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ARREST / NOTICE TO APPEAR

1. Arrest (No Warrant) 3. Request for Warrant
6. Arrest (Warrant) 4. Request for Capias
2. N.T.A. 5. Juvenile Referral

1 JUVENILE

AD M I N I S T R A T I O N	OBT Number		Agency ORI Number 0500200		Agency Name Boca Raton Police Department		Agency Report Number (N.T.A.'s only) 3, 2, 2022-002736		1		JUVENILE	
D E F E N D A N T	Charge Type: Check as many as apply: <input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Location of Arrest (Including Name of Business) 1291 SW 8TH ST, BOCA RATON, 1291 SW 8TH ST, BOCA RATON,		Location of Offense (Business Name, Address) 1291 SW 8TH ST, BOCA RATON, FL 33486		If Weapon Seized Enter Type: UNARMED		Multiple Clearance Indicator			
	Date of Arrest 02/28/2022		Time of Arrest 22:24		Booking Date 02/28/2022		Booking Time 22:34		Jail Date 02/28/2022		Jail Time 23:15	
	Name (Last, First, Middle) WINBORN, ANTHONY BRIAN		Alias: Alias (Name, DOB, Soc. Sec. #, Etc.)		Race W - White B - Black O - Oriental/Asian W		Sex M		Date of Birth 06/14/1965		Height 6'00	
	Weight 190		Eye Color BLUE		Hair Color BLACK		Complexion MEDIUM		Build Medium			
C O D E F	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) None		Marital Status M		Religion NONE		Indication of: Alcohol Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk <input type="checkbox"/> Drug Influence Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk <input type="checkbox"/>		Residence Type: 1. City 3. Florida 2. County 4. Out of State 1			
	Local Address (Street, Apt. Number) 1291 SW 8TH ST, BOCA RATON, FL 33486		(City)		(State)		(Zip)		Phone (561) 542-2376			
	Permanent Address (Street, Apt. Number) 1291 SW 8TH ST, BOCA RATON, FL 33486		(City)		(State)		(Zip)		Phone (561) 542-2376			
	Business Address (Name, Street) UNEMPLOYED,		(City)		(State)		(Zip)		Phone		Occupation DEFENDANT	
J U V E N I L E	D/L Number, State W516002652140 / FL		Soc. Sec. Number		INS Number		Place of Birth (City, State) TITUSVILLE, FL		Citizenship US			
	Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/>			
	Co-Defendant Name (Last, First, Middle)		Race		Sex		Date of Birth		1. Arrested <input type="checkbox"/> 3. Felony <input type="checkbox"/> 5. Juvenile <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/>			
	Parent <input type="checkbox"/> Other: <input type="checkbox"/> Legal Custodian <input type="checkbox"/>		Name (Last, First, Middle)		Address (Street, Apt. Number)		(City)		(State)		(Zip)	
C H A R G E	Notified by: (Name)		Relationship		Date		Time		JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT IAC 3. Incarcerated			
	Released To: (Name)		Relationship		Date		Time					
	The above address was provided by <input type="checkbox"/> defendant and/or <input type="checkbox"/> defendant's parents. The child and/or parent was told to keep the Juvenile Court Clerk's Office (Phone 355-2526) informed of any change of address.		School Attended		Grade		Property Crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Description of Property		Value of Property	
	Drug Activity N. N/A P. Possess		S. Sell B. Buy T. Traffic		R. Smuggle D. Deliver E. Use		K. Disperse/ Distribute		M. Manufacture/ Produce/ Cultivate		Z. Other	
I N T A K E	Charge Description MISUSE OF LASER LIGHTING DEVICES		Statute Violation Number 784.062(3A)		Violation of ORD # 3000		Drug Activity N		Drug Type N		Amount / Unit /	
	Charge Description ALTER DESTROY CONCEAL REMO REC DOC PHYS EVIDEN		Statute Violation Number 918.13(1A)		Violation of ORD # 3000		Drug Activity N		Drug Type N		Amount / Unit /	
	Charge Description		Statute Violation Number		Violation of ORD #		Drug Activity		Drug Type		Amount / Unit	
	Charge Description		Statute Violation Number		Violation of ORD #		Drug Activity		Drug Type		Amount / Unit	
N O T I C E	Health - Apparent Physical Condition of Defendant GOOD		Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input checked="" type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries		Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input checked="" type="checkbox"/> T.O.T. County Jail <input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health		PROPERTY - Received By NONE		Released By NONE		Released To NONE	
	Transported By Williams, David		Date Transported 02/28/22		Time Transported 0101		Other					
	<input type="checkbox"/> INSTRUCTION NO. 1 - Mandatory appearance in court <input checked="" type="checkbox"/> INSTRUCTION NO. 2 - You need not appear in Court but must comply with instructions on Page 2.		Location (Court, Room) South County 200 W Atlantic Ave Delray Beach, FL 33444		Court Date and Time							
	I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS NOTICE TO APPEAR, THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.		Signature of Defendant (or Juvenile and Parent/Custodian) MAR 01 2022		Date Signed							
A D M I N I S T R A T I O N	HOLD for Other Agency		Signature of Arresting Officer HARRISON, D. M.		Name Verification (Printed by Arrestee) (PRINT)		I.D. # 856		Agency BRPD		PAGE 1 OF 1	
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal		<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other		Intake Property Thomas #798		Pouch #		Witness here if subject signed with an "X".			

No Photo Available

PROBABLE CAUSE AFFIDAVIT				1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE	
A D M I N	OBTS Number		Agency ORI Number FL FL0500200		Agency Name BOCA RATON POLICE DEPARTMENT		Agency Report Number 3 2 2022-002736			
	Charge Type: Check as many as apply.		<input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony		<input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 6. Other		Special Notes:	
D E F	Name (Last, First, Middle) WINBORN, ANTHONY BRIAN					Race W		Sex M		Date of Birth 06/14/1965
	Charge Description 784.062(3A) MISUSE OF LASER LIGHTING DEVICES					Charge Description 918.13(1A) ALTER DESTROY CONCEAL REMO REC DOC PHYS				
C H A R G E S	Charge Description					Charge Description				
	Victim's Name (Last, First, Middle) BROWARD COUNTY SHERIFF,					Race		Sex		Date of Birth
V I C T I M	Local Address (Street, Apt. Number) (City) (State) (Zip) 2601 W BROWARD BLVD, FT LAUDERDALE, FL 33312					Phone (954) 831-8900		Address Source		
	Business Address (Name, Street) (City) (State) (Zip) BROWARD COUNTY SHERIFF'S OFC E					Phone (954) 831-8200		Occupation		
	<p>The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe that the above named Defendant committed the following violation of law.</p> <p>The Person taken into custody ...</p> <p> <input type="checkbox"/> committed the below acts in my presence. <input checked="" type="checkbox"/> was observed by BSO PAPA UNIT who told OFC HARRISON that he/she saw the arrested person commit the below acts. </p> <p> <input checked="" type="checkbox"/> confessed to OFC HARRISON admitting to the below facts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation. </p> <p>On the 28 day of February, 2022 at 22:24 (Specifically include facts constituting cause for arrest)</p>									
P R O B A B L E C A U S E	Victim 2: State of Florida									
	On 02/28/2022 at approximately 2202 hours, I responded to 1291 SW 8th St in reference to assisting Broward Sheriff's Office.									
	BSO advised that they were working a robbery investigation in Deerfield Beach, FL and someone from the above address was shining a green laser light at their helicopter (Papa) unit, causing issues for the aircraft. BSO has video surveillance of the male shining his laser at their helicopter, which was submitted into BRPD evidence. BSO described the suspect responsible as a white male wearing a brown shirt and blue camo pants, standing outside with a female. BSO Papa Unit shined their spotlight on the above address multiple times to indicate that this is where the suspect was shining the laser at their helicopter.									
	I then noticed a male matching this description, later identified by his FL DL to be Anthony Winborn, standing out front of this address. I approached him and asked him what was going on. I then detained Winborn in handcuffs, checked for tightness and proper fit. I then brought him to my marked police vehicle where I read Winborn his Florida Constitutional Warnings from a preprinted card issued by BRPD. Winborn acknowledged he understood his Constitutional Warnings and agreed to speak with me without an attorney present.									
S T A T E M E N T	I then asked him what he had been doing with the laser. He advised that he was aware there was a helicopter flying around outside, and he wanted to have some fun just playing around. He admitted to shining the laser at the helicopter a few times. He also stated he was aware that shining a laser at someone, including a helicopter, can blind a person and cause them to crash. I then asked him where the laser was, and he advised it was in the neighbor's bushes. I asked him why the laser was in the bushes, and he									
	<p>SWORN AND SUBSCRIBED BEFORE ME</p> <p>KINGMAN, DARRY NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S. 117.10)</p> <p>02/28/2022 DATE</p>									
	<p>HARRISON, DANIELLE MARIE (856) NAME OF OFFICER (PLEASE PRINT)</p> <p>02/28/2022 DATE</p>									
	<p>PAGE 1 OF 2</p>									

COURT


STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

OBTS Number		PROBABLE CAUSE AFFIDAVIT SUPPLEMENT		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Copies	1	JUVENILE
A D M N D E F	Agency ORI Number FL FL0500200		Agency Name BOCA RATON POLICE DEPARTMENT		Agency Report Number 3 2 2022-002736		
	Charge Type Check as many as apply: <input checked="" type="checkbox"/> 1. Felony <input type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other		Special Notes:				
Name (Last, First, Middle) WINBORN, ANTHONY BRIAN				Alias	Race W	Sex M	Date of Birth 06/14/1965
<p>stated he knew he was in trouble, and he was trying to hide it. Ofc De La Rua retrieved the laser, which we confirmed shined a green light, from the neighbor's bushes. The laser was submitted into BRPD evidence. I then advised Winborn that he was being placed under arrest for shining his laser at the helicopter.</p> <p>Based upon Winborn's statements and video surveillance from BSO, I have arrested Anthony Winborn for Misuse of Laser Lighting Devices pursuant to F.S.S. 784.062(3) (a) and for Tampering with Evidence pursuant to F.S.S 918.13(1) (a).</p>							
<div style="position: relative;"> PROBABLE CAUSE STATEMENT BOCA POST COPY NOT A CERTIFIED COPY </div>							
A D M N I S T R A T I V E	SWORN AND SUBSCRIBED BEFORE ME						
	KINGMAN, DARRYL NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)			 SIGNATURE OF ARRESTING / INVESTIGATING OFFICER			
	02/28/2022 DATE			HARRISON, DANIELLE MARIE (856) NAME OF OFFICER (PLEASE PRINT)			
				02/28/2022 DATE			
<div style="float: right;"> PAGE 2 OF 2 </div>							

COURT

STATE ATTORNEY

CENTRAL RECORDS

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CRIME ANALYSIS

P. I. O.



**PALM BEACH COUNTY
SHERIFF'S OFFICE**
Florida State Statute Exemption Sheet

Palm Beach County Sheriff's Office – Arrests Only

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	<input type="checkbox"/>	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	<input type="checkbox"/>	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	<input type="checkbox"/>	119.071(4)(c)	Undercover personnel.	
	<input type="checkbox"/>	119.071(2)(f)	Confidential informants (CIs).	
	<input type="checkbox"/>	119.071(2)(e)	Confession.	
Public Info. Exemptions	<input type="checkbox"/>	985.04(1)	Juvenile offender records.	
	<input type="checkbox"/>	119.071(h)(i)	Assets of a crime victim.	
	<input type="checkbox"/>	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	<input type="checkbox"/>	394.4615(7)	Mental health information.	
	<input type="checkbox"/>	119.071(4)(d)(2)(a)	Home address, telephone, Social Security number, date of birth, or photos of active/former LE personnel, spouses, and children.	
Florida Rules of Judicial Administration 2.420 (Rule of 23)	<input checked="" type="checkbox"/>	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	<input type="checkbox"/>	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	<input type="checkbox"/>	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	<input type="checkbox"/>	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2022005522	Date: 3/1/2022
	Specialist Name/ID: S.Evans/23872