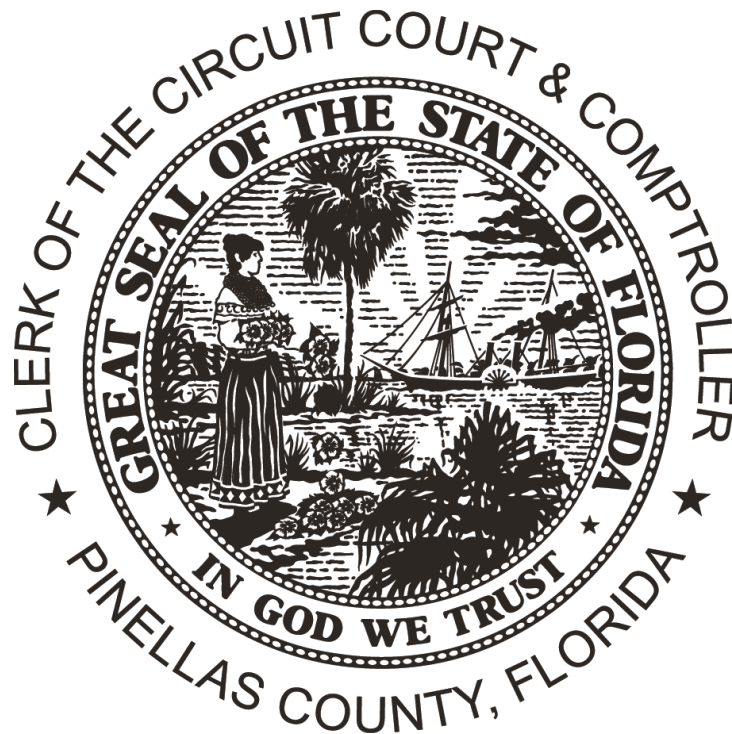


**KEN BURKE, C.P.A.**  
CLERK OF THE CIRCUIT COURT AND COMPTROLLER  
PINELLAS COUNTY, FLORIDA  
[www.mypinellasclerk.org](http://www.mypinellasclerk.org)



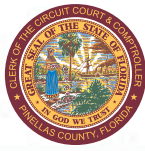
**PACKAGE FEE: \$3.00**

**EJECTMENT**

Please contact the Clerk's Office at (727) 464-7000 or visit us online at [www.mypinellasclerk.org](http://www.mypinellasclerk.org) for additional information.

# EJECTION

|                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                     |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| FILING FEE:                                                                                                                                                                                                                          | \$400.00                                                                                                                                                                                                                                                                                                                            |
| SUMMONS ISSUANCE FEE:                                                                                                                                                                                                                | \$10.00 per summons                                                                                                                                                                                                                                                                                                                 |
| COPIES REQUIRED:                                                                                                                                                                                                                     | Originals to the Clerk.<br>1 set of copies for service.<br>1 set of copies for your records.                                                                                                                                                                                                                                        |
| ADDITIONAL COSTS:                                                                                                                                                                                                                    | \$3.50 per Acknowledgement<br>(If you do not have your signature notarized in the required spaces before filing, the Deputy Clerk can do this for you. Please DO NOT SIGN until a Notary or Deputy Clerk instructs you to do so.)                                                                                                   |
| SERVICE FEE:<br>(You must provide a pre-addressed stamped envelope to mail all of your issued summons and/or copies for service. If a sufficient envelope and postage is not provided, your summons will not be returned or mailed.) | You must contact a private process server, or persons allowed to do service in the county where service is to be done, to obtain their service fees. You can get a list of local process servers from the sheriff by accessing a link through our website at <a href="http://www.MyPinellasClerk.org">www.MyPinellasClerk.org</a> . |



## KEN BURKE, CPA

CLERK OF THE CIRCUIT COURT  
& COMPTROLLER  
PINELLAS COUNTY, FLORIDA

## SELF HELP CENTER

The Self Help Centers are the result of a collaborative effort between the Clerk's Office, the Sixth Judicial Circuit, the Community Law Program and the Clearwater Bar Association.

**The purpose of the Clerk's Legal Self Help Centers is to assist citizens representing themselves in court (sometimes referred to as pro se persons) who do NOT have a private attorney. Citizens who represent themselves in court and do not already have a private attorney representing them, can now get affordable legal assistance.**

### OUR SERVICES INCLUDE:

- Schedule an appointment to consult with an attorney for a minimum of \$15.00\*  
(Attorneys may assist with Family Law, Small Claims and Landlord/Tenant matters ONLY.)
- Purchase forms and packets for the civil court actions listed above
- Have documents notarized
- Make copies

**Open Monday through Friday from 8:30 a.m. until 4:30 p.m.:**

- **The Clearwater Self Help Center**  
315 Court Street, Room 114  
Clearwater, FL 33756  
Phone: (727) 464-5150  
Fax: (727) 453-3423
  - Appointments may be scheduled for Thursday and/or Friday.
  - A Spanish interpreter provided by the Hispanic Outreach Center is available by appointment at the Clearwater location on Fridays from 10:00 a.m. until 12:00 p.m.
- **The St. Petersburg Self Help Center**  
The St. Petersburg Judicial Building  
545 First Avenue North, Room 103  
St Petersburg, FL 33701  
Phone: (727) 582-7941  
Fax: (727) 582-7945
  - Appointments may be scheduled for Monday, Wednesday, and/or Friday.
- **The North County Branch Self Help Center**  
29582 U.S. 19 North, Room 101  
Clearwater, FL 33761  
Phone: (727) 464-5150  
Fax: (727) 453-3423
  - Attorney appointments may be scheduled for Tuesday **only** at this office.

**Self Help Center Now Offering Online Scheduling** of attorney consultation appointments for pro se litigants that do not already have an attorney. To schedule an appointment online using a credit card, please visit [www.mypinellasclerk.org](http://www.mypinellasclerk.org) and click on the SELF HELP CENTER link in the top menu.

\*Attorney appointments may only be scheduled for a minimum of 15 minutes to a maximum of one hour. All appointments must be scheduled in 15-minute increments, i.e., 15, 30, 45 or 60 minutes at a rate of \$1 (one dollar) per minute, therefore payments will be \$15, \$30, \$45 or \$60 accordingly.

Attorney consultation fees must be paid when the appointment time is scheduled. Payments must be by credit card, cash check or money order. Refunds will not be issued for missed appointments.

## MAILING CHARGES GUIDELINES

The chart below can be used as a reference when determining the type of envelope and the amount of postage it will cost to mail your summons back.

If the proper size envelope and sufficient postage is not provided, your summons will not be returned or mailed.

| <b>ENVELOPE SIZE<br/>#10 OR 6X9</b> | <b>WEIGHT</b> | <b>NUMBER OF<br/>PAGES</b> | <b>COSTS</b> |
|-------------------------------------|---------------|----------------------------|--------------|
|                                     | <b>1 oz</b>   | 1-6                        | <b>.49</b>   |
|                                     | <b>2 oz</b>   | 7-11                       | <b>.70</b>   |
|                                     | <b>3 oz</b>   | 12-17                      | <b>.91</b>   |
|                                     | <b>3.5 oz</b> | 18-25                      | <b>1.12</b>  |

| <b>ENVELOPE SIZE<br/>FLAT OR 9X12</b>                                                                                                                                                                                                                 | <b>WEIGHT</b> | <b>NUMBER OF<br/>PAGES</b> | <b>COSTS</b> |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----------------------------|--------------|
|                                                                                                                                                                                                                                                       | <b>1 oz</b>   | 1-6                        | <b>.98</b>   |
|                                                                                                                                                                                                                                                       | <b>2 oz</b>   | 7-12                       | <b>1.19</b>  |
|                                                                                                                                                                                                                                                       | <b>3 oz</b>   | 13-18                      | <b>1.40</b>  |
|                                                                                                                                                                                                                                                       | <b>4 oz</b>   | 19-23                      | <b>1.61</b>  |
|                                                                                                                                                                                                                                                       | <b>5 oz</b>   | 24-29                      | <b>1.82</b>  |
|                                                                                                                                                                                                                                                       | <b>6 oz</b>   | 30-37                      | <b>2.03</b>  |
|                                                                                                                                                                                                                                                       | <b>7 oz</b>   | 38-42                      | <b>2.24</b>  |
|                                                                                                                                                                                                                                                       | <b>8 oz</b>   | 43-48                      | <b>2.45</b>  |
|                                                                                                                                                                                                                                                       | <b>9 oz</b>   | 49-54                      | <b>2.66</b>  |
|                                                                                                                                                                                                                                                       | <b>10 oz</b>  | 55-59                      | <b>2.87</b>  |
|                                                                                                                                                                                                                                                       | <b>11 oz</b>  | 60-67                      | <b>3.08</b>  |
|                                                                                                                                                                                                                                                       | <b>12 oz</b>  | 68-73                      | <b>3.29</b>  |
|                                                                                                                                                                                                                                                       | <b>13 oz</b>  | 74-79                      | <b>3.50</b>  |
| <p>Rates are subject to change. You may visit the United States Postal Service at <a href="http://www.usps.com">www.usps.com</a> for up to date pricing.<br/>Paper weight will vary causing the price of the number of pages per ounce to change.</p> |               |                            |              |

# COMPLAINT FOR EJECTMENT

## When should this form be used?

- Ejectment is used to remove a person or persons who occupy your real property, and incorrectly claim title to that property.
- The property must be located within Pinellas County.
- The individual(s) occupying the property are not tenants.
- The action is filed in Circuit Court. See ejectment forms for more details.

Example – You legally purchase a piece of property from the owner and record the deed. The former owner then sells the same property again to someone else. The other person is residing on the property and claims that they own it because they bought it from the former owner.

If your situation does not meet these criteria, ejectment may not be the appropriate action, and you should review the information on eviction and unlawful detainer. CONTACT AN ATTORNEY with any questions. This does not constitute legal advice.

Ejectment is a circuit court lawsuit filed pursuant to Florida Statute Chapter 66, to request that another person leave your property when they incorrectly claim title to that property.

**READ** ALL OF THE INFORMATION AND INSTRUCTIONS BEFORE COMPLETING THE FORMS AND SUBMITTING THEM FOR FILING.

**DO NOT SIGN** ANY DOCUMENTS THAT REQUIRE A NOTARY OR DEPUTY CLERK SIGNATURE UNTIL YOU ARE IN FRONT OF THE NOTARY OR DEPUTY CLERK.

**RETAIN COPIES** OF ALL FORMS FILED FOR YOUR OWN RECORDS.

**DOCUMENTS MUST BE LEGIBLE.** TYPE WRITTEN OR LEGIBLY HANDWRITTEN IN BLACK OR BLUE INK.

**Filing fee:                    \$400.00**

**Summons issuance fee:       \$10.00 per summons**

Payable by cash/personal check/cashiers check/certified check/money order/ credit card (MasterCard, Visa, American Express or Discover)

**IN ADDITION to the above mentioned filing fee and summons issuance fee,** a fee is required to serve each defendant. You must obtain a private process server to serve the summons. A list of process servers is available through the Pinellas Sheriff's website at <http://www.pcsoweb.com> or from any Pinellas Clerk of Court office or Self-Help Center.

**It is important to remember that a delay can occur as a result of any errors on your paperwork, or if the proper fees are not submitted.**

# **FILING CHECKLIST**

## **Step One (File case with Clerk)**

**To file an Ejectment case, you may file the following forms along with the filing fee and any service fees, if applicable, with the Clerk's office.**

- Ⓞ Complaint for Ejectment  
(1) Original filed with the Clerk and (1) copy for each Defendant to be served
- Ⓞ Civil Cover Sheet
- Ⓞ Affidavit of Military Status
- Ⓞ Summons  
(1) Original and (1) copy for each Defendant to be served

## **Step Two (Obtain Judgment)**

**5 days after service on the Defendant(s) and the Defendant(s):**

**DID NOT respond, you may file the following forms:**

- Ⓞ Motion for Clerk's Default
- Ⓞ Motion for Default Judgment
- Ⓞ Final Judgment  
(1) Original and (1) copy for each Plaintiff AND Defendant and pre-addressed stamped envelope for each party as well

# **OR**

**DID respond, you may file the following forms:**

- Ⓞ Notice of Hearing  
(It is your responsibility to contact the Judicial Assistant for the Judge that is assigned to your case, to set a hearing date. Once you have set your hearing, complete this form and make copies. File the original, and submit a copy to the Defendant(s).) Ⓞ Final Judgment  
(Bring the Final Judgment and (1) copy for each Plaintiff AND Defendant to the hearing and (1) pre-addressed stamped envelope for each party as well

**If the judge grants your complaint, a Final Judgment will be signed.**

Revised 7/2010

Ejectment Packet

### **Step Three (Obtain Writ of Possession)**

**If the Defendant(s) refuses to leave the property after the Final Judgment has been signed, you may file a Writ of Possession and have it issued by the Clerk, allowing the Sheriff's department to remove them from the property.**

## **Additional Forms**

- ⑨ Disclosure from Nonlawyer, if applicable  
This form is for your records and should only be used if a nonlawyer assists you in completing any forms. The nonlawyer must complete this form and both of you are to sign it before the nonlawyer assists you in completing any forms.
- ⑨ Notice of Voluntary Dismissal  
If you decide not to proceed with your case prior to a judgment being entered, you should file a Notice of Voluntary Dismissal.

**THIS DOES NOT CONSTITUTE LEGAL ADVICE. Civil court information and forms provided by the Pinellas County Clerk of Circuit Court should be considered informational only, and may not be applicable to every situation. The information is not intended to be used as legal advice. Specific guidance as to how to proceed with filing or answering a lawsuit and questions about your particular situation should be directed to a qualified attorney.**

# Quick Reference Guide To Completing Forms Prior To Filing

## **Complaint for Ejectment from Real Estate (Form #1)**

- Fill in parties' names in the space provided (the Plaintiff is the party initiating this action and the Defendant is the party against whom the case is initiated).
- Read each line and fill in the appropriate response.
- Date and sign in the space provided and print or type your name, address and telephone number.
- Attach a chain of title to the complaint. A *chain of title* is a record of successive conveyances, or other forms of alienation, affecting a particular parcel of land, arranged consecutively, from the government or original source of title down to the present holder.  
"Chain of Title." Black's Law Dictionary. 6th ed. 1990.

## **Civil Cover Sheet (Form #2)**

- Fill in names of Plaintiff(s) and Defendant(s).
- Select "Other Real Property Actions" under Real Property/Mortgage Foreclosure for the appropriate money amount.
- Check the appropriate box to indicate whether a jury is being demanded in the complaint.
- Date and sign the cover sheet.

## **Nonmilitary Affidavit (Form #3)**

- Fill in names of Plaintiff(s) and Defendant(s).
- Read each line and select and/or fill in the appropriate response.
- **Date and sign in the presence of a Notary Public or Deputy Clerk.**

## **Summons: Personal Service on an Individual (Form #4)**

- Fill in names of Plaintiff(s) and Defendant(s).
- Provide the name and address of the party being served (Defendant).
- Provide the name and address of the serving party (Plaintiff).
- Once completed the **Clerk** will date and sign for issuance.

## **Motion for Clerk's Default (Form #5)**

- Fill in names of Plaintiff(s) and Defendant(s).
- Fill in the name of the party a default will be entered against (Defendant).
- Sign in the space provided and print or type your name, address and telephone number.
- Once completed the **Clerk** will date, sign and seal for issuance.

## **Notice of Hearing (Form #6)**

- Fill in names of Plaintiff(s) and Defendant(s).
- Read each line and fill in the appropriate response with the hearing information obtained from the judge's assistant.
- Provide the name and address of the party being served, select the type of service used and the date it was perfected.
- Sign in the space provided and print or type your name, address and telephone number.



### **Motion for Default Final Judgment (Form #7)**

- Fill in names of Plaintiff(s) and Defendant(s).
- Fill in the name of the party you are requesting a default against (Defendant).
- Fill in the date of the default entered by the Clerk, if available.
- Sign in the space provided and print or type your name, address and telephone number.

### **Final Judgment for Ejectment (Form #8)**

- Fill in names of Plaintiff(s) and Defendant(s).
- Read each line and fill in the appropriate response.
- Fill in the name and addresses of all parties that will receive a copy.
- Once completed, the **Judge** will sign and date this form.

### **Writ of Possession (Form #9)**

- Fill in names of Plaintiff(s) and Defendant(s).
- Complete the property description
- Fill in the name of the party receiving possession (Plaintiff).
- Once completed the **Clerk** will date, sign and seal for issuance.

### **Disclosure from Nonlawyer (Form #10)**

- Read each line and select and/or fill in the appropriate response.
- Both persons should sign in the space provided

### **Notice of Voluntary Dismissal (Form #11)**

- Fill in names of Plaintiff(s) and Defendant(s).
- Fill in the name of the person dismissing the action (Plaintiff).
- Provide the name and address of the party being served, select the type of service used and the date it was perfected.
- Sign in the space provided and print or type your name, address and telephone number.

**IN THE CIRCUIT COURT OF THE SIXTH JUDICIAL CIRCUIT  
IN AND FOR PINELLAS COUNTY, FLORIDA**

Reference No: \_\_\_\_\_ UCN: 5220 CA XXCICI

\_\_\_\_\_  
Plaintiff(s)

vs.

\_\_\_\_\_  
Defendant(s)

**COMPLAINT FOR EJECTMENT FROM REAL ESTATE**

COMES NOW, the Plaintiff(s), \_\_\_\_\_, sues  
Defendant(s), \_\_\_\_\_ and states as follows:

1. This is an action to recover possession of real property located in Pinellas County, Florida.
2. The Defendant(s) is in possession of the following real property in the County:

\_\_\_\_\_  
(Describe property, i.e. address or legal description)

to which Plaintiff(s) claims title as shown by the attached statement of Plaintiff's chain of title.

3. Defendant(s) refuses to deliver possession of the property to Plaintiff(s) or pay Plaintiff(s) the profits from it.

**Note: A statement of Plaintiff's chain of title must be attached.**

**WHEREFORE** Plaintiff(s) demands judgment for possession of the property and damages against Defendant(s).

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Plaintiff(s)

Print Name: \_\_\_\_\_

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

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

Telephone No: \_\_\_\_\_

CIRCUIT COURT, PINELLAS COUNTY, FLORIDA

CIVIL DIVISION

CIVIL COVER SHEET

The civil cover sheet and the information contained herein neither replace nor supplement the filing and service of pleadings or other papers as required by law. This form shall be filed by the plaintiff or petitioner for the use of the Clerk of Court for the purpose of reporting judicial workload data pursuant to Florida Statutes section 25.075. (See instructions for completion.)

I. CASE STYLE

Plaintiff \_\_\_\_\_

Case #: \_\_\_\_\_

vs.

Judge: \_\_\_\_\_

Defendant \_\_\_\_\_

II. TYPE OF CASE (If the case fits more than one type of case, select the most definitive category.) If the most descriptive label is a subcategory (is indented under a broader category), place an x in both the main category and subcategory boxes.

- Condominium
Contracts and indebtedness
Eminent domain
Auto negligence
Negligence—other
Business governance
Business torts
Environmental/Toxic tort
Third party indemnification
Construction defect
Mass tort
Negligent security
Nursing home negligence
Premises liability—commercial
Premises liability—residential
Products liability
Real property/Mortgage foreclosure
Commercial foreclosure \$0 - \$50,000
Commercial foreclosure \$50,001 - \$249,999
Commercial foreclosure \$250,000 or more
Homestead residential foreclosure \$0 - \$50,000
Homestead residential foreclosure \$50,001 - \$249,999
Homestead residential foreclosure \$250,000 or more
Non-homestead residential foreclosure \$0 - \$50,000
Non-homestead residential foreclosure \$50,001 - \$249,999
Non-homestead residential foreclosure \$250,000 or more
Other real property actions \$0 - \$50,000
Other real property actions \$50,001 - \$249,999
Other real property actions \$250,000 or more
Professional malpractice
Malpractice—business
Malpractice—medical
Malpractice—other professional
Other
Antitrust/Trade regulation
Business transactions
Constitutional challenge—statute or ordinance
Constitutional challenge—proposed amendment
Corporate trusts
Discrimination—employment or other
Insurance claims
Intellectual property
Libel/Slander
Shareholder derivative action
Securities litigation
Trade secrets
Trust litigation

**III. REMEDIES SOUGHT** (check all that apply):

- monetary;
- nonmonetary declaratory or injunctive relief;
- punitive

**IV. NUMBER OF CAUSES OF ACTION:** [       ]

(specify) \_\_\_\_\_  
\_\_\_\_\_

**V. IS THIS CASE A CLASS ACTION LAWSUIT?**

- yes
- no

**VI. HAS NOTICE OF ANY KNOWN RELATED CASE BEEN FILED?**

- no
- yes If "yes," list all related cases by name, case number, and court.

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

**VII. IS JURY TRIAL DEMANDED IN COMPLAINT?**

- yes
- no

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

Signature \_\_\_\_\_  
Attorney or party

Fla. Bar # \_\_\_\_\_  
(Bar # if attorney)

\_\_\_\_\_  
(type or print name)

\_\_\_\_\_  
Date

**IN THE CIRCUIT COURT OF THE SIXTH JUDICIAL CIRCUIT  
IN AND FOR PINELLAS COUNTY, FLORIDA**

Reference No: \_\_\_\_\_

\_\_\_\_\_  
Plaintiff(s)

vs.

\_\_\_\_\_  
Defendant(s)

**NONMILITARY AFFIDAVIT**

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

[ **all** that apply]

\_\_\_\_\_ 1. I know of my own personal knowledge that Defendant(s) is not on active duty in the armed services of the United States.

\_\_\_\_\_ 2. I have inquired of the armed services of the United States and the U.S. Public Health Service to determine whether the Defendant(s) is a member of the armed services and am attaching certificates stating that Defendant(s) is not now in the armed services.

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

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Plaintiff(s)

Print Name: \_\_\_\_\_

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

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

Telephone No: \_\_\_\_\_

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 clerk.]

\_\_\_\_\_ Personally known

\_\_\_\_\_ Produced identification

Type of identification produced \_\_\_\_\_

**IN THE CIRCUIT COURT OF THE SIXTH JUDICIAL CIRCUIT  
IN AND FOR PINELLAS COUNTY, FLORIDA**

Reference No: \_\_\_\_\_

\_\_\_\_\_  
Plaintiff(s)

vs.

\_\_\_\_\_  
Defendant(s)

**SUMMONS  
(PERSONAL SERVICE ON A NATURAL PERSON)**

THE STATE OF FLORIDA:  
To each Sheriff of the State:

YOU ARE COMMANDED to serve this summons and a copy of the complaint in this action on:

Defendant: \_\_\_\_\_

Address \_\_\_\_\_

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

**IMPORTANT**

Each defendant is **required** to serve written defenses to the complaint on:

Plaintiff: \_\_\_\_\_

Address \_\_\_\_\_

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

within 20 days after service of this summons on that defendant, exclusive of the day of service, **and** to file the original of the defenses with the Clerk of this Court at 315 Court Street, Room 170, Clearwater, Florida 33756, either before service on plaintiff or immediately thereafter. If a defendant fails to do so, a default will be entered against that defendant for the relief demanded in the complaint.

DATED: \_\_\_\_\_

**KEN BURKE, CPA**  
Clerk of the Circuit Court  
315 Court Street, Room 170  
Clearwater, FL 33756

(Seal)

BY: \_\_\_\_\_  
DEPUTY CLERK

IMPORTANT

A lawsuit has been filed against you. You have 20 calendar days after this summons is served on you to file a written response to the attached complaint with the clerk of this court. A phone call will not protect you. Your written response, including the case number given above and the names of the parties, must be filed if you want the court to hear your side of the case. If you do not file your response on time, you may lose the case, and your wages, money, and property may thereafter be taken without further warning from the court. There are other legal requirements. You may want to call an attorney right away. If you do not know an attorney, you may call an attorney referral service or a legal aid office (listed in the phone book).

If you choose to file a written response yourself, at the same time you file your written response to the court you must also mail or take a copy of your written response to the "Plaintiff/Plaintiff's Attorney" named below.

IMPORTANTE

Usted ha sido demandado legalmente. Tiene 20 dias, contados a partir del recibo de esta notificacion, para contestar la demanda adjunta, por escrito, y presentarla ante este tribunal. Una llamada telefonica no lo protegera. Si usted desea que el tribunal considere su defensa, debe presentar su respuesta por escrito, incluyendo el numero del caso y los nombres de las partes interesadas. Si usted no contesta la demanda a tiempo, podiese perder el caso y podria ser despojado de sus ingresos y propiedades, o privado de sus derechos, sin previo aviso del tribunal. Existen otros requisitos legales. Si lo desea, puede usted consultar a un abogado inmediatamente. Si no conoce a un abogado, puede llamar a una de las oficinas de asistencia legal que aparecen en la guia telefonica.

Si desea responder a la demanda por su cuenta, al mismo tiempo en que presenta su respuesta ante el tribunal, debera usted enviar por correo o entregar una copia de su respuesta a la persona denominada abajo como "Plaintiff/Plaintiff's Attorney" (Demandante o Abogado del Demandante).

IMPORTANT

Des poursuites judiciaires ont ete entreprises contre vous. Vous avez 20 jours consecutifs a partir de la date de l'assignation de cette citation pour déposer une reponse écrite a la plainte ci-jointe aupres de ce tribunal. Un simple coup de telephone est insuffisant pour vous proteger. Vous etes obliges de déposer votre reponse écrite, avec mention du numero de dossier ci-dessus et du nom des parties nommees ici, si vous souhaitez que le tribunal entende votre cause. Si vous ne deposez pas votre reponse écrite dans le relai requis, vous risquez de perdre la cause ainsi que votre salaire, votre argent, et vos biens peuvent etre saisis par la suite, sans aucun preavis ulterieur du tribunal. Il y a d'autres obligations juridiques et vous pouvez requerir les services immediats d'un avocat. Si vous ne connaissez pas d'avocat, vous pourriez telephoner a un service de reference d'avocats ou a un bureau d'assistance juridique (figurant a l'annuaire de telephones).

Si vous choisissez de déposer vous-meme une reponse écrite, il vous faudra egalement, en meme temps que cette formalite, faire parvenir ou expedier une copie de votre reponse écrite au "Plaintiff/Plaintiff's Attorney" (Plaignant ou a son avocat) nomme ci-dessous.

\_\_\_\_\_  
Plaintiff/Plaintiff's Attorney  
.....  
.....  
Address  
Florida Bar No. ....

**IN THE CIRCUIT COURT OF THE SIXTH JUDICIAL CIRCUIT  
IN AND FOR PINELLAS COUNTY, FLORIDA**

Reference No: \_\_\_\_\_

\_\_\_\_\_  
Plaintiff(s)

vs.

\_\_\_\_\_  
Defendant(s)

**MOTION FOR CLERK'S DEFAULT**

Plaintiff(s) asks the clerk to enter a default against \_\_\_\_\_,  
Defendant(s), for failing to respond as required by law to Plaintiff's Complaint for Ejectment  
from Real Estate.

\_\_\_\_\_  
Signature of Plaintiff(s)

Print Name: \_\_\_\_\_

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

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

Telephone No: \_\_\_\_\_

**DEFAULT**

A default is entered in this action against the Defendant(s) for ejectment for failure to  
respond as required by law.

DATED: \_\_\_\_\_

**KEN BURKE, CPA**  
Clerk of the Circuit Court  
315 Court Street, Room 170  
Clearwater, FL 33756

BY: \_\_\_\_\_  
DEPUTY CLERK



**IN THE CIRCUIT COURT OF THE SIXTH JUDICIAL CIRCUIT  
IN AND FOR PINELLAS COUNTY, FLORIDA**

Reference No: \_\_\_\_\_

\_\_\_\_\_  
Plaintiff(s)

vs.

\_\_\_\_\_  
Defendant(s)

**MOTION FOR DEFAULT FINAL JUDGMENT - EJECTMENT**

Plaintiff(s) asks the court to enter a Default Final Judgment against \_\_\_\_\_, Defendant(s), for ejectment, and says:

1. Plaintiff(s) filed a Complaint for Ejectment from Real Estate against Defendant(s).
2. Defendant(s) has failed to timely file an answer and a Default has been entered by the Clerk of this Court on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

WHEREFORE, Plaintiff(s) asks this Court to enter a Final Judgment for Ejectment against the Defendant(s).

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Plaintiff(s)

Print Name: \_\_\_\_\_

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

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

Telephone No: \_\_\_\_\_

**IN THE CIRCUIT COURT OF THE SIXTH JUDICIAL CIRCUIT  
IN AND FOR PINELLAS COUNTY, FLORIDA**

Reference No: \_\_\_\_\_

\_\_\_\_\_  
Plaintiff(s)

vs.

\_\_\_\_\_  
Defendant(s)

**NOTICE OF HEARING**

TO: Defendant(s): \_\_\_\_\_

There will be a hearing before Judge \_\_\_\_\_  
on {date} \_\_\_\_\_, at {time} \_\_\_\_\_, in Room \_\_\_\_\_  
of the Pinellas County Courthouse located at \_\_\_\_\_  
on the following issues:

\_\_\_\_\_

\_\_\_\_\_ hour(s)/ \_\_\_\_\_ minutes have been reserved for this hearing.

If this matter is resolved, the moving party shall contact the judge's office to cancel this hearing.

I certify that a copy of this document was [ **one** only]  mailed  faxed and mailed  hand delivered to the person(s) listed below on the \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

Defendant: \_\_\_\_\_

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

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

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

\_\_\_\_\_  
Signature of Plaintiff(s)

Print Name: \_\_\_\_\_

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

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

Telephone No: \_\_\_\_\_

**“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 the Human Rights Office, 400 S. Ft. Harrison Ave., Ste. 300, Clearwater, FL 33756, (727) 464-4062 (V/TDD) 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.”**

**IN THE CIRCUIT COURT OF THE SIXTH JUDICIAL CIRCUIT  
IN AND FOR PINELLAS COUNTY, FLORIDA**

Reference No: \_\_\_\_\_ UCN: 5220 CA \_\_\_\_\_ XXCICI

\_\_\_\_\_  
Plaintiff(s)

vs.

\_\_\_\_\_  
Defendant(s)

**FINAL JUDGMENT FOR EJECTMENT**

This cause having come before the Court on Complaint for Ejectment and it appearing that the Defendant(s) has been duly served with process, it is hereby:

**ORDERED AND ADJUDGED** that the Plaintiff(s), \_\_\_\_\_,  
do have and recover from the Defendant(s), \_\_\_\_\_,  
possession of the following premises located in Pinellas County, Florida, to wit:

\_\_\_\_\_  
(Describe property, i.e. legal description)

The Clerk of Court shall issue the Writ of Possession for the aforesaid premises forthwith.

It is further **ORDERED AND ADJUDGED** that Plaintiff(s), \_\_\_\_\_,  
recover judgment against the Defendant(s), \_\_\_\_\_,  
costs in the amount of \$ \_\_\_\_\_, for all of which let execution issue.

**DONE AND ORDERED** in Pinellas County, Florida on the \_\_\_\_\_ day of  
\_\_\_\_\_, 20\_\_\_\_.

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

cc:  
Plaintiff \_\_\_\_\_

Address \_\_\_\_\_

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

Defendant \_\_\_\_\_

Address \_\_\_\_\_

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

**IN THE CIRCUIT COURT OF THE SIXTH JUDICIAL CIRCUIT  
IN AND FOR PINELLAS COUNTY, FLORIDA**

Reference No: \_\_\_\_\_

\_\_\_\_\_  
Plaintiff(s)

vs.

\_\_\_\_\_  
Defendant(s)

**WRIT OF POSSESSION**

THE STATE OF FLORIDA:

TO ALL AND SINGULAR THE SHERIFFS OF THE STATE:

YOU ARE COMMANDED to remove Defendant(s) \_\_\_\_\_,  
from the following property in Pinellas County, Florida:

\_\_\_\_\_  
(Describe property, i.e. address or legal description)

and to put Plaintiff(s), \_\_\_\_\_, in full possession thereof.

Witness my hand and seal of the Court on \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

(Seal)

**KEN BURKE, CPA**  
Clerk of the Circuit Court  
315 Court Street, Room 170  
Clearwater, FL 33756

BY: \_\_\_\_\_  
DEPUTY CLERK

Plaintiff \_\_\_\_\_

Address \_\_\_\_\_

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

Phone # \_\_\_\_\_

## NONLAWYERS WHO ASSIST OTHERS IN COMPLETING FORMS

If a nonlawyer will help you in completing forms in this booklet, that person must provide you a copy of the disclosure on the bottom of this page before beginning. Both you and the nonlawyer helping you must sign the disclosure form. You should receive a copy to keep and the nonlawyer helping you should keep a copy. This disclaimer does not act as or constitute a waiver, disclaimer, or limitation of liability.

Anyone assisting you in completing these forms also must put their name, address, and telephone number on the bottom of the last page of the form. A space is provided on each form for this purpose.

### DISCLOSURE

\_\_\_\_\_ told me that he/she is not a lawyer and may not give legal advice or represent me in court.

\_\_\_\_\_ told me that he/she may only help me fill out a form approved by the Supreme Court of Florida. \_\_\_\_\_ may only help me by asking me questions to fill in the form. \_\_\_\_\_ may also tell me how to file the form. \_\_\_\_\_ told me that he/she is not an attorney and cannot tell me what my rights or remedies are or how to testify in court.

[ **only** one]

I can read English.

I cannot read English, but this disclosure was read to me [fill in **both** blanks] by {Name} \_\_\_\_\_ in {Language} \_\_\_\_\_, which I understand.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**IN THE CIRCUIT COURT OF THE SIXTH JUDICIAL CIRCUIT  
IN AND FOR PINELLAS COUNTY, FLORIDA**

Reference No: \_\_\_\_\_

\_\_\_\_\_  
Plaintiff(s)

vs.

\_\_\_\_\_  
Defendant(s)

**NOTICE OF VOLUNTARY DISMISSAL**

Plaintiff(s), \_\_\_\_\_, in the above styled cause hereby submit this Notice of Voluntary Dismissal as this cause has been settled between parties.

I certify that a copy of this document was [ **one** only]  mailed  faxed and mailed  hand delivered to the person(s) listed below on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Defendant: \_\_\_\_\_

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

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

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

\_\_\_\_\_  
Signature of Plaintiff(s)

Print Name: \_\_\_\_\_

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

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

Telephone No: \_\_\_\_\_