## IN THE TWENTIETH JUDICIAL CIRCUIT IN AND FOR CHARLOTTE COUNTY, FLORIDA

|                             | Plaintiff/Petitioner   |  |
|-----------------------------|--|--|
| Vs                          | Case No.:  |  |
|                             | Defendant/Respondent   |  |
|                             | NOTICE OF CONFIDENTIAL INFORMATION WITHIN COURT FILING   |  |
| Purs                        | uant to Florida Rule of Judicial Administration 2.420(d)(2), I hereby certify:   |  |
| ( )<br>2.420(d)(1)(E        | (1) I am filing herewith a document containing confidential information as described in Rule 3) and that:  |  |
| (a)                         | The title/type of document and   |  |
| (b)                         | ( ) the entire document is confidential, or  |  |
|                             | ( ) the confidential information within the document is precisely located at:  |  |
| OR                          |  |  |
| Rule 2.420(d and the confid | (2) A document was previously filed in this case that contains confidential information as described in $O(1)(B)$ , but a Notice of Confidential Information within Court Filing was not filed with the document dential information was not maintained as confidential by the Clerk of the Court. I her[e]by notify the s confidential information is located as follows: |  |
| (a)                         | Title/type of document:  |  |
| (b)                         | Date of filing (if known):   |  |
| (c)                         | Date of document:  |  |
| (d)                         | Docket entry number:   |  |
| (e)                         | ( ) Entire document is confidential or   |  |
|                             | ( ) Precise location of confidential information in document:  |  |
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|                             |  |  |
|                             |  |  |
|                             |  |  |

Filer's Signature

## CERTIFICATE OF SERVICE

| I HEREBY CERTIFY that a copy of the                 | foregoing was furnished by (e-mail     | l)(delivery)(mail)(fax) on:    |
|---|--|--------------------------------|
| (All parties and Affected Non-Parties. Note: If the | he name or address of a Party or Af    | fected Non-Party is            |
| confidential, DO NOT include such information i     | n this Certificate of Service. Instead | d, serve the State Attorney or |
| request Court Service. See Rule 2.420(k)).          |  |                                |
|   | , on                                   | , 20                           |
|   |  |                                |
|   |  |                                |
|   |  |                                |
|   | Name                                   |                                |
|   | Address                                |                                |
|   |  |                                |
|   | Telephone Number                       |                                |
|   | Florida Bar No. (if applicable)        |                                |
|   | E-mail address                         |                                |