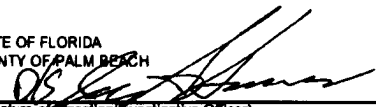
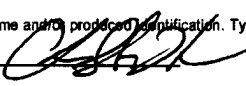


50-2021-mm-006151-AMB

OBTS Number		ARREST / NOTICE TO APPEAR		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		2		Juvenile	
Agency ORI Number FLO 500000		Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE				Agency Report Number (N.T.A.'s only) 06- 21-098224					
Charge Type: Check as many as apply.		1. Felony 2. Traffic Felony		3. Misdemeanor 4. Traffic Misdemeanor		5. Ordinance 6. Other		Weapon Seized / Type 1. Yes 2. No		Multiple Clearance Indicator	
Location of Arrest (Including Name of Business) 12111 Old Indiantown Rd. Jupiter Fl. 33478						Location of Offense (Business Name, Address) Same					
Date of Arrest 08/20/2021		Time of Arrest 2200hrs		Booking Date		Booking Time		Jail Date		Jail Time	
Name (Last, First, Middle) Maglio, Michael						Alias (Name, DOB, Soc. Sec. #, Etc.)					
Race W - White I - American Indian B - Black O - Oriental/Asian		Sex W M		Date of Birth 08/23/1983		Height 5'6		Weight 180		Eye Color Bru	
								Hair Color Bru		Complexion Fair	
										Build Medium	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)						Marital Status Married		Religion UNK		Indication of: Alcohol Influence Drug Influence	
Local Address (Street, Apt. Number) 12111 OLD INDIANTOWN RD JUPITER, FL 33478						Phone ()		Residence Type: 1. City 2. County 3. Florida 4. Out of State			
Permanent Address (Street, Apt. Number)						Phone ()		Address Source FL Driver's License			
Business Address (Name, Street)						Phone ()		Occupation UNK			
D/L Number, State M240-542-83-303-0		Soc. Sec. Number		INS Number		Place of Birth (City, State) W.P.B. FL		Citizenship U.S.			
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth		1. Arrested 2. At Large	
										3. Felony 4. Misdemeanor 5. Juvenile	
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth		1. Arrested 2. At Large	
										3. Felony 4. Misdemeanor 5. Juvenile	
Parent Legal Custodian Other:		Name (Last) (First) (Middle)						Residence Phone ()			
Address (Street, Apt. Number)		(City) (State) (Zip)						Business Phone ()			
Notified by: (Name)				Date		Time		Juvenile Disposition 1. Handled/processed within Dept. and Released.		2. TOT HRS / DYS 3. Incarcerated	
Released To: (Name)				Relationship				Date		Time	
The above address provided by defendant and / or defendant's parents the child and / or parent was told to keep the Juvenile Court Clerk (Phone 355-2526) informed of any change of address. Yes, by: (Name) No: (Reason)						School Attended				Grade	
Property Crime? Yes 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. Dispense/ Distribute		M. Manufacture/ Produce/ Cultivate		Z. Other	
										Drug Type N. N/A A. Amphetamine	
										B. Barbiturate C. Cocaine E. Heroin	
										H. Hallucinogen M. Marijuana O. Opium/Deriv.	
										P. Paraphernalia/ Equipment S. Synthetics	
										U. Unknown Z. Other	
Charge Description Open Carry Of Weapons		Counts 1		Domestic Violence Y N		Statute Violation Number 790.053(1)(3)				Violation of ORD #	
Drug Activity		Drug Type		Amount / Unit		Offense # 21-098224				Warrant / Capias Number	
										Bond	
Charge Description Resist Arrest Without Violence		Counts 1		Domestic Violence Y N		Statute Violation Number 843.02				Violation of ORD #	
Drug Activity		Drug Type		Amount / Unit		Offense #				Warrant / Capias Number	
										Bond	
Charge Description		Counts		Domestic Violence Y N		Statute Violation Number				Violation of ORD #	
Drug Activity		Drug Type		Amount / Unit		Offense #				Warrant / Capias Number	
										Bond	
Charge Description		Counts		Domestic Violence Y N		Statute Violation Number				Violation of ORD #	
Drug Activity		Drug Type		Amount / Unit		Offense #				Warrant / Capias Number	
										Bond	
Location (Court, Room Number, Address) Criminal Justice Complex 3228 Gun Club Rd. West Palm Beach FL 33406						Date Signed 08/20/2021					
Court Date and Time Month September Day 21 Year 2021 Time 1300 AM X PM						Date Signed					
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)					
HOLD for other Agency Name:		Signature of Arresting Officer D/S I. Sowers #9187				Name Verification (Printed by Arrestee) (PRINT)					
Intake Deputy I.D. #		Pouch #		Transporting Officer D/S C. Sowers #9187		ID #		Agency			
								Witness here if subject signed with an "X"			
								1 OF 1			

		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		2		Juvenile	
ADMIN	OBTS Number										
	Agency ORI Number FLO 500000	Agency Name PALM BEACH COUNTY SHERIFF'S OFFICE				Agency Report Number 06- 21-098224					
CHARGES	Charge Type: Check as many as apply.	<input type="checkbox"/> 1. Felony		<input checked="" type="checkbox"/> 3. Misdemeanor		<input type="checkbox"/> 5. Ordinance		Special Notes:			
		<input type="checkbox"/> 2. Traffic Felony		<input type="checkbox"/> 4. Traffic Misdemeanor		<input type="checkbox"/> 6. Other					
DEF	Name (Last, First, Middle) Maglio, Michael	Alias				Race W		Sex M		Date of Birth 08/23/1983	
CHARGES	Charge Description Open Carry Of Weapons	790.053(1)(3)				Charge Description Resist Arrest Without Violence		843.02			
	Charge Description					Charge Description					
VICTIM	Victim's Name (Last, First, Middle) State Of Florida					Race		Sex		Date of Birth	
	Local Address (Street, Apt. Number)	(City)		(State) (zip)		Phone		Address Source			
	Business Address (Name, Street)	(City)		(State) (zip)		Phone		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 checked="" type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts.</p> <p><input type="checkbox"/> confessed to _____ admitting to the below facts. <input type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the 20 day of August 2021 at 2045 <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest.)</p> <p>On the above stated date and time I was conducting surveillance in a unmarked vehicle on 120th Trail N. just north of Old Indian Town Rd. in unincorporated Jupiter Fl. 33478. I was parked on the roadway which is county owned and maintained. I was accompanied by two uniformed FWC officers identified as Officer Brevik and Officer Stoker. I was wearing a PBSO Uniform with my unit identifying patches on each sleeve and a hat marked "SHERIFF". During the time I was conducting surveillance my unmarked vehicle had the lights turned off and I was using multiple pieces of covert surveillance equipment.</p> <p>At one point while I was conducting surveillance I observed a large truck drive past my vehicle on my driver side at a slow rate of speed. Moments later the same vehicle pulled behind my vehicle with it's headlights on illuminating the interior of my vehicle. I immediately feared the vehicle may be suspects in the case I was currently working. Almost around he same time a beam of light that I recognized as a flashlight beam hit the windows of my vehicle. I looked over my left shoulder and observed an unknown white male tactically approaching my vehicle from the driver rear side. I observed he was holding his right arm at his side attempting to conceal what I immediately recognized as a semi-automatic pistol. When I rolled the window down I identified myself as a Deputy Sheriff and ordered the unknown white male to to drop the firearm if he was holding one. He gave an affirmative answer that he was armed. I cannot recall the exact verbiage he replied with based on the tense and immediate threat of danger I was placed in. He refused my command to disarm and began to yell expletives. He further gave an order for me to leave and did not believe I was a Law Enforcement Officer. He then quickly turned away and headed towards his property which appeared to be fully fenced. As he was walking away I gave him multiple lawful orders to stop which he refused each time. During the time he was walking away I observed he was still armed with what I could see was a large pistol. He then entered onto his property and walked towards the home. My immediate fear was he could gain a tactical position or arm himself with a more lethal firearm. Moments later he returned to the gate and continued to display more erratic, angered behavior but appeared to be unarmed at this time. Based on my observation of him appearing to be unarmed at this time, I assumed he had dropped the firearm somewhere on his property. During his display of erratic behavior he made multiple comments about wanting to speak with a supervisor and stated he did not believe I was conducting a legitimate law enforcement investigation.</p> <p>On arrival of Sgt. Lopez the unknown white male identified himself as Michael Maglio. After he concluded speaking with Sgt. Lopez I placed him into handcuffs and checked for double lock and fit. I then walked him back to a waiting marked Palm Beach County Sheriff's Office vehicle. I placed him into the prisoner compartment. He began to argue with me and protest his arrest. At one point during our interaction I told him he could not do what he did and informed him about the violation of law of openly carrying a firearm in public. His response to my statement was what he did was not open carry.</p> <p>Based on my investigation I find Probable Cause to Charge Michael Maglio with One Count of Open Carry Of Weapons F.S.S. 790.053(1)(3) and One Count of Resist Arrest Without Violence F.S.S. 843.02.</p>											
ADMINISTRATIVE	STATE OF FLORIDA COUNTY OF PALM BEACH		 D/S I. Sowers #9187 (Signature of Arresting/Investigative Officer)								
	The foregoing instrument was sworn to or affirmed and subscribed before me this 15 day of August 20 21 by D/S I. Sowers #9187										
	(Print name of Arresting/Investigative Officer), who is personally known to me and produced identification. Type of identification produced Known D/S C. S. H. #15070 										
Notary Public, Clerk of Court, Officer (F.S.S. 117.10)											
PAGE 1 OF 1											



**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"/>			
Other	<input type="checkbox"/>		Other:	
	<input type="checkbox"/>		Other:	

REVIEW COMPLETED BY

Booking Number: 2021020824

Date: 8/22/2021

Specialist Name/ID: M. Tooks #8557