50-2026-CF 000121 AMB

05644540 05644544

6883

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

ADMINISTRATION

OBTS Number

Agency ORI Number	Agency Name	Agency Report Number (N.T.A.'s only)
0500200	Boca Raton Police Department	3 2 2026-000215

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: UNARMED

Multiple Clearance Indicator

Location of Arrest (Including Name of Business)	Location of Offense (Business Name, Address)
351 PLAZA REAL, BOCA RATON, FL 33432	351 PLAZA REAL, BOCA RATON, FL 33432

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
01/06/2026	23:56	01/07/2026	00:30	01/07/2026	00:41	NONE

DEFENDANT

Name (Last, First, Middle): ZELECHOWSKI, NATALIE NICOLE — Alias:

Alias (Name, DOB, Soc. Sec. #, Etc.)

Race (W - White, I - American Indian, B - Black, O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	F	06/07/2004	5'05	100	BROWN	BROWN	LIGHT	Small

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description)

Marital Status	Religion	Indication of: Alcohol Influence / Drug Influence
S	CHRISTIAN	Yes ☐ No ☒ Unk ☐

Local Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Residence Type: 1. City 2. County 3 Florida 4. Out of State
633 SIESTA KEY CIR 3028	DEERFIELD BEACH	FL	33441	(786) 878-1396	3

Permanent Address (Street, Apt. Number)	(City)	(State)	(Zip)	Phone	Address Source
633 SIESTA KEY CIR 3028	DEERFIELD BEACH	FL	33441	(786) 878-1396	SELF

Business Address (Name, Street)	(City)	(State)	(Zip)	Phone	Occupation

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
Z624316955000 / FL	[redacted]		NEW JERSEY, NJ,	US

CODEF

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

VICTIM NOTIFICATION REQUIRED

JUVENILE

☐ Parent ☐ Other: ☐ Legal Custodian — Name (Last, First, Middle) — Residence Phone

Address (Street, Apt. Number) (City) (State) (Zip) — Business Phone

HOLD

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

HOLD

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.
☐ Yes, by: ☐ No:

School Attended — Grade

Property Crime? ☐ Yes ☒ No — Description of Property — Value of Property

CODE

Drug Activity: N. N/A, P. Possess, S. Sell, B. Buy, T. Traffic, R. Smuggle, D. Deliver, E. Use, K. Disperses/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. Synthetic, U. Unknown, Z. Other

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #
BATTERY - PERSON 65 YOA OR OLDER	784.08(2C)	

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/		1	☒ Y ☐ N		NO Bond

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

CHARGE

Charge Description	Statute Violation Number	Violation of ORD #

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
		/			☐ Y ☐ N		

INTAKE

Health / Apparent Physical Condition of Defendant

Any knowledge of the following: ☐ Mental ☐ Escape Risk ☐ Medication ☐ Deformities ☐ Injuries
Explain:

Check which applies: ☐ Released O.R. ☐ Released to Parent/Guardian ☒ T O T County Jail ☐ Posted Bond ☐ South County Mental Health

PROPERTY - Received By	Released By	Released To
LEVINE	LEVINE	

Transported By	Date Transported	Time Transported	Other
LEVINE	01/07/2026	00:41	

NOTICE TO APPEAR

☐ 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 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.

FINGERPRINTED FBC JAN 07 '26 BRPD

No Photo Available

Signature of Defendant (or Juvenile and Parent/Custodian) — Date Signed

ADMIN

HOLD for Other Agency

☐ Dangerous ☐ Resisted Arrest ☒ Suicidal ☐ Other

Signature of Arresting Officer: AC

Name of Arresting Officer (Print): LEVINE, J. L. — I.D. #: 898

Name Verification (Printed by Arrestee) (PRINT)

JAN 7 3:45

Intake Deputy: D/O Rolle 25011 — Pouch #

Transporting Officer: LEVINE — I.D. #: 898 — Agency: BRPD

Witness here if subject signed with an "X".

PAGE 1 OF 1

NOT A CERTIFIED COPY

CONFIDENTIAL VICTIM INFORMATION PER MARSY'S LAW

PROBABLE CAUSE AFFIDAVIT

1. Arrest 2. N.T.A. 3. Request for Warrant 4. Request for Capias

ADMIN

OBTS Number			1	JUVENILE
Agency ORI Number: FL FL0500200	Agency Name: BOCA RATON POLICE DEPARTMENT	Agency Report Number: 3 | 2 | 2026-000215		

Charge Type: Check as many as apply. ☒ 1. Felony ☐ 2. Traffic Felony ☐ 3. Misdemeanor ☐ 4. Traffic Misdemeanor ☐ 5. Ordinance ☐ 6. Other

Special Notes:

DEF

Name (Last, First, Middle)	Alias	Race	Sex	Date of Birth
ZELECHOWSKI, NATALIE NICOLE		W	F	06/07/2004

CHARGES

Charge Description	Charge Description
784.08 ASLT/BATT ON 65 YOA/OLDER	
Charge Description	Charge Description

VICTIM

Victim's Name (Last, First, Middle): ZELECHOWSKI, YANETH S

Local Address (Street, Apt. Number) [redacted] (City) (State) (Zip)

B [redacted] (State) (Zip)

PROBABLE CAUSE STATEMENT

The undersigned certifies and swears that he/she has just and resonable 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 _____ admitting to the below facts.

☐ was observed by _____ who told _____ that he/she saw the arrested person committ the below acts.

☒ was found to have committed the below acts, resulting from my (described) investigation.

On the 7 day of January, 2026 at 01:26 (Specifically include facts constituting cause for arrest.)

On January 6th, 2025, at approximately 2314 hours, I responded to the entrance of 351 Plaza Real (American Social) located in the City of Boca Raton in response to a domestic disturbance.

Upon arrival, I spoke with the victim, Yaneth Zelechowski, who advised me of the following in a sworn statement: she arrived to the above address to pick up her daughter, Natalie Zelechowski, who was out with friends in Mizner Park. Natalie was by herself in parking garage A. Yaneth walked to go meet her, as she approached her daughter, Natalie pushed Yaneth`s hand. Yaneth`s phone was in her hand, and the ensuing push from Natalie`s hand to Yaneth`s caused Yaneth`s phone to hit her upper left eye lid causing swelling. The two then left the garage and entered Mark Zelechowski`s (Natalie`s father) car which was parked in front of American Social. When the car began to pull out of the parking spot, Natalie, who was sitting in the back seat, struck her mother who was sitting in the front passenger seat. This strike with her hands resulted in Yaneth sustaining a bloody nose.

I then spoke with Mark, who in a sworn statement advised while he was pulling out of the parking spot, witnessed Natalie strike Yaneth. Natalie was read her Miranda Rights; however, she denied hitting her mother.

Based on the physical injuries sustained by Yaneth and the sworn witness statement, and Yaneth being 67 years old, my investigation determined Natalie violated FSS 784.08(2C) Battery Against a Person 65 years of age or older.

NOT A CERTIFIED COPY

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

HORNE, ASHTON
NOTARY PUBLIC / CLERK OF COURT / OFFICER F.S.S. 117.10

1/7/26
DATE

OFC 2425
SIGNATURE OF ARRESTING / INVESTIGATING OFFICER

LEVINE, JOSHUA LAWRENCE (898)
NAME OF OFFICER (PLEASE PRINT)

01/07/2026
DATE

COURT STATE ATTORNEY CENTRAL RECORDS JAIL CRIME ANALYSIS P. I. O.

STATE OF FLORIDA
DOMESTIC VIOLENCE LETHALITY ASSESSMENT

Officer Name: Toro	Badge #: 910	Department/Precinct: Boca Raton		Case #: 26-215	
Victim Name: Yaneth Zelechowski	DOB: [redacted]	Sex:	Race/Ethnicity:	Date:	Time:
Victim Phone: [redacted]	Is this a safe #?: ☑ Yes ☐ No	Relationship to offender: [redacted]			
Offender's name: Natalie Zelechowski	Consent to follow-up call from service provider: ☐ Yes ☑ No				

A "Yes" response to any of Questions 1-4 will require law enforcement to advise the victim they are in a potentially lethal situation.

1.	Did they ever use a weapon against you or threaten you with a weapon?	☐ Yes	☑ No	☐ No Ans
2.	Did they ever threaten to kill you or your children?	☐ Yes	☑ No	☐ No Ans
3.	Do you believe they will try to kill you?	☐ Yes	☑ No	☐ No Ans
4.	Have they ever choked you or attempted to choke you?	☐ Yes	☑ No	☐ No Ans

A "No" response to Questions 1-4, but a "Yes" response to at least four of the questions between Questions 5-11 will require law enforcement to advise the victim they are in a potentially lethal situation.

5.	Do they have a gun or could they easily obtain a gun?	☐ Yes	☑ No	☐ No Ans
6.	Are they violently or constantly jealous, or do they control most of your daily activities?	☐ Yes	☑ No	☐ No Ans
7.	Did you leave or separate from them after you were living together or married?	☑ Yes	☐ No	☐ No Ans
8.	Are they unemployed?	☐ Yes	☑ No	☐ No Ans
9.	To the best of your knowledge, have they ever attempted suicide?	☐ Yes	☑ No	☐ No Ans
10.	Do you have a child who they believe is not their biological child?	☐ Yes	☐ No	☑ No Ans
11.	Have they ever followed, spied on, or left threatening messages for you?	☐ Yes	☐ No	☑ No Ans

If the result of the victim's response to Question 12 leads the law enforcement officer to believe the victim is in a potentially lethal situation, then law enforcement will be required to advise the victim of that result.

12. Is there anything else that worries you about your safety? If so, what worries you?

as long as she is sober
there is no issue

Check one:	☐ The victim declined to be screened.
	☐ The officer could not administer the screen.
	☐ The victim is in a potentially lethal situation based on score.
	☐ The victim is in a potentially lethal situation based on the officer's belief.
	☑ The victim is not in a potentially lethal situation.
Remember: Law enforcement must advise *all* victims of the nearest locally certified domestic violence center, regardless of score or officer belief.	

Each situation may present unique factors that influence risk for lethal violence that are not captured in this assessment. Although most victims who are believed to be in a potentially lethal situation would not be expected to be killed, these victims face a much higher risk than other victims of intimate partner violence.

NOT A CERTIFIED COPY

VICTIM NOTIFICATION FORM

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

- Homicide (Ch. 782)
- Attempted Murder
- Stalking (F.S. 784.048)
- Sexual Offense (Ch. 794)
- Attempted Sexual Offense
- 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.

SUSPECT/OFFENDER: _____ COURT CASE/WARRANT#: _____ (FOR WARRANTS USE ONLY)

1. Incident Report#: 2026-000215 Agency: Boca Raton
   Offense: Domestic Violence
   Suspect/Offender: Natalie Zelechowski
   D.O.B. 6/7/04 Race: W Sex: F

2. Warrant#(s): _____

3.a. Victim's name: Yaneth Zelechowski D.O.B. _____ Race: W Sex: F
   Addr[redacted]
   City:
   Hom

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: Toro I.D.# 910 Date: 1/7/26

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

NOT A CERTIFIED COPY

Boca Raton
POLICE SERVICES DEPARTMENT

100 NW 2ND AVENUE • BOCA RATON, FL 33432-3795
PHONE: (561) 338-1234
www.BocaPolice.com
@BocaPolice

Victims' Right to Confidentiality Form

Marsy's Law (effective January 8, 2019), FL Constitution, Article 1, §16(b)

BRPD Case Number: 2026-000215

Defendant's Name(s): Natalie Zelechowski

Florida Constitution, Article 1, Section 16(b)(5): Every victim is entitled to the following right, beginning at the time of his or her victimization: "The right to prevent disclosure of information or records that could be used to locate or harass the victim or the victim's family, or which could disclose confidential or privileged information of the victim." ***(This does not include the victim's identity.)***

I HAVE READ AND UNDERSTOOD THE ABOVE PARAGRAPH.

Victim Name: Janeth Zelechowski

Victim Signature: VERBAL (BWC ON) **Date:** 1/7/2026

(If the victim is under age 18, a parent or guardian's signature should be obtained.)

Parent/Guardian Name: _____ **Date:** _____

Parent/Guardian Signature: _____

FILED PBC - GUN CLUB
'26 JAN 7 AM 7:48

Witness (print/signature): TORO ~~TORO~~ #910

I.D. # 910 (Law Enforcement Officer informing victim)

NOT A CERTIFIED COPY

Palm Beach County Sheriff's Office

Florida State Statute Exemption Sheet

	X	Florida State Statute	Description	Page Number(s)
L/E Exemptions	☐	119.071(4)(c)	Undercover personnel	
	☐	119.071(2)(e)	Confession	
Public Info. Exemptions	☐	FL Const. Art. I, s. 16(b)(5)	Marsy's Law – victim information shall be redacted. The term "victim" also includes the victim's lawful representative, the parent or guardian of a minor, or the next of kin of a homicide victim. The term "victim" does not include the accused (ref. page 99 of the CRTM for additional information)	
	☐	119.071(2)(j)	Home/employment telephone number, home/employment address, or personal assets of a person who has been the victim of sexual battery, aggravated child abuse, aggravated stalking, harassment, aggravated battery or domestic violence	
	☐	119.0712(2)	Personal information contained in a motor vehicle record	
	☐	316.650(11)	Driver information contained in a uniform traffic citation	
	☐	119.071(4)(d)2.a.	Home addresses, telephone numbers, dates of birth, and photographs of active/former LE personnel, spouses, and children	
Florida Rules of Judicial Administration 2.420	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers	2
	☐	(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	☐			
	☐			
	☐			
	☐			

NOT A CERTIFIED COPY

REVIEW COMPLETED BY

Booking Number: 2026000526	**Date:** 1/7/2026
	Specialist Name/ID#: T. Howard/7185