### IN THE

### COURT, EIGHTEENTH JUDICIAL CIRCUIT, BREVARD COUNTY, FLORIDA

**DIVISION: CIVIL** 

CASE NUMBER: 05- - - -

PLAINTIFF

DEFENDANT

#### **CIVIL COVER SHEET**

### **AMOUNT OF CLAIM**

Please indicate the estimated amount of the claim, rounded to the nearest dollar. \$

**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 on both the main category and subcategory boxes.

#### **CIRCUIT CIVIL**

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 Homestead residential foreclosure Non-homestead residential foreclosure Other real property actions Law 122 / Rev. 03-13-2024

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### **CIVIL COVER SHEET**

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Professional malpractice Malpractice – business Malpractice – medical Malpractice – other professional

Other

Antitrust/Trade regulations 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

# COUNTY CIVIL

Civil Replevins Evictions Other civil (non-monetary)

# **REMEDIES SOUGHT**

Monetary; Nonmonetary declaratory or injunctive relief; Punitive

## NUMBER OF CAUSES OF ACTION [ ]

(Specify)

## IS THIS CASE A CLASS ACTION LAWSUIT?

#### Yes

No

## HAS NOTICE OF ANY KNOWN RELATED CASE BEEN FILED?

No

Yes - If "Yes", list all related cases by name, case number, and court.

# **CIVIL COVER SHEET**

### CASE NUMBER: 05-

### 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, and that I have read and will comply with the requirements of Florida Rule of Judicial Administration 2.425.

Signature		_ Fla. Bar #
0	Attorney or party	(Bar # if attorney)

(type or print name)

Date

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