

**IN THE COUNTY COURT FOR
LAKE COUNTY, FLORIDA**

CASE NO. _____

STATE OF FLORIDA,

Vs.

PLEA(S)

1. I understand the nature and the possible consequences of the charges pending against me, and do hereby withdraw my pleas of not guilty and enter the following plea(s) of
() Guilty, because I am guilty. () Nolo Contendere, because the plea is in my best interests.

2. I understand that if the Court accepts the Plea(s), I give up my right to a trial, at which trial I would have had the following rights: (1) to have a jury determine whether I am guilty or not guilty; (2) to see and hear the witnesses testify, and to have my lawyer question them for me; (3) to subpoena and present witnesses and items of evidence in my defense, and to present any defense I might have to the jury; (4) to testify or to remain silent; and (5) to require the prosecutor to prove my guilt by admissible evidence beyond any reasonable doubt before I can be found guilty. I further understand that I give up my right to appeal. My lawyer has explained to me what an appeal is, and further, I understand that a Plea of Not Guilty denies that I committed the crime(s); a Plea of Guilty admits that I did commit the crime(s); and a Plea of Nolo Contendere (or "No Contest") says that I do not contest the evidence against me. I understand that if the Court accepts my plea(s) there will be no trial and the Court will impose sentence(s) based upon my plea(s). Pursuant to the Rules of Criminal Procedure, I waive my physical presence at any sentencing hearing.

3. My lawyer has explained to me the maximum penalty for the charge(s) and the essential elements of the crime(s); I understand these things. I understand that if I am on probation my probation can be revoked and I can be returned and sentenced to jail up to the maximum sentence. No one has pressured or forced me to enter the plea(s) or made any promises to me other than those contained in this agreement.

4. I give up my right to have the prosecutor recite to the judge the facts showing my guilt (factual basis) before he accepts my plea(s). I am not under the influence of any drug, medication, or alcohol at the time I sign this plea. I am not suffering from any mental problems at this time which affect my understanding of this plea. I have read every word in this written plea or had it read to me. I have discussed this written plea with my lawyer, and I fully understand it. I am fully satisfied with the way my lawyer has handled this case for me.

Signed in the presence of defense counsel this _____ day of _____, ____.

Defendant's Signature

CERTIFICATE OF DEFENDANT'S ATTORNEY

I, Defendant's Counsel of Record, certify that: I have discussed this case with the defendant, including the nature of the charge(s) and essential elements of each, the evidence against the defendant of which I am aware, the possible defenses the defendant has, the maximum penalty for the charge(s), and the defendant's right to appeal. No promises have been made to the defendant other than as set forth in this plea or on the record. I believe the defendant fully understands this written plea and the consequences of entering it, and that defendant does so of the defendant's own free will. Defendant did not appear to be under the influence of alcohol or drugs and did appear to be competent at the time of signing this plea form.

AGREED TO:

Assistant State Attorney

Counsel for Defendant