

IN THE CIRCUIT COURT FOR _____ COUNTY, FLORIDA
PROBATE DIVISION

IN RE: ESTATE OF

NAME OF DECEDENT,
Deceased.

File Number _____

(for Court use only)

**PETITION FOR COURT APPROVAL OF QUALIFIED SPECIAL
NEEDS TRUST FOR NAME OF BENEFICIARY**

The undersigned petitioner requests that the court approve the Qualifying Special Needs Trust set up under the Last Will and Testament of name of decedent, dated May 6, 2005. Florida Statute 732.2025(8) requires court approval if the aggregate value of all property in the Qualifying Special Needs trust exceeds \$100,000.00. The Qualifying Special Needs Trust meets the requirements of Florida Statute 732.2025(8). The income and principal are distributable to or for the benefit name of beneficiary for life in the discretion of one or more trustees less than half of whom are ineligible family trustees. The Will appoints name of trustee as Trustee. name of trustee is not an ineligible trustee as she is a descendant of the surviving spouse, name of beneficiary. During the life of name of beneficiary, no person has the power to distribute income or principal to anyone other than name of beneficiary.

Under penalties of perjury, I declare that I have read the foregoing, and the facts alleged are true to the best of my knowledge and belief.

Signed on _____, 2010.

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NAME OF PR, Petitioner