

IN THE CIRCUIT COURT OF THE FIFTH JUDICIAL CIRCUIT,
IN AND FOR LAKE COUNTY, FLORIDA

PROBATE DIVISION

CASE NO. _____

IN RE: GUARDIAN ADVOCACY OF

NOTICE OF PETITION FOR THE APPOINTMENT OF GUARDIAN ADVOCATE
(FORM B)

TO: _____

Name of Person with a Developmental Disability

YOU ARE HEREBY NOTIFIED that a Petition has been filed to inquire into your capacity and seek the appointment of a Guardian Advocate over your person. A copy of the Petition for Appointment of Guardian Advocate is attached to this Notice. There will be a hearing on the Petition for Appointment of Guardian Advocate before Judge _____ of the above Court, at the Lake County Courthouse, 550 W. Main Street, Tavares, Florida, Courtroom _____, on _____, the _____ day of _____, 20____ at _____ ☐ a.m. ☐ p.m.

The purpose for this hearing is to determine whether you lack the capacity to do some, but not all, of the tasks necessary to care for your person and whether it is appropriate for the Court to appoint a Guardian Advocate over your person, pursuant to section 393.12, Florida Statutes.

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, and telephone number of the attorney are: _____

_____.

If you are determined to be incapable of exercise any of the rights enumerated in the Petition for Appointment of Guardian Advocate, a Guardian Advocate may be appointed to exercise those rights on your behalf. If a Guardian Advocate is appointed, the Guardian Advocate may have the care and custody of your person, and may have the right to regulate some or all of your activities.

Dated this _____ day of _____, 20_____.

Gary J. Cooney
Clerk of the Circuit Court and Comptroller

By: _____
Deputy Clerk

Copies furnished to:

- Proposed Guardian Advocate
- Next of Kin of the person with a developmental disability, if any
- Health Care Surrogate designated by the person with a developmental disability pursuant to advanced directives, if any
- Agent appointed by the person with developmental disability under Durable Power of Attorney, if any