

IN THE CIRCUIT COURT FOR  
PINELLAS COUNTY, FLORIDA  
PROBATE DIVISION

IN RE: GUARDIANSHIP OF

\_\_\_\_\_  
(NAME OF WARD)

FILE NO.

OATH OF GUARDIAN ADVOCATE,  
DESIGNATION OF RESIDENT AGENT

I, \_\_\_\_\_ (NAME OF PROPOSED GUARDIAN ADVOCATE) \_\_\_\_\_, Affiant, state under oath that:

1. I will faithfully perform the duties of Guardian Advocate of \_\_\_\_\_ (NAME OF WARD) \_\_\_\_\_, the Ward, according to law and that the Petitioner hereby designates \_\_\_\_\_ (NAME OF ATTORNEY) \_\_\_\_\_, who is a resident of Pinellas County, whose office address is \_\_\_\_\_ (FULL ADDRESS) \_\_\_\_\_, and whose telephone number is \_\_\_\_\_ (TELEPHONE NUMBER) \_\_\_\_\_, as Petitioner's agent for service of process in any action against the Petitioner in the Petitioner's representative capacity, or personally, if that personal action accrued in the performance of the Petitioner's duties.

2. My place of residence and post office address is \_\_\_\_\_ (FULL ADDRESS FOR PROPOSED GUARDIAN ADVOCATE) \_\_\_\_\_.

\_\_\_\_\_  
NAME, Affiant  
Address  
CSZ  
Telephone Number  
Email Address

STATE OF FLORIDA  
COUNTY OF PINELLAS

Sworn to and subscribed before me, by means of  physical presence or  online notarization, on \_\_\_\_\_, 2023, by Affiant, who is personally known to me \_\_\_\_\_ or who produced \_\_\_\_\_ as identification.

\_\_\_\_\_  
Notary Public  
My Commission Expires:  
My Commission Number is: