

ARREST / NOTICE TO APPEAR		1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE	N
OBTS Number		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: <input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 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	Jail Time	Location of Vehicle N/A		
Name (Last, First, Middle) KUENZLER, CODY M		Alias:		Alias (Name, DOB, Soc. Sec. #, Etc.)				
Race W - White B - Black O - Oriental/Asian W	Sex M	Date of Birth 02/05/1996	Height 5'10	Weight 150	Eye Color BROWN	Hair Color BROWN	Complexion LIGHT	Build Small
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TATT L WRIST / "V"		Marital Status S		Religion UNKNOWN		Indication of: Alcohol Influence <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk. <input type="checkbox"/> Drug Influence <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk. <input type="checkbox"/>		
Local Address (Street, Apt. Number) 3601 N MILITARY TRL, BOCA RATON, FL 33431		(City) BOCA RATON		(State) FL		(Zip) 33431		Phone (978) 935-6354
Permanent Address (Street, Apt. Number) 3601 N MILITARY TRL, BOCA RATON, FL 33431		(City) BOCA RATON		(State) FL		(Zip) 33431		Address Source DEFENDANT
Business Address (Name, Street) LYNN UNIVERSITY,		(City) BOCA RATON		(State) FL		(Zip) 33431		Occupation Student
D/L Number, State S58927714 / MA		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		
Parent <input type="checkbox"/> Other: _____		Name (Last, First, Middle)		Residence Phone				
Legal Custodian <input type="checkbox"/>		Address (Street, Apt. Number)		(City)		(State)		(Zip)
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.		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
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 Description TRESPASS - STRUCTURE OR CONVEYANCE.		Statute Violation Number 810.08(2)(b)		Violation of ORD #				
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				
Charge Description		Statute Violation Number		Violation of ORD #				
Drug Activity		Drug Type		Amount / Unit		Offense #		Counts
Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Warrant / Capias Number		Bond				
Charge Description		Statute Violation Number		Violation of ORD #				
Drug Activity		Drug Type		Amount / Unit		Offense #		Counts
Domestic Violence <input type="checkbox"/> Y <input type="checkbox"/> N		Warrant / Capias Number		Bond				
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:				
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		PROPERTY - Received By J. DESIR		Released By		Released To		
Transported By		Date Transported		Time Transported		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 MARCH 23rd 2017 0830 AM				
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				
HOLD for Other Agency		Signature of Arresting Officer J. DESIR		Name Verification (Printed by Arrestee) FEB 24 AM 7:43				
<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other		Name of Arresting Officer (Print) DESIR, JESSICA M.		ID # 736		PAGE 2		
Pouch #		Transporting Officer J. CHRISWISSE		ID # 788		Agency BEA		
Witness here if subject signed with arrest		SCANNED						

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A D M I N I S T R A T I V E	OBTS Number		PROBABLE CAUSE AFFIDAVIT				1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		1	JUVENILE
	Agency ORI Number FL 0500200		Agency Name BOCA RATON POLICE DEPARTMENT				Agency Report Number 3 2 2017-002867					
	Charge Type: Check as many as apply.		<input type="checkbox"/> 1. Felony <input type="checkbox"/> 2. Traffic Felony		<input checked="" 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 E N D A N T	Name (Last, First, Middle) KUENZLER, CODY M								Race W		Sex M	Date of Birth 02/05/1996
	Charge Description 810.08(1) TRESPASS - STRUCTURE OR CONVEYANCE .				Charge Description							
	Charge Description				Charge Description							
V I C T I M	Victim's Name (Last, First, Middle) BLUE MARTINI BAR,								Race		Sex	Date of Birth
	Local Address (Street, Apt. Number) 6000 W GLADES RD, BOCA RATON, FL 33431				(City)		(State)		(Zip)		Phone (561) 910-2583	
	Business Address (Name, Street) 6000 W GLADES RD, 6000 W GLADES RD				(City)		(State)		(Zip)		Address Source (561) 910-2583	
P R O B A B L E	<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 checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation.</p> <p>On the 24 day of February, 2017 at 03:29 (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>											
S T A T E M E N T	<p>SWORN AND SUBSCRIBED BEFORE ME</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>DUBINSKY, SETH W </p> <p>NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S.S. 117.10)</p> <p>02/24/2017</p> <p>DATE</p> </div> <div style="width: 45%;"> <p></p> <p>SIGNATURE OF ARRESTING / INVESTIGATING OFFICER</p> <p>DESIR, JESSICA M (736)</p> <p>NAME OF OFFICER (PLEASE PRINT)</p> <p>02/24/2017</p> <p>DATE</p> </div> </div>											
	<div style="display: flex; justify-content: flex-end;"> <div style="border: 1px solid black; padding: 2px; text-align: center;"> PAGE 1 OF 1 </div> </div>											

COURT

STATE ATTORNEY

CENTRAL RECORDS

JAIL

CRIME ANALYSIS

P. I. O.

SCANNED

FEB 27 2017