

# PACKET 10

Forms for Filing a

## Petition for Name Change of an Adult



EIGHTH JUDICIAL CIRCUIT

Revised January 15, 2015  
For Forms Revised 11-2013

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26 pages

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## WARNING

IF THERE IS ANY QUESTION in your mind concerning these forms, the use of these forms, or your legal rights, it is strongly recommended that you obtain the services of an attorney. If you do not know an attorney, you may contact the Florida Lawyer Referral Service at 1-800-342-8011. If you are filing for divorce in a case involving domestic violence and are financially unable to afford the services of an attorney, you may contact Three Rivers Legal Services at (352) 372-0519 or 1-800-372-0936 to see if you are eligible for their services.

DUE TO THE CHANGING NATURE OF THE LAW, the forms and information contained in this packet may become outdated. Therefore, you should review and research statutes and rules of procedure referenced in the instructions to ensure that the forms are accurate and current.

IN NO EVENT will the Florida Supreme Court, the Florida Bar, the Eighth Judicial Circuit Office of the Court Administrator, the Clerk of the Court or anyone contributing to the production of these forms, commentary, instructions, and appendices be liable for any indirect or consequential damages resulting from the use of the packet.

Use these forms at your own risk. These forms may or may not be appropriate in your particular case. Any desired outcome from the use of these forms cannot be predicted or guaranteed. **It is strongly recommended that you seek legal advice.**

When the forms refer to: “General Information for Self-Represented Litigants),” the information is found at <http://www.flcourts.org> (select Family Forms located under the heading Self Help in the General Public Tab).



## EIGHTH JUDICIAL CIRCUIT

### **Resources for Litigants Filing a Family Law Action Without Legal Counsel**

**Internet Access-** information on how to file family law cases without an attorney in the State of Florida can be found at:

<http://www.circuit8.org/prose/index.html> or <http://www.flcourts.org>  
(select Family Forms located under the heading Self Help in the General Public Tab)

Internet access is available from the Levy County Public Library.

Three Rivers is available to assist pro se litigants in dissolution of marriage and paternity actions who qualify. Three Rivers can be reached at (352) 372-0519.

Legal information for litigants is available at the Alachua County Library Headquarters in Downtown Gainesville, which houses the J. H. Murphree Law Library Collection. Consult with a librarian for additional information. The web address for the library is <http://www.aclib.us/>.

## FAMILY COURT CASE MANAGEMENT PROGRAM

### EIGHTH JUDICIAL CIRCUIT



#### SERVING ALACHUA COUNTY A PROGRAM OF THE ADMINISTRATIVE OFFICE OF THE COURT

The Family Court Case Management Program staff is employed by the Court to assist the Family Law Judges by making sure that all cases in which the petitioner is not represented by an attorney have met procedural requirements.

As in all matters involving law, it is recommended that you obtain the services of a competent lawyer. It is important for you to understand that the Court and Program staff do not represent you. **YOU** represent yourself.

If you decide to proceed without a lawyer, the Family Court Case Management Program staff **will:**

- explain procedures
- conduct an instructional seminar to explain how to file forms
- inform you about additional court requirements
- help you set a hearing with the judge

The staff **will not:**

- give legal advice or explain rights
- represent you in court
- tell you what forms to file
- tell you how to present your case
- notify you that your case is ready to file

## PROCEDURES

1. If you have decided to file a family law case without a lawyer, please follow these steps:
2. Download the forms from the Clerk's website
3. Complete the packet of forms - in ink or typed. Court staff cannot assist you in completing the forms.
4. Further instructions regarding filing and procedures are addressed in the packet. Procedural questions can be answered by calling Family Court.
5. Instructions regarding procedures after filing are addressed in the packet. Your case will be monitored for procedural requirements by the Family Court Case Manager.

## OTHER SERVICES

In addition to the instructional seminar, the Family Court Case Management Program offers assistance to self-represented litigants in a variety of ways.

**Internet Access-** information on how to file family law cases without an attorney in the State of Florida can be found at:

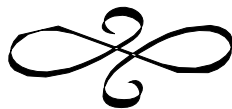
**Eighth Judicial Circuit Website:**

<http://circuit8.org/self-help> or

**Florida Supreme Court Website:**

<http://www.flcourts.org> (select Family Forms located under the heading Self Help in the General Public Tab)

Internet access is available from the Levy County Public Library.





**EIGHTH JUDICIAL CIRCUIT  
FAMILY COURT CASE MANAGEMENT PROGRAM**

**NOTICE OF LIMITATION OF SERVICES PROVIDED/DISCLAIMER**

The personnel in the office of the Clerk of the Court are not acting as your lawyer or providing legal advice to you.

Clerk of Court personnel are not acting on behalf of the court or any judge. The presiding judge in your case may require amendment of a form or substitution of a different form. The judge is not required to grant the relief requested in a form.

The personnel in the office of the Clerk of the Court cannot tell you what your legal rights or remedies are, represent you in court, give legal advice or instructions on completing forms or tell you how to testify in court.

In all cases, it is best to consult with your own attorney, especially if your case presents significant issues regarding children, child support, alimony, retirement or pension benefits, assets, or liabilities.

\_\_\_\_\_ I can read English. - (Go to signature line)

\_\_\_\_\_ I cannot read English, but this notice was read to me by

\_\_\_\_\_ in \_\_\_\_\_  
(Name) (Language)

\_\_\_\_\_  
YOUR SIGNATURE

**CHECKLIST NAME CHANGE**

ADULT:

- CIVIL COVER SHEET
- NOTICE OF LIMITED SERVICE/ DISCLAIMER
- PETITION
- CRIMINAL HISTORY RECORD ( NOT NEEDED IF CHANGING BACK TO MAIDEN NAME)

MINOR CHILD:

- CIVIL COVER SHEET
- NOTICE OF LIMITED SERVICES/DISCLAIMER
- PETITION/JOINT PETITION
- SUPPLEMENTAL FORM FOR PETITION ( IF MORE THAN ONE CHILD)
- CONSENT (OTHER PARTY). Power of attorney is not a consent.
- CRIMINAL HISTORY RECORD

OR (IF NO CONSENT)

- PROOF OF SERVICE (PERSONAL)
- AFFIDAVIT OF PERSONAL SERVICE OUT OF STATE
- PROOF OF SERVICE ( CONSTRUCTIVE)
  - NOTICE OF ACTION
  - AFFIDAVIT OF DILIGENT SEARCH
  - PROOF OF PUBLICATION or
  - PROOF OF POSTING
  - NONMILITARY AFFIDAVIT
  - MEMO FOR CERTIFICATE OF MILITARY SERVICE
- MOTION FOR DEFAULT

\*\*\* This checklist is not intended as legal advice; it is a list of what the court still needs in order to go forward with your case. You must provide the information that is listed above before your next court hearing.



IN THE CIRCUIT COURT OF THE EIGHTH JUDICIAL CIRCUIT  
IN AND FOR LEVY COUNTY, FLORIDA

CASE NO: \_\_\_\_\_

DIVISION: \_\_\_\_\_

\_\_\_\_\_  
Plaintiff/ Petitioner/State

v.

\_\_\_\_\_  
Defendant/ Respondent

**PERMISSION TO USE E-MAIL**

**Provide your email address below to receive a copy of your Orders, Judgments Notice of Hearings or other written communications from the court or clerk of court and by electronic mail.\***

By completing this form I am authorizing the Court and the Clerk, of Circuit Court to send copies of orders/judgments, notices or other written communications to me by e-mail.

I will ensure the software filters have been removed from my computer, so it does not interfere with my ability to receive any of the above documents.

I will file a written notice with the Clerk, if my current email address changes.

\_\_\_\_\_  
Plaintiff/ Petitioner Name (print)

\_\_\_\_\_  
Plaintiff/ Petitioner Name (signature)

\_\_\_\_\_  
\* email address (print *clearly*)

\_\_\_\_\_  
Date

**\*You will not need to provide a stamped self-envelope, if you provide your email address.**

**FINGERPRINT INFORMATION**  
**FOR NAME CHANGE PETITIONERS**

before the court hears a name change petition, each adult petitioner (unless a former name is being restored) must have fingerprints submitted for a state and national criminal history records check, F.S. 68.07, which must be submitted electronically. The cost must be borne by the name change petitioner.

To get your fingerprints submitted electronically:

- 1.
2. Bring this information sheet or proof that you have submitted to fingerprint and background check
3. Bring your picture ID—a Florida driver’s license is preferred. You will not be able to submit your fingerprints without a picture ID.

*See Next page*

4. The agencies conducting the fingerprint checks will send the results directly to the Levy County Clerk of Court. **DO NOT FILE YOUR FINGERPRINT CARD.**
5. If you have questions about the electronic fingerprint submission, you may contact FDLE's E-Government Criminal History Services Section at (850) 410-8161.

**RETURN PAYMENT CONFIRMATION WITH YOUR  
PETITION TO CLERK WITHIN 48 HOURS**



## **Livescan Fingerprinting**

519 S. Pine Ave

Ocala, FL 34471

Ph. 352-291-1155

Hours: Monday through Friday

8:00AM to 4:45PM

We are located across the street from the Pine Plaza next to City of Ocala Police Department.

Please have your State Issued ID or Driver's License available and the agency ORI number.

We accept Visa, MasterCard, Check, and Cash  
\$5.00 transaction fee for the use of a card  
ATM Located in Lobby

Cover Sheet for Family Court Cases

I. Case Style

IN THE CIRCUIT COURT OF THE EIGHTH JUDICIAL CIRCUIT  
IN AND FOR LEVY COUNTY, FLORIDA

---

Petitioner

and

Case No.: \_\_\_\_\_

---

Respondent

II. Type of Action/Proceeding. Place a check beside the proceeding you are initiating. If you are simultaneously filing more than one type of proceeding against the same opposing party, such as a modification and an enforcement proceeding, complete a separate cover sheet for each action being filed. **If you are reopening a case, choose one of the three options below it.**

- (A)  Initial Action/Petition
- (B)  Reopening Case
  - 1.  Modification/Supplemental Petition
  - 2.  Motion for Civil Contempt/Enforcement
  - 3.  Other

III. Type of Case. If the case fits more than one type of case, select the most definitive.

- (A)  Simplified Dissolution of Marriage
- (B)  Dissolution of Marriage
- (C)  Domestic Violence
- (D)  Dating Violence
- (E)  Repeat Violence
- (F)  Sexual Violence
- (G)  Stalking
- (H)  Support IV-D (Department of Revenue, Child Support Enforcement)
- (I)  Support Non-IV-D (**not** Department of Revenue, Child Support Enforcement)
- (J)  UIFSA IV-D (Department of Revenue, Child Support Enforcement)
- (K)  UIFSA Non-IV-D (**not** Department of Revenue, Child Support Enforcement)
- (L)  Other Family Court
- (M)  Adoption Arising Out of Chapter 63
- (N)  Name Change
- (O)  Paternity/Disestablishment of Paternity
- (P)  Juvenile Delinquency
- (Q)  Petition for Dependency
- (R)  Shelter Petition
- (S)  Termination of Parental Rights Arising Out of Chapter 39
- (T)  Adoption Arising Out of Chapter 39
- (U)  CINS/FINS

IV. Rule of Judicial Administration 2.545(d) requires that a Notice of Related Cases Form, Family Law Form 12.900(h), be filed with the initial pleading/petition by the filing attorney or self-represented litigant in order to notify the court of related cases. Is Form 12.900(h) being filed with this Cover Sheet for Family Court Cases and initial pleading/petition?

No, to the best of my knowledge, no related cases exist.

Yes, all related cases are listed on Family Law Form 12.900(h).

**ATTORNEY OR PARTY SIGNATURE**

I CERTIFY that the information I have provided in this cover sheet is accurate to the best of my knowledge and belief.

Signature \_\_\_\_\_ FL Bar No.: \_\_\_\_\_  
Attorney or party (Bar number, if attorney)

\_\_\_\_\_  
(Type or print name) Date

**IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, HE/SHE MUST FILL IN THE BLANKS BELOW:**

[fill in **all** blanks]

This form was prepared for the: {choose only **one**} ( ) Petitioner ( ) Respondent

This form was completed with the assistance of:

{name of individual} \_\_\_\_\_

{name of business} \_\_\_\_\_

{address} \_\_\_\_\_

{city} \_\_\_\_\_, {state} \_\_\_\_\_, {telephone number} \_\_\_\_\_

**INSTRUCTIONS FOR FLORIDA SUPREME COURT APPROVED FAMILY LAW FORM  
12.982(a), PETITION FOR CHANGE OF NAME (ADULT) (06/10)**

**When should this form be used?**

This form should be used when an adult wants the court to change his or her name. This form is **not** to be used in connection with a dissolution of marriage or for adoption of child(ren). If you want a change of name because of a **dissolution of marriage** or adoption of child(ren) that is not yet final, the change of name should be requested as part of that case.

This form should be typed or printed in black ink and must be signed before a **notary public** or **deputy clerk**. You should **file** the original with the **clerk of the circuit court** in the county where you live and keep a copy for your records

**What should I do next?**

**Unless you are seeking to restore a former name, you must have fingerprints submitted for a state and national criminal records check.** The fingerprints must be taken in a manner approved by the Department of Law Enforcement and must be submitted to the Department for a state and national criminal records check. **You may not request a hearing on the petition until the clerk of court has received the results of your criminal history records check.** The clerk of court can instruct you on the process for having the fingerprints taken and submitted, including information on law enforcement agencies or service providers authorized to submit fingerprints electronically to the Department of Law Enforcement. The process may take several weeks and you will have to pay for the cost of processing the fingerprints and conducting the state and national criminal history records check.

Next, you must obtain a **hearing** date for the court to consider your request. If you are seeking to restore a former name, a hearing on the petition MAY be held immediately after the petition is filed. The final hearing on any other petition for a name change may be held immediately after the clerk of court receives the results of your criminal history records check. You should ask the clerk of court, **family law intake staff**, or **judicial assistant** about the local procedure for setting a hearing. You may be required to attend the **final hearing**. Included in these forms is a **Final Judgment of Change of Name (Adult)**, Florida Supreme Court Approved Family Law Form 12.982(b), which the **judge** may use. You should check with the clerk, family law intake staff, or judicial assistant, to see if you need to bring a **final judgment** form with you. If so, you should type or print the heading, including the circuit, county, case number, division, and the parties' names, and leave the rest blank for the judge to complete at your hearing or trial.

If the judge grants your **petition**, he or she will sign this **order**. This officially changes your name. The clerk can provide you with **certified copies** of the signed order. There will be charges for the certified copies, and the clerk can tell you the amount of the charges.

## Where can I look for more information?

Before proceeding, you should read “General Information for Self-Represented Litigants” found at <http://www.flcourts.org> (select Family Forms located under the heading Self Help in the General Public Tab). For further information, see [section 68.07, Florida Statutes](#).

### Special notes...

The heading of the form calls for the name of the **petitioner**. Your current name should go there, as you are the one who is asking the court for something. The judicial circuit, case number, and division may be obtained from the clerk of court’s office when you file the petition.

It may be helpful to compile a list of all of the people and/or places that will need a copy of your final judgment. This list may include the driver’s license office, social security office, banks, schools, etc. A list will help you know how many copies of your order you should get from the clerk of court after your hearing.

Remember, a person who is NOT an attorney is called a nonlawyer. If a nonlawyer helps you fill out these forms, that person must give you a copy of a **Disclosure from Nonlawyer**, Florida Family Law Rules of Procedure Form 12.900 (a), before he or she helps you. A nonlawyer helping you fill out these forms also **must** put his or her name, address, and telephone number on the bottom of the last page of every form he or she helps you complete.

IN THE CIRCUIT COURT OF THE EIGHTH JUDICIAL CIRCUIT  
IN AND FOR LEVY COUNTY, FLORIDA

Case No.: \_\_\_\_\_

Division: \_\_\_\_\_

IN RE: THE NAME CHANGE OF

\_\_\_\_\_  
Petitioner.

**PETITION FOR CHANGE OF NAME (ADULT)**

I, *{full legal name}* \_\_\_\_\_, being sworn, certify that the following information is true:

1. My complete present name is: \_\_\_\_\_.  
I request that my name be changed to: \_\_\_\_\_.

2. I live in \_\_\_\_\_ County, Florida, at *{street address}* \_\_\_\_\_.

3. I was born on *{date}* \_\_\_\_\_, in *{city}* \_\_\_\_\_, *{county}* \_\_\_\_\_,  
*{state}* \_\_\_\_\_, *{country}* \_\_\_\_\_.

4. My father's full legal name: \_\_\_\_\_.  
My mother's full legal name: \_\_\_\_\_.  
My mother's maiden name: \_\_\_\_\_.

5. I have lived in the following places since birth:

Dates (to/from)	Address
_____/_____/_____	_____
_____/_____/_____	_____
_____/_____/_____	_____
_____/_____/_____	_____
_____/_____/_____	_____
_____/_____/_____	_____
_____/_____/_____	_____
_____/_____/_____	_____
_____/_____/_____	_____
_____/_____/_____	_____
_____/_____/_____	_____

Please indicate if you are continuing these facts on an attached page.

**6. Family**

[Choose **all** that apply]

- \_\_\_ a. I am not married.
- \_\_\_ b. I am married. My spouse=s full legal name is: \_\_\_\_\_.
- \_\_\_ c. I do not have child(ren).
- \_\_\_ d. The name(s), age(s), and address(es) of my child(ren) are as follows (all children, **including those over 18**, must be listed):



Name {last, first, middle initial}      Age      Address, City, State

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

Please indicate if you are continuing these facts on an attached page.

7. **Former names**

[Choose **all** that apply]

\_\_\_\_ My name has never been changed **by a court**.

\_\_\_\_ My name previously was changed **by court order** from \_\_\_\_\_  
to \_\_\_\_\_ on {date} \_\_\_\_\_,  
by {court, city, and state} \_\_\_\_\_.

**A copy of the court order is attached.**

\_\_\_\_ My name previously was changed **by marriage** from \_\_\_\_\_  
to \_\_\_\_\_ on {date} \_\_\_\_\_,  
in {city, county, and state} \_\_\_\_\_.

**A copy of the marriage certificate is attached.**

\_\_\_\_ I have never been known or called by any other name.

\_\_\_\_ I have been known or called by the following other name(s): {list name(s) and explain where you  
were known or called by such name(s)} \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

8. **Occupation**

My occupation is: \_\_\_\_\_.

I am employed at: {company and address} \_\_\_\_\_  
\_\_\_\_\_.

During the past 5 years, I have had the following jobs:

Dates (to/from)	Employer and employer=s address
____/____/____	_____
____/____/____	_____
____/____/____	_____
____/____/____	_____
____/____/____	_____
____/____/____	_____
____/____/____	_____

Please indicate if you are continuing these facts on an attached page.

9. **Business**

[Choose **one** only]

\_\_\_\_ I do not own and operate a business.

\_\_\_\_ I own and operate a business. The name of the business is: \_\_\_\_\_.

The street address is: \_\_\_\_\_.

My position with the business is: \_\_\_\_\_.

I have been involved with the business since: {date} \_\_\_\_\_.

10. **Profession**

[Choose **one** only]

\_\_\_\_ I am not in a profession.

\_\_\_\_ I am in a profession. My profession is: \_\_\_\_\_.

I have practiced this profession:

Dates (to/from)	Place and address
_____/_____/_____	_____
_____/_____/_____	_____
_____/_____/_____	_____
_____/_____/_____	_____
_____/_____/_____	_____

Please indicate here if you are continuing these facts on an attached page.

**11. Education**

I have graduated from the following school(s):

Degree Received	Date of Graduation	School
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please indicate here if you are continuing these facts on an attached page.

**12. Criminal History**

[Choose **one** only]

\_\_\_\_ I have never been arrested for or charged with, pled guilty or nolo contendere to, or been found to have committed a criminal offense, regardless of adjudication.

\_\_\_\_ I have a criminal history. In the past I have been arrested for or charged with, pled guilty or nolo contendere to, or been found to have committed a criminal offense, regardless of adjudication. The details of my criminal history are:

Date	City/State	Event (arrest, charge, plea, or adjudication)
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please indicate here if you are continuing these facts on an attached page.

**13. Bankruptcy**

[Choose **one** only]

\_\_\_\_ I have never been adjudicated bankrupt.

\_\_\_\_ I was adjudicated bankrupt on {date} \_\_\_\_\_, in {city} \_\_\_\_\_, {county} \_\_\_\_\_, {state} \_\_\_\_\_.

Please indicate here if you have filed additional bankruptcies, and explain on an attached page.

**14. Creditor(s)' Judgments**

[Choose **one** only]

\_\_\_\_ I have never had a money judgment entered against me by a creditor.

\_\_\_\_ The following creditor(s)= money judgment(s) have been entered against me:

Date	Amount	Creditor	Court entering judgment and case number	Indicate if Paid
_____	_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>

Please indicate here if these facts are continued on an attached page.

15. **Fingerprints and Criminal History Records Check**

Unless I am seeking to restore a former name, a copy of my fingerprints has been taken in a manner approved by the Department of Law Enforcement and submitted for a state and national criminal history records check. **I understand that I cannot request a hearing on my Petition until the Clerk of Court receives the results of the criminal history records check.**

16. I have no ulterior or illegal purpose for filing this petition, and granting it will not in any manner invade the property rights of others, whether partnership, patent, good will, privacy, trademark, or otherwise.

17. My civil rights have never been suspended, or, if my civil rights have been suspended, they have been fully restored.

**I understand that I am swearing or affirming under oath to the truthfulness of the claims made in this petition and that the punishment for knowingly making a false statement includes fines and/or imprisonment.**

Dated: \_\_\_\_\_.

\_\_\_\_\_  
Signature of Petitioner  
Printed Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Fax Number: \_\_\_\_\_

STATE OF FLORIDA  
COUNTY OF \_\_\_\_\_

Sworn to or affirmed and signed before me on \_\_\_\_\_ by \_\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC or DEPUTY CLERK

\_\_\_\_\_  
[Print, type, or stamp commissioned name of notary or deputy clerk.]

\_\_\_\_ Personally known  
\_\_\_\_ Produced identification  
\_\_\_\_ Type of identification produced \_\_\_\_\_

**IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, HE/SHE MUST FILL IN THE BLANKS BELOW:** [fill in **all** blanks]

I, {full legal name and trade name of nonlawyer} \_\_\_\_\_,  
a nonlawyer, located at {street} \_\_\_\_\_, {city} \_\_\_\_\_  
{state} \_\_\_\_\_, {phone} \_\_\_\_\_, helped {name} \_\_\_\_\_,  
who is the petitioner, fill out this form.

**INSTRUCTIONS FOR FLORIDA SUPREME COURT APPROVED  
FAMILY LAW RULES OF PROCEDURE FORM 12.900(h),  
NOTICE OF RELATED CASES (11/13)**

**When should this form be used?**

Florida Rule of Judicial Administration 2.545(d) requires the **petitioner** in a family law case to file with the court a notice of related cases, if any. Your circuit may also require this form to be filed even if there are no related cases. A case is considered related if:

- it involves the same parties, children, or issues and is pending when the family law case is filed; or
- it affects the court's jurisdiction to proceed; or
- an order in the related case may conflict with an order on the same issues in the new case; or
- an order in the new case may conflict with an order in the earlier case.

This form is used to provide the required notice to the court.

This form should be typed or printed in black ink. It must be **filed** with the **clerk of the circuit court** with the initial pleading in the family law case.

**What should I do next?**

A copy of the form must be served on the presiding judges, either the chief judge or the family law administrative judge, and all parties in the related cases. You should also keep a copy for your records. **Service** must be in accordance with Florida Rule of Judicial Administration 2.516.

**Where can I look for more information?**

**Before proceeding, you should read "General Information for Self-Represented Litigants" found at the beginning of these forms.** The words that are in "**bold underline**" in these instructions are defined there. For further information, see Florida Rule of Judicial Administration 2.545(d).

**Special notes . . .**

Remember, a person who is NOT an attorney is called a nonlawyer. If a nonlawyer helps you fill out these forms, that person must give you a copy of a **Disclosure from Nonlawyer**, Florida Family Law Rules of Procedure Form 12.900(a), before he or she helps you. A nonlawyer helping you fill out these forms **must** also put his or her name, address, and telephone number on the bottom of the last page of every form he or she helps you complete.

IN THE CIRCUIT COURT OF THE EIGHTH JUDICIAL CIRCUIT,  
IN AND FOR LEVY COUNTY, FLORIDA

Case No.: \_\_\_\_\_

Division: \_\_\_\_\_

\_\_\_\_\_  
Petitioner,  
and

\_\_\_\_\_  
Respondent.

**NOTICE OF RELATED CASES**

1. Petitioner submits this Notice of Related Cases as required by Florida Rule of Judicial Administration 2.545(d). A related case may be an open or closed civil, criminal, guardianship, domestic violence, juvenile delinquency, juvenile dependency, or domestic relations case. A case is "related" to this family law case if it involves any of the same parties, children, or issues and it is pending at the time the party files a family case; if it affects the court's jurisdiction to proceed; if an order in the related case may conflict with an order on the same issues in the new case; or if an order in the new case may conflict with an order in the earlier litigation.

[check **one** only]

**There are no related cases.**

**The following are the related cases (add additional pages if necessary):**

**Related Case No. 1**

Case Name(s): \_\_\_\_\_

Petitioner : \_\_\_\_\_

Respondent : \_\_\_\_\_

Case No.: \_\_\_\_\_ Division: \_\_\_\_\_

Type of Proceeding: [check **all** that apply]

- |  |  |
|--|--|
| <input type="checkbox"/> Dissolution of Marriage   | <input type="checkbox"/> Paternity                                     |
| <input type="checkbox"/> Custody   | <input type="checkbox"/> Adoption                                      |
| <input type="checkbox"/> Child Support   | <input type="checkbox"/> Modification/Enforcement/Contempt Proceedings |
| <input type="checkbox"/> Juvenile Dependency   | <input type="checkbox"/> Juvenile Delinquency                          |
| <input type="checkbox"/> Termination of Parental Rights                                    | <input type="checkbox"/> Criminal                                      |
| <input type="checkbox"/> Domestic/Sexual/Dating/Repeat<br>Violence or Stalking Injunctions | <input type="checkbox"/> Mental Health                                 |
|  | <input type="checkbox"/> Other {specify} _____                         |

State where case was decided or is pending:  Florida  Other: {specify} \_\_\_\_\_

Name of Court where case was decided or is pending (for example, Fifth Circuit Court, Marion County, Florida): \_\_\_\_\_

Title of last Court Order/Judgment (if any): \_\_\_\_\_

Date of Court Order/Judgment (if any): \_\_\_\_\_

Relationship of cases [check **all** that apply]:

pending case involves same parties, children, or issues;

- may affect court’s jurisdiction;
- order in related case may conflict with an order in this case;
- order in this case may conflict with previous order in related case.

Statement as to the relationship of the cases: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Related Case No. 2**

Case Name(s): \_\_\_\_\_

Petitioner : \_\_\_\_\_

Respondent : \_\_\_\_\_

Case No.: \_\_\_\_\_ Division: \_\_\_\_\_

Type of Proceeding: [check **all** that apply]

- |  |  |
|--|--|
| <input type="checkbox"/> Dissolution of Marriage   | <input type="checkbox"/> Paternity                                     |
| <input type="checkbox"/> Custody   | <input type="checkbox"/> Adoption                                      |
| <input type="checkbox"/> Child Support   | <input type="checkbox"/> Modification/Enforcement/Contempt Proceedings |
| <input type="checkbox"/> Juvenile Dependency   | <input type="checkbox"/> Juvenile Delinquency                          |
| <input type="checkbox"/> Termination of Parental Rights                                    | <input type="checkbox"/> Criminal                                      |
| <input type="checkbox"/> Domestic/Sexual/Dating/Repeat<br>Violence or Stalking Injunctions | <input type="checkbox"/> Mental Health                                 |
|  | <input type="checkbox"/> Other {specify} _____                         |

State where case was decided or is pending:  Florida  Other: {specify} \_\_\_\_\_

Name of Court where case was decided or is pending (for example, Fifth Circuit Court, Marion County, Florida): \_\_\_\_\_

Title of last Court Order/Judgment (if any): \_\_\_\_\_

Date of Court Order/Judgment (if any): \_\_\_\_\_

Relationship of cases [check **all** that apply]:

- pending case involves same parties, children, or issues;
- may affect court’s jurisdiction;
- order in related case may conflict with an order in this case;
- order in this case may conflict with previous order in related case.

Statement as to the relationship of the cases: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Related Case No. 3**

Case Name(s): \_\_\_\_\_

Petitioner : \_\_\_\_\_

Respondent : \_\_\_\_\_

Case No.: \_\_\_\_\_ Division: \_\_\_\_\_

Type of Proceeding: [check **all** that apply]

- |  |  |
|--|--|
| <input type="checkbox"/> Dissolution of Marriage | <input type="checkbox"/> Paternity                                     |
| <input type="checkbox"/> Custody                 | <input type="checkbox"/> Adoption                                      |
| <input type="checkbox"/> Child Support           | <input type="checkbox"/> Modification/Enforcement/Contempt Proceedings |
| <input type="checkbox"/> Juvenile Dependency     | <input type="checkbox"/> Juvenile Delinquency                          |

- Termination of Parental Rights
- Domestic/Sexual/Dating/Repeat Violence or Stalking Injunctions
- Criminal
- Mental Health
- Other {specify} \_\_\_\_\_

State where case was decided or is pending:  Florida  Other: {specify} \_\_\_\_\_

Name of Court where case was decided or is pending (for example, Fifth Circuit Court, Marion County, Florida): \_\_\_\_\_

Title of last Court Order/Judgment (if any): \_\_\_\_\_

Date of Court Order/Judgment (if any): \_\_\_\_\_

Relationship of cases [check **all** that apply]:

- pending case involves same parties, children, or issues;
- may affect court’s jurisdiction;
- order in related case may conflict with an order in this case;
- order in this case may conflict with previous order in related case.

Statement as to the relationship of the cases: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. [check **one** only]

- I **do not** request coordination of litigation in any of the cases listed above.
- I **do** request coordination of the following cases:

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

3. [check **all** that apply]

- Assignment to one judge
- Coordination of existing cases will conserve judicial resources and promote an efficient determination of these cases because: \_\_\_\_\_.

4. The Petitioner acknowledges a continuing duty to inform the court of any cases in this or any other state that could affect the current proceeding.

Dated: \_\_\_\_\_

\_\_\_\_\_  
 Petitioner’s Signature  
 Printed Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Telephone Number: \_\_\_\_\_  
 Fax Number: \_\_\_\_\_  
 E-mail Address(es): \_\_\_\_\_

**CERTIFICATE OF SERVICE**

**I CERTIFY** that I delivered a copy of this Notice of Related Cases to the \_\_\_\_\_ County Sheriff's Department or a certified process server for service on the Respondent, and **[check all used]** ( ) e-mailed, ( ) mailed, ( ) hand delivered, a copy to *{name}* \_\_\_\_\_, who is the **[check all that apply]** ( ) judge assigned to new case, ( ) chief judge or family law administrative judge, ( ) *{name}* \_\_\_\_\_, a party to the related case, ( ) *{name}* \_\_\_\_\_, a party to the related case on *{date}* \_\_\_\_\_.

\_\_\_\_\_  
Signature of Petitioner/Attorney for Petitioner

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

E-mail Address(es): \_\_\_\_\_

Florida Bar Number: \_\_\_\_\_

**IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, HE/SHE MUST FILL IN THE BLANKS BELOW:**

[fill in **all** blanks] This form was prepared for the: *{choose only one}* ( ) Petitioner ( ) Respondent

This form was completed with the assistance of:

*{name of individual}* \_\_\_\_\_,

*{name of business}* \_\_\_\_\_,

*{address}* \_\_\_\_\_,

*{city}* \_\_\_\_\_, *{state}* \_\_\_\_\_, *{telephone number}* \_\_\_\_\_.



IN THE CIRCUIT COURT OF THE EIGHTH CIRCUIT  
IN AND FOR LEVY COUNTY, FLORIDA

Case No.: \_\_\_\_\_

Division: \_\_\_\_\_

IN RE: THE NAME CHANGE OF

\_\_\_\_\_

Petitioner.

**FINAL JUDGMENT OF CHANGE OF NAME (ADULT)**

This cause came before the Court on *{date}* \_\_\_\_\_, for a hearing on Petition for Change of Name (Adult) under section 68.07, Florida Statutes, and it appearing to the Court that:

1. Petitioner is a bona fide resident of \_\_\_\_\_ County, Florida;
2. Petitioner's request is not for any ulterior or illegal purpose; and
3. Granting this petition will not in any manner invade the property rights of others, whether partnership, patent, good will, privacy, trademark, or otherwise; it is

ORDERED that Petitioner's present name, \_\_\_\_\_, is changed to \_\_\_\_\_, by which Petitioner shall hereafter be known.

ORDERED ON \_\_\_\_\_.

\_\_\_\_\_  
CIRCUIT JUDGE

COPIES TO:  
Petitioner

**Requesting a Hearing/Non-Jury Trial**  
**in a Family Court Case in Levy County, Florida**

***DO NOT SUBMIT THE NOTICE THAT ACTION IS AT ISSUE***

***Until:***

1. *All the appropriate forms or documents have been filed to include financial affidavits, child support worksheet, parenting stabilization course, etc.*
2. *You have filed Proof of Service of Process Or Proof of Publication AND the Clerk has entered a default.*
3. *Or the Respondent has filed a response or an Answer and Waiver.*
4. *AND Mediation (352) 491-4417 has been completed if necessary.*

You will use the combined form titled “*Notice that Action is at Issue and Request for a Hearing/Non-Jury Trial*” to request a Hearing/Non-Jury Trial on your motion or petition. If you do so before the above has taken place a Hearing/Non-Jury Trial will **not** be scheduled.

**Fill in the following information:**

- Parties’ names (Petitioner and Respondent)
- Case number and Division
- Your name (Comes Now \_\_\_\_\_)
- Amount of time you think necessary for the judge to hear all the issues in your case. If your case has no disputed issues, it may take only ten minutes.
- Today’s date
- Your signature (no Notary needed)
- The Respondent’s name and address

**Make 2 copies of the original:**

- File the original with the clerk’s office.
- Mail or hand-deliver one copy to the Respondent.

**Each party must bring a self-addressed, stamped/metered envelope to the hearing or provided a valid e-mail address for mailing/e-mailing the final judgment or other court orders.** A party that fails to provide the necessary envelopes with postage or an e-mail address may retrieve a copy of the results of the hearing from the Clerk of the Court at the cost of \$1 per page.

IN THE CIRCUIT COURT, EIGHTH JUDICIAL CIRCUIT,  
IN AND FOR LEVY COUNTY, FLORIDA

\_\_\_\_\_  
Petitioner,

CASE NO.: \_\_\_\_\_

and

DIVISION: \_\_\_\_\_

\_\_\_\_\_  
Respondent.

**NOTICE THAT ACTION IS AT ISSUE AND REQUEST FOR HEARING/NON-JURY TRIAL**

**COMES NOW** \_\_\_\_\_, and shows that this action is at issue and ready for a hearing/non-jury trial. The hearing/trial is on the original action. It is estimated that the trial will require \_\_\_\_\_ minutes. Therefore, the undersigned requests the court schedule a hearing/non-jury trial in this action.

Dated: \_\_\_\_\_ (today's date)

\_\_\_\_\_  
YOUR SIGNATURE

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a true and correct copy of the foregoing Notice of Action has been furnished by U.S. Mail or hand delivery on \_\_\_\_\_, 20\_\_\_\_, to:  
(Print the respondent's name and address below)

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

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature of Petitioner

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_