qualification	Reappointment
All	Commission on Ethics	4	Governor's Appointees	No

Please upload your resume / CV  
 D:\WebSites\EOGQuestionnaire\Documents\Resume  
 5.28.2015\_25061509471592.pdf

### Certificate & Memorandum

Yes I understand that any appointment tendered to me will be contingent upon the results of a background investigation, and I am aware that withholding information or making false statements on this application may be the basis for non-appointment by the Executive Office of the Governor. I agree to these conditions, and under the penalties of perjury I declare that I have read the foregoing application and that the facts stated in it are true, correct, and complete to the best of my knowledge and belief.

Yes As a general matter, applications for all positions within state Government are public records, which may be viewed by anyone upon request. However, there are some exemptions from the public records law for 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 portions of your application, please check this box.

Brady, Daniel

Signature

If you need additional guidance as to the applicability of any public records law exemption to your situation, please contact the Office of the Attorney General.

Office of the Attorney General

PL-01, The Capitol

Tallahassee, Florida 32399

(850) 245-0158

## Professional Resume

Daniel T. Brady, Ph.D.  
1080 Northeast 95<sup>th</sup> Street  
Miami Shores, Florida 33138  
(305) 756-0476 or (305) 298-0335 (cell)  
bradydan@bellsouth.net

### Professional Experience:

**Chief Executive Officer,**  
**Douglas Gardens Community Mental Health Center, Inc.**  
**Miami Beach, Florida**  
**1979 to present**

The Douglas Gardens Community Mental Health Center provides a range of emergency, outpatient, day treatment/partial hospitalization, residential and housing services to mentally ill residents of the Miami Beach area and to older adults on a regional basis. In addition, the Center is also actively involved in services to formerly homeless individuals and victims of domestic violence.

**Chief Community Program and Government Affairs Officer,**  
**Miami Jewish Health System**  
**Miami, Florida**  
**July, 1992 to June, 2011**

**Executive Director,**  
**Florida PACE Centers, Inc.**  
**Miami, Florida**  
**January, 1995 to June, 2011**

The Miami Jewish Home and Hospital for the Aged (MJHHA) is the largest geriatric care system in the Southeastern United States. The main campus, located in the City of Miami, consists of a 462 bed nursing home (including short term rehabilitation, ventilator dependent care, and Alzheimer's/dementia units), a 32 bed geriatric hospital, outpatient ambulatory healthcare center and assistive and independent living facilities with a total of 192 beds.

MJHHA is equally committed to the development of community long term care services. Programs include Channeling (a Medicaid Nursing Home Diversion program), Douglas Gardens Community Care (a Community Care for the Elderly Lead Agency), the Medicaid Alzheimer's Wavier (Miami-Dade and Broward Counties), Project Independence at Home (a Florida Long Term Care Diversion program), and Florida PACE Centers, Inc. (Program of All Inclusive Care to the Elderly – a Medicare Advantage and a pre-paid Medicaid plan). This set of



Daniel T. Brady  
Professional Resume

programs represents the cutting edge of community long term care, is operated through an organized network of community providers and currently serves over 3,000 frail elderly on an annual basis.

During my tenure at the Miami Jewish Home and its affiliate corporations I have:

- Organized and developed, from its inception, Florida's first and largest Program of All Inclusive Care for Elderly, Florida PACE Centers, this included the development of an inpatient, physician and community services network;
- Moved MJHHA into a major role in the provision of community long term care by securing CCE Lead Agency and Florida Long Term Care Diversion status for the institution;
- Provided leadership in addressing a variety of public policy and funding issues with City, County, regional and State executive and legislative bodies;

**Executive Director,  
Dade-Monroe District Mental Health Board, Inc.  
Miami, Florida  
1975 – 1979**

The District Board Mental Health Board was responsible for community planning and the programming and evaluation of a wide range of mental health and alcohol abuse services in this two county urban area under contract to the State of Florida.

**Director of Health Planning,  
Pee Dee Regional and Development Council, Inc.  
Florence, South Carolina  
1974 – 1975**

Directed a small Health Planning Unit in a rural Council of Governments. Duties included a wide range of health and health related planning and community organization.

#### **Academic Appointments**

##### **Adjunct Faculty:**

**Florida International University  
School of Social Work  
Miami, Florida**

I have taught research design, public policy and human behavior at the graduate and undergraduate levels.

Daniel T. Brady  
Professional Resume

**Education:**

**Doctor of Philosophy, Barry University, Miami, Florida.** Dissertation topic Organizational Commitment of Professional Staff in Health and Human Service Agencies. I defended my dissertation in June of 1997.

**Master of Business Administration, Florida International University, Miami, Florida.** Degree awarded in December of 1979.

**Master of Social Work, Florida State University, Tallahassee, Florida.** Degree awarded in March of 1973.

**Bachelor of Science, Florida State University, Tallahassee, Florida.** Degree awarded in March of 1971.

**Member of Board of Directors:**

Florida Council on Aging, Inc.  
South Florida Behavioral HealthCare Network, Inc.  
Florida Council for Community Mental Health

**Member:**

National Association of Social Work (NASW)  
American Society on Aging (ASA)  
Council on Social Work Education (CSWE)  
Florida Council on Aging (FCOA)  
Florida Council for Community Mental Health (FCCMH)  
National Council for Behavioral Health Care

**Board/Committee Membership:**

Alliance for Aging, Aging in a Healthy Community, Co-Chair  
South Florida Hospital and Healthcare Association, Education Committee and Legislative Committee  
United Way of Miami Dade County, Public Policy Committee  
Florida Council for Community Mental Health, Health Reform Committee  
CBO Advisory Committee, Miami Dade County  
Managed Care Committee, Health Choice Network

**References:**

Available upon request.