

FOR THE OFFICE OF THE GOVERNOR  
The Capitol, Tallahassee, Florida 32399-0001

The information from this page has been requested and will be used exclusively by the GOVERNOR'S OFFICE.  
Please type or use black ink.

1. Board of Interest: 13<sup>th</sup> Jud Circuit, 2<sup>nd</sup> DCA, Supreme Court
2. Current Employer and Occupation: Barker, Rodems & Cook, P.A. - Attorney
3. Are you applying for reappointment: Yes  No
4. \*Do you have a disability? Yes  No  If "Yes", please describe your disability that would qualify you for this appointment, if applicable.
  
5. \*Sex: Male  Female
6. \*Race: White  Native-American/Alaskan Native   
Hispanic-American  Asian/Pacific Islander   
African-American
7. Do you now, or have you, within the last three years, 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
8. Email Address: cbarker@barkerrodemsandcook.com
9. Cellular Telephone Number: (813) 205-3487

Chris A. Barker

Applicant's Name, including name  
commonly used (Please print)

RECEIVED

JUL 11 2007

GOVERNOR'S APPOINTMENTS  
OFFICE

\* This information will be used to provide demographic statistics and is not requested for the purpose of discriminating on any basis.

# 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.

07/06/07

1. Name: Mr. Barker Chris Date Completed A.  
MR./MRS./MS. LAST FIRST MIDDLE/MAIDEN

2. Business Address: 400 North Ashley Drive, Suite 2100 Tampa  
STREET OFFICE # CITY  
FL 33602 (813)489-1001  
POST OFFICE BOX STATE ZIP CODE AREA CODE/PHONE NUMBER

3. Residence Address: 160 Columbia Drive #507 Tampa Hillsborough  
STREET CITY COUNTY  
FL 33606 (813)251-6138  
POST OFFICE BOX STATE ZIP CODE AREA CODE/PHONE NUMBER

Specify the preferred mailing address: Business  Residence  Fax # (813)489-1008  
(optional)

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

ADDRESS CITY & STATE FROM TO  
160 Columbia Dr. #507 Tampa, FL May 2004 - Present  
480 West Davis Blvd. Tampa, FL Aug 1996 - May 2004

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  
1205 Spruce Circle Sheffield, AL 1970 - Current

5. Date of Birth: 07/24/1965 Place of Birth: Sheffield, AL

6. Social Security Number: \_\_\_\_\_

7. Drive: License Number: B626-101-65-264-0 Issuing State: FL

8. Have you ever used or been known by any other legal name? Yes  No  If "Yes" Explain  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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? 1992

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

A. County of registration: Hillsborough B. Current Party Affiliation: Democrat

12. Education

A. High School: Sheffield High School Sheffield, AL Year Graduated: 1983

(NAME AND LOCATION)

B. List all postsecondary educational institutions attended:

NAME & LOCATION	DATES ATTENDED	CERTIFICATES/DEGREES RECEIVED
<u>Birmingham-Southern College</u> <u>- Birmingham, AL</u>	<u>1983-1987</u>	<u>BA - History</u>
<u>University of Alabama Law School</u> <u>- Tuscaloosa, AL</u>	<u>1987-1990</u>	<u>JD</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:

DATE	PLACE	NATURE	DISPOSITION
<u>No</u>			

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/JOB TITLE	PERIOD OF EMPLOYMENT
<u>Barker Rodems &amp; Cook</u> <u>400 North Ashley Dr. #2100</u> <u>Tampa, FL 33602</u>	<u>Law Firm</u>	<u>Attorney-</u> <u>President/</u> <u>Managing Attorney</u>	<u>12/2000 - 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
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17. A. State your experiences and interests or elements of your personal history that qualify you for this appointment.

I have trial and litigation experience in all state and federal courts within Florida. I have seen firsthand the importance and necessity of having qualified and committed members of the judiciary. I know that public confidence, and the rights of all citizens are served best by having judges who impartially and intelligently guide the legal system.

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:

Other than my Juris Doctor degree, I have also been certified as a mediator of civil disputes by the Florida Supreme Court and have appeared before, and been appointed to mediate by, judges of both state and federal courts.

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

As an attorney, I have received an evaluation/rating of AV from Martindale-Hubbell based upon evaluations by attorneys and judges. This is the highest rating available.

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

Florida Bar Alabama Bar Hillsborough County Bar Association, American Bar Association, Florida Justice Association, American Association for Justice National Crime Victims Bar Association, Florida Academy of Professional Mediators

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):

N/A

- (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
N/A		

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

LICENSE/CERTIFICATE TITLE & NUMBER	ORIGINAL ISSUE DATE	ISSUING AUTHORITY	DISCIPLINARY ACTION/DATE
Bar #885568	May 1991	Florida Supreme Court	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	BUSINESS' RELATIONSHIP TO AGENCY

- 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  No  If "Yes", explain:

NAME OF BUSINESS	FAMILY MEMBER'S RELATIONSHIP TO YOU	FAMILY MEMBER'S RELATIONSHIP TO BUSINESS	BUSINESS RELATIONSHIP TO AGENCY

26. 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 LOBBIED	PRINCIPAL REPRESENTED
N/A	

27. 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	AREA CODE/PHONE NUMBER
Steve Burton	100 North Tampa St. #3500 Tampa, FL	33602	(813) 390-8285 or 225-3020
Chris Rodems	400 North Ashley Dr. #2100 Tampa, FL	33602	(813) 489-1001
Jane Toombs	633 Ontario Ave. Tampa, FL	33606	(813) 258-5999

28. 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(S) OF MEMBERSHIP
CEO Council of Tampa Bay, Inc.	633 Ontario Ave. Tampa, FL 33606	Director 2001 - Present	2001 - Present

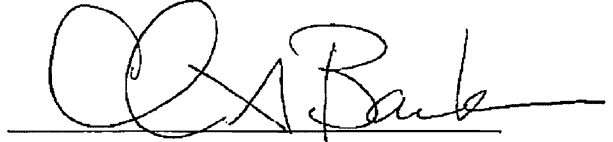
29. Do you know of any reason why you will not be able to attend fully to the duties of the office or position to which you have been or will be appointed? Yes  No  If "Yes", explain:

30. If required by law or administrative rule, will you file financial disclosure statements? Yes  No

# CERTIFICATION

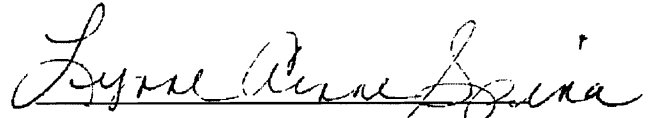
## STATE OF FLORIDA, COUNTY OF

Before me, the undersigned Notary Public of Florida, personally appeared CHRIS A. BARKER, 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 of Applicant-Affiant

Sworn to and subscribed before me  
this 6<sup>th</sup> day of JULY, 2007.



Signature of Notary Public-State of Florida

NOTARY PUBLIC-STATE OF FLORIDA  
 Lynne Anne Spina  
Commission # DD490021  
Expires: DEC. 26, 2009  
Bonded Thru Atlantic Bonding Co., Inc.

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

My commission expires: 12/26/09

Personally Known  OR Produced Identification

Type of Identification Produced \_\_\_\_\_

(seal)