

22 CF 1668 MB

A D M I N I S T R A T I O N	OBTS Number		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
	Agency ORI Number 0500200		Agency Name Boca Raton Police Department				Agency Report Number (N.T.A.'s only) 3 2 2022-002657			
D E F E N D A N T	Charge Type: Check as many as apply: ☒ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other		If Weapon Seized Enter Type Firearm (semi-auto)(typ		Multiple Clearance Indicator					
	Location of Arrest (Including Name of Business) 501 NW 77TH ST BOCA RATON, 501 NW 77TH ST 300, BOCA						Location of Offense (Business Name, Address) 501 NW 77TH ST 300, BOCA RATON, FL 33487			
J U V E N I L E	Date of Arrest 02/27/2022	Time of Arrest 00:32	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle			
	Name (Last, First, Middle) DONHOEFFNER, ALEXANDRA MARIA									
C O D E F	Alias: Alias (Name, DOB, Soc. Sec. #, Etc.)									
	Race: W - White 1 - American Indian W F 04/30/1976 5'10 135 BLUE BLONDE LIGHT thin Sex: Date of Birth: Height: Weight: Eye Color: Hair Color: Complexion: Build:									
C O D E F	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)									
	Marital Status: S Religion:									
C O D E F	Indication of Alcohol Influence: Yes ☐ No ☒ Unk. ☐ Drug Influence: Yes ☐ No ☒ Unk. ☐									
	Local Address (Street, Apt. Number) (City) (State) (Zip) Phone 1829 CREEK OAK CIRCLE, FUQUAY VARINA, NC 27526 (754) 777-3926									
C O D E F	Permanent Address (Street, Apt. Number) (City) (State) (Zip) Phone 1829 CREEK OAK CIRCLE, FUQUAY VARINA, NC 27526 (754) 777-3926									
	Business Address (Name, Street) (City) (State) (Zip) Phone RACHELS, 2905 45TH ST									
C O D E F	Address Source: VERBAL									
	Occupation: Dancer									
C O D E F	D/L Number, State: 000041254285 / NC									
	INS Number: Place of Birth (City, State): POLAND, OT, Poland Citizenship: US									
C O D E F	Co-Defendant Name (Last, First, Middle): Race: Sex: Date of Birth: ☐ 1. Arrested ☐ 3. Felony ☐ 5. Juvenile ☐ 2. At Large ☐ 4. Misdemeanor									
	Co-Defendant Name (Last, First, Middle): Race: Sex: Date of Birth: ☐ 1. Arrested ☐ 3. Felony ☐ 5. Juvenile ☐ 2. At Large ☐ 4. Misdemeanor									
C O D E F	Parent ☐ Other: Name (Last, First, Middle): Residence Phone:									
	Legal Custodian ☐ Address (Street, Apt. Number) (City) (State) (Zip) Business Phone:									
C O D E F	Notified by: (Name) Date: Time: JUVENILE DISPOSITION 1. Handled/Processed within Department and Released 2. TOT JAC 3. Incarcerated									
	Released To: (Name) Relationship: Date: Time:									
C O D E F	The above address was provided by ☐ defendant and/or ☐ 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.									
	Property Crime? ☐ Yes ☒ No Description of Property: Value of Property:									
C O D E F	Drug Activity: ☐ S. Sell ☐ R. Smuggle ☐ K. Disperse/Distribute ☐ M. Manufacture/Produce/Cultivate ☐ Z. Other N. N/A B. Buy D. Deliver E. Use									
	Drug Type: ☐ N. N/A ☐ B. Barbiturate ☐ H. Hallucinogen ☐ P. Paraphernalia/Equipment ☐ U. Unknown A. Amphetamine C. Cocaine E. Heroin O. Opium/Derv. S. Synthetic Z. Other									
C O D E F	Charge Description: AGGRAVATED ASSAULT (DEADLY WEAPON) Statute Violation Number: 784.021(1A) Violation of ORD #:									
	Drug Activity: Drug Type: N Amount / Unit: Offense #: Counts: Domestic Violence: ☐ Y ☒ N Warrant / Capias Number: Bond: NO BOND									
C O D E F	Charge Description: Statute Violation Number: Violation of ORD #:									
	Drug Activity: Drug Type: Amount / Unit: Offense #: Counts: Domestic Violence: ☐ Y ☐ N Warrant / Capias Number: Bond:									
C O D E F	Charge Description: Statute Violation Number: Violation of ORD #:									
	Drug Activity: Drug Type: Amount / Unit: Offense #: Counts: Domestic Violence: ☐ Y ☐ N Warrant / Capias Number: Bond:									
C O D E F	Health / Apparent Physical Condition of Defendant: Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries									
	Explain:									
C O D E F	Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☐ T.O.T. County Jail PROPERTY - Received By: Released By: Released To:									
	Transported By: Date Transported: Time Transported: Other:									
C O D E F	INSTRUCTION NO. 1 - Mandatory appearance in court ☒ 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 33448 Court Date and Time:									
C O D E F	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): Date Signed:									
C O D E F	HOLD For Other Agency: Signature of Arresting Officer: Name Verification (Printed by Arrestee):									
	Name of Arresting Officer (Print): HOWARD, H. I.D. #: 826 Agency:									
C O D E F	(PRINT): Page: 1 OF 1									
	Witness here if subject signed with an "X":									

JKA 0529783

P931

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE
ADMINISTRATIVE	Agency ORI Number FL FL0500200		Agency Name BOCA RATON POLICE DEPARTMENT		Agency Report Number 3 2 2022-002657				
	Charge Type Check as many as apply ☒ 1. Felony ☐ 2. Traffic Felony		☐ 3. Misdemeanor ☐ 4. Traffic Misdemeanor		☐ 5. Ordinance ☐ 6. Other		Special Notes:		
DEFENDANT	Name (Last, First, Middle) DONHOEFFNER, ALEXANDRA MARIA				Race W		Sex F		Date of Birth 04/30/1976
	Charge Description 784.021(1A) AGGRAVATED ASSAULT (DEADLY WEAPON)				Charge Description				
CHARGES	Charge Description				Charge Description				
	Charge Description				Charge Description				
VICTIM	Victim's Name (Last, First, Middle) PIRIA-FLORES, MANUEL				Race M		Sex O		Date of Birth 9/26/1973
	Local Address (Street, Apt. Number) 10721 MELINDA, EL PASO, TX 7992				Phone 720-725-388		Address Source Verbal		
WITNESS	Business Address (Name, Street) 10721 MELINDA, EL PASO, TX 7992				Phone 720-725-388		Occupation Unknown		
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. The Person taken into custody ... ☐ committed the below acts in my presence. ☒ confessed to OFFICER HOWARD admitting to the below facts ☒ was observed by VICTIM who told OFFICER HOWARD that he/she saw the arrested person commit the below acts. ☒ was found to have committed the below acts, resulting from my (described) investigation. On the 27 day of February, 2022 at 01:17 (Specifically include facts constituting cause for arrest.)									
Officers were dispatched to 501 NW 77th ST (Extended Stay), Boca Raton FL in reference to a W/F guest who brandished a firearm at another guest. Officers arrived on scene and met with the victim who advised the following: He was drinking with his friends near the parking lot when a W/F staying in room 300 told him to keep the noise down. He advised he moved further away, to satisfy the W/F. Sometime later, the W/F came out again, this time appearing frustrated. The victim saw the W/F standing in the threshold of her room holding a firearm in her hand, down by her side. At this time, the female then stated to the victim "If you guys don't stop the noise, there's going to be a problem", all the while holding the firearm to her side in a manner to ensure it was seen by the victim. According to the victim, given the two separate occasions with the W/F, and now her holding a firearm, he believed his life was in imminent danger, and truly believed the firearm could be used if police were not notified. Post Miranda Donhoeffner stated the following: She was trying to sleep when a group of males kept making noise outside her room. She addressed the victim and his friends once to keep the noise down. Donhoeffner advised she tried to fall back asleep when she heard the victim and his friends being loud again. Donhoeffner again opened her door, this time more frustrated and claims to have asked the males to keep the noise down again; however Donhoeffner had to be asked about a gun, before she finally claimed anything about a gun, she stated she used a hand gesture. She demonstrated the hand gesture by using her thumb, pointer finger and middle finger to simulate as she was holding a gun. Donhoeffner was adamant that she was never in possession of an actual firearm at any time during the altercation with the victim and his friends. A consent to search of room 300 was obtained from both Donhoeffner and her mother. Officers then searched the room and located a Smith and Wesson M&P Serial# NAR6746 in a box under the bed in which Donhoeffner was using. A second post Miranda interview was conducted with Donhoeffner, where it was explained									
ADMINISTRATIVE	SWORN AND SUBSCRIBED BEFORE ME				SIGNATURE OF ARRESTING / INVESTIGATING OFFICER				
	RADFORD, STEPHEN THOMAS NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10) 02/27/2022 DATE				HOWARD, HALEY (826) NAME OF OFFICER (PLEASE PRINT) 02/27/2022 DATE				
PAGE 1 OF 2									

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P.I.O.

VICTIM NOTIFICATION FORM

This form must be completed when one of the following crime(s) has been committed:

- Homicide (Ch. 782)
- Sexual Offense (Ch. 794)
- Attempted Murder
- Attempted Sexual Offense
- Stalking (F.S. 784.048)
- Domestic Violence - (This includes any assault, aggravated assault, battery, aggravated battery, sexual assault, sexual battery, stalking, aggravated stalking or any criminal offense resulting in physical injury or death of one family member or household member by another, who is or was residing in the same single dwelling.)

Upon completion, this form must accompany the booking paperwork.

If applying for a warrant, attach this form to the filing packet.

1. Incident Report#: 2022002657 Agency: BOCA RATON POLICE DEPT
Offense: AGGRAVATED ASSAULT
Suspect/Offender: DON HOFFMEYER, ALEXANDRA
D.O.B. 4/30/74 Race: W Sex: F

2. Warrant#(s): _____

3.a. Victim's name: PIPIA FLORES, MANUEL D.O.B. 9/26/75 Race: H Sex: M
Address: 10721 MELINDA
City: EL PASO State: TX Zip: 75927
Home#: _____ Work#: _____ Other: 720-725-3888

b. Victim's next of kin, friend or neighbor: _____
Address: _____
City: _____ State: _____ Zip: _____
Home#: _____ Work#: _____ Other: _____

NOTE: PURSUANT TO F.S. 119.07, THE CONTENTS OF THIS FORM MAY BE SUBJECT TO CONFIDENTIALITY.

Victim/Relation Notification Waiver and Confidential Information Request.

(check applicable boxes)

☐ **Waiver:** I choose not to be notified when the arrestee is released from custody.

☐ **Confidential:** Pursuant to F.S. 119.07 (3)(S)1, I request that the address and telephone number on this form be kept confidential (applicable only to sexual battery, aggravated child abuse, aggravated stalking, harassment, aggravated battery, or domestic violence cases).

Other confidentiality provisions of Florida State Statutes may also be applicable

Signature of person waiving notification: _____

Printed name of person waiving notification: _____

Officer's Name: H. HOWARD I.D.# 826 Date: 2/27/22

White/Corrections or State Attorney (Warrant Application) Yellow/Warrants Section Pink/Central Records

SUSPECT/OFFENDER: _____

(FOR WARRANTS USE ONLY)

COURT CASE/WARRANT#: _____



**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	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	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)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(xii) 741.30(3)(b)	The victim's address in a domestic violence action on petitioner's request.	
	☐	(xiii) 119.071(2)(h), 119.0714(1)(h)	Protected information regarding victims of child abuse or sexual offenses.	
	☐			
	☐			
	☐			
	☐			
	☐			
Other	☐		Other:	
	☐		Other:	

REVIEW COMPLETED BY

Booking Number: 2022005380	Date: 02/28/2022
	Specialist Name/ID: T Howard/7185