IN THE CIRCUIT COURT OF THE

TWENTIETH JUDICIAL CIRCUIT

IN AND FOR CHARLOTTE COUNTY,

FLORIDA

IN RE: THE GUARDIANSHIP OF

Case No:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Division: Guardianship

 Alleged Incapacitated Person.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/

**NOTICE OF PETITIONS TO DETERMINE INCAPACITY**

**AND FOR THE APPOINTMENT OF GUARDIAN**

TO: Respondent, name, address

 Attorney/Elisor for Repondent, name, address

YOU ARE HEREBY NOTIFIED that Petitions have been filed seeking a determination that you, the Respondent, are incapacitated and to seek the appointment of a guardian over your person and/or property. Copies of the Petition to Determine Incapacity and the Petition for Appointment of Guardian are attached to this notice. Pursuant to Rule 5.550, Fla.Prob.R., this Notice and a copy of the Petition to Determine Incapacity shall be personally served by the attorney/elisor appointed by the court, who may be the court appointed counsel for the alleged incapacitated person. The attorney/elisor shall read this Notice to the alleged incapacitated person, but need not read the Petition. A return of service shall be filed by the attorney/elisor certifying that the Notice and Petition have been served on and the Notice read to the alleged incapacitated person. No responsive pleading is required and no default may be entered for failure to file a responsive pleading. The allegations of the Petition are deemed denied. In addition, a copy of the Petition and the notice shall also be served on counsel for the alleged incapacitated person, and on all next of kin of the alleged incapacitated person.

**NOTICE OF HEARING**

There will be a hearing on the Petition to Determine Incapacity before the Honorable Judge Paul Alessandroni of the above Court, at CHARLOTTE COUNTY JUSTICE CENTER, 350 East Marion Avenue, Punta Gorda, Florida, on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ at \_\_\_\_\_\_ A.M./P.M.

 The reason for this hearing is to inquire into your capacity and to determine whether a guardian is to be appointed over your person or property or both.

 You have the right to attend this hearing and to present whatever evidence is appropriate. An attorney has been appointed to represent you. The name, address, telephone number and E-mail address of the attorney are: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

 You have the right to substitute your own attorney for the attorney appointed by the court.

 If you are determined to be incapable of exercising any of the rights enumerated in the Petition to Determine Incapacity, a guardian may be appointed to exercise those rights on your behalf. If a guardian is appointed, the guardian may have full or partial control of your real estate and personal property, may have the care and custody of your person, and may have the right to regulate certain or all of your activities.

 Dated \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 20\_\_.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Attorney for Petitioner

Certificate of Service

 I HEREBY CERTIFY that a true and correct copy of the above and foregoing Notice has been provided to:

Attorney/Elisor (Attorney/Elisor’s name, address, email address) via \_\_\_\_(manner of service.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Attorney for Petitioner Date

**If you are a person with a disability who needs any accommodation in order to participate in this proceeding, you are entitled, at no cost to you, to the provision of certain assistance. Please contact Jon Embury, Administrative Services Manager, whose office is located at 350 E. Marion Avenue, Punta Gorda, Florida 33950, and whose telephone number is (941) 637-2110, at least 7 days before your scheduled court appearance, or immediately upon receiving this notification if the time before the scheduled appearance is less than 7 days; if you are hearing or voice impaired, call 711.**