

ARREST / NOTICE TO APPEAR				1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	JUVENILE N											
Agency ORI Number 0500200		Agency Name Boca Raton Police Department		Agency Report Number (N.T.A.'s only) 3 2 2017-002867														
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 None/not Applicable		Multiple Clearance Indicator										
Location of Arrest (Including Name of Business) 6000 W GLADES ROAD				Location of Offense (Business Name, Address) 6000 W GLADES RD, BOCA RATON, FL 33431														
Date of Arrest 02/24/2017		Time of Arrest 03:29		Booking Date 02/24/2017		Booking Time 03:45		Jail Date N/A	Jail Time N/A									
Name (Last, First, Middle) KUENZLER, CODY M																		
Alias: 																		
Race W - White B - Black		Sex M		Date of Birth 02/05/1996		Height 5'10		Weight 150										
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TATT WRIST / "V"								Marital Status S Religion UNKNOWN										
Local Address (Street, Apt. Number) 3601 N MILITARY TRL, BOCA RATON, FL 33431		(City)		(State)		(Zip)		Phone (978) 935-6354										
Permanent Address (Street, Apt. Number) 3601 N MILITARY TRL, BOCA RATON, FL 33431		(City)		(State)		(Zip)		Phone (978) 935-6354										
Business Address (Name, Street) LYNN UNIVERSITY,		(City)		(State)		(Zip)		Phone										
D/L Number, State S58927714 / MA		Soc. Sec. No. 		INS Number 		Place of Birth (City, State) LOWELL, MA, United		Citizenship US										
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth										
Co-Defendant Name (Last, First, Middle)				Race		Sex		Date of Birth										
<input type="checkbox"/> Parent <input type="checkbox"/> Other: _____		Name (Last, First, Middle)								Residence Phone								
<input type="checkbox"/> Legal Custodian																		
Address (Street, Apt. Number)		(City)		(State)		(Zip)				Business Phone								
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												
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. <input type="checkbox"/> Yes, by: <input type="checkbox"/> No:										Grade								
<input type="checkbox"/> Yes, by: <input type="checkbox"/> No:										School Attended								
C O D E		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	B. Barbiturate C. Cocaine A. Amphetamine	H. Hallucinogen M. Marijuana E. Heroin	P. Paraphernalia/ Equipment S. Synthetic	U. Unknown Z. Other
C H A R G E		Charge Description TRESPASS - STRUCTURE OR CONVEYANCE.										Statute Violation Number 810.08(N)(2b)		Violation of ORD #				
C H A R G E		Drug Activity N		Drug Type		Amount / Unit /		Offense # 2017-002867		Counts 1		Domestic Violence <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		Warrant / Capias Number		Bond		
C H A R G E		Charge Description										Statute Violation Number		Violation of ORD #				
C H A R G E		Drug Activity		Drug Type		Amount / Unit /		Offense #		Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Warrant / Capias Number		Bond		
C H A R G E		Charge Description										Statute Violation Number		Violation of ORD #				
C H A R G E		Drug Activity		Drug Type		Amount / Unit		Offense #		Counts		Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Warrant / Capias Number		Bond		
I N T A K E		Health / Apparent Physical Condition of Defendant INTOXICATED										Any knowledge of the following: <input type="checkbox"/> Mental <input type="checkbox"/> Escape Risk <input type="checkbox"/> Medication <input type="checkbox"/> Deformities <input type="checkbox"/> Injuries Explain:						
I N T A K E		Check which applies: <input type="checkbox"/> Released O.R. <input type="checkbox"/> Released to Parent/Guardian <input type="checkbox"/> T.O.T. County Jail <input type="checkbox"/> Posted Bond <input type="checkbox"/> South County Mental Health										PROPERTY - Received By J. DESIR		Released By		Released To		
I N T A K E		Transported By										Date Transported		Time Transported		Other		
N O T I C E		<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 33442						
T O A P P E A R												Court Date and Time MARCH 23 2017 0830 AM						
T O A P P E A R		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 COMTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.																
Signature of Defendant (or Juvenile and Parent/Custodian)												Date Signed						
A D M I N		HOLD for Other Agency				Signature of Arresting Officer J. DESIR				Name Verification (Printed by Arrestee) FEB 24 AM 7:43								
A D M I N		<input type="checkbox"/> Dangerous <input type="checkbox"/> Suicidal				<input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Other				(PRINT) DESR, JESSICA M.								
A D M I N		Take, Depose, & Oath #		Pouch #		Transporting Officer J. CHRISWISKE		I.D. # 788 660		Agency SCANNED		PAGE 1 OF 1						
Witness here if subject signed with "X"																		

OBTS Number		PROBABLE CAUSE AFFIDAVIT			1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	1	JUVENILE	
A D M I	Agency ORI Number FL 0500200	Agency Name BOCA RATON POLICE DEPARTMENT	Agency Report Number 3 2 2017-002867						
N	Charge Type: Check as many as apply. 1. Felony 2. Traffic Felony	3. Misdemeanor 4. Traffic Misdemeanor	5. Ordinance 6. Other	Special Notes:					
D E F	Name (Last, First, Middle) KUENZLER, CODY M	Alias			Race W	Sex M	Date of Birth 02/05/1996		
C H A R G E S	Charge Description 810.08(1) TRESPASS - STRUCTURE OR CONVEYANCE .	Charge Description							
V I C T I M	Victim's Name (Last, First, Middle) BLUE MARTINI BAR,				Race	Sex	Date of Birth		
C T I M	Local Address (Street, Apt. Number) 6000 W GLADES RD, BOCA RATON, FL 33431	(City)	(State)	(Zip)	Phone (561) 910-2583	Address Source			
B L E A B L E C A U S E	Business Address (Name, Street) 6000 W GLADES RD, 6000 W GLADES RD	(City)	(State)	(Zip)	Phone (561) 910-2583	Occupation			
<p>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.</p> <p>The Person taken into custody . . .</p> <p><input checked="" type="checkbox"/> committed the below acts in my presence.</p> <p><input type="checkbox"/> confessed to _____ admitting to the below facts.</p> <p><input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person committ the below acts.</p> <p><input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the <u>24</u> day of <u>February</u> <u>2017</u> at <u>03:29</u> (Specifically include facts constituting cause for arrest.)</p>									
<p>On 2/24/2017 at approximately 0414 hours, I was at 6000 W Glades Rd (Blue Martini) conducting a battery investigation with Ofc. Fong. We were right outside the entrance of the business. An intoxicated male, later identified as Cody Kuenzler, was hanging out in the immediate area and he became a distraction when he kept adding his input and trying to talk directly to the female Ofc. Fong and I had detained in handcuffs. I repeatedly told Kuenzler to back up and stop interfering with our investigation. Kuenzler refused to back up and he continued to be a distraction. I again explained to Kuenzler that he needed to leave the immediate area or he would be issued a Trespass Warning from the Blue Martini property. Kuenzler became confrontational and he refused to leave the property. At that time, I issued Kuenzler a Trespass Warning (TA sign #1719) and again told him to leave. Kuenzler still refused to walk away. I then placed Kuenzler under arrest for Trespassing. He was placed in handcuffs and transported to the BRPD booking facility for processing. He was later transported to the Palm Beach County Jail for final disposition due to intoxication.</p>									
<p>NOTARIZED</p>									
A D M I N I S T R A T I V E	SWORN AND SUBSCRIBED BEFORE ME DUBINSKY, SETH W  NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)				SIGNATURE OF ARRESTING / INVESTIGATING OFFICER				
	<u>02/24/2017</u> DATE				DESIR, JESSICA M (736) NAME OF OFFICER (PLEASE PRINT)				
				<u>02/24/2017</u> DATE					
	<p>PAGE 1 OF 1</p>								

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P.I.O.

SCANNED
FEB 27 2017