05046657

ARREST / NOTICE TO APPEAR

ADMINISTRATION

OBTS Number

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

JUVENILE

Agency ORI Number	Agency Name	Agency Report Number (N.T.A.'s only)
0501600	Juno Beach Police Dept	19-000036

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

If Weapon Seized, Enter Type: NONE

Multiple Clearance Indicator

Location of Arrest (Including Name of Business)	Location of Offense (Business Name, Address)
1111 OCEAN DRIVE	1111 OCEAN DRIVE, JUNO BEACH, FL 33408

Date of Arrest	Time of Arrest	Booking Date	Booking Time	Jail Date	Jail Time	Location of Vehicle
01/18/2019	10:58					

DEFENDANT

Name (Last, First, Middle): MESHCHANINOV, MENDEL M

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

Race (W - White, B - Black, I - American Indian, O - Oriental/Asian)	Sex	Date of Birth	Height	Weight	Eye Color	Hair Color	Complexion	Build
W	M	04/14/1996	5'10	150	BROW	BROWN	FAIR	M

Scars, Marks, Tatoos, Unique Physical Features (Location, Type, Description) | Marital Status | Religion | Indication of: Alcohol Influence ☐ Yes ☐ No ☒ Unk. ☐ Drug Influence

Local Address (Street, Apt. Number) | (City) | (State) | (Zip) | Phone | Residence Type: 1. City 2. County 3. Florida 4. Out of State: 4

1 W FESSLER DR, MONSEY, NY 10952

Permanent Address (Street, Apt. Number) | (City) | (State) | (Zip) | Phone | Address Source

1 W FESSLER DR, MONSEY, NY 10952 | DRIVER LICENSE

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

D/L Number, State	Soc. Sec. Number	INS Number	Place of Birth (City, State)	Citizenship
921739320 / NY			PEAKSKILL, NY	US

CO-DEF

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

JUVENILE

☐ Parent ☐ Other: ☐ Legal Custodian | 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 Department and Released 2. TOT JAC 3. Incarcerated

Released To: (Name) | Relationship | Date | Time

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, X. 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 #
LEWD - EXPOSURE OF SEXUAL ORGANS	800.03	

Drug Activity	Drug Type	Amount / Unit	Offense #	Counts	Domestic Violence	Warrant / Capias Number	Bond
	N	/		1	☐ Y ☒ N		OR

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		

CHANGE

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

Transported By | Date Transported | Time Transported | Other

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): North County JUNO

Court Date and Time: 02/20/2019 10:00:00

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

SHARON R. BOCK, CLERK PALM BEACH COUNTY, FL BY GUN CLUB BRANCH

2019 JAN 19 AM 7:54

No Photo Available

ADMIN

HOLD for Other Agency

☐ Dangerous ☐ Resisted Arrest ☐ Suicidal ☐ Other

Intake Deputy: D/S Welch 6015 | I.D. #: | Print: BCCO

[redacted]

Name Verification (Printed by Arrestee) (PRINT)

Witness here if subject signed with an "X".

PAGE 1 OF 1

SCANNED JAN 22 2019

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

NOT A CERTIFIED COPY

PROBABLE CAUSE AFFIDAVIT

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

1 JUVENILE ☑

ADMIN

OBTS Number

Agency ORI Number: FL 0501600

Agency Name: JUNO BEACH POLICE DEPT

Agency Report Number: 19-000036

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
MESHCHANINOV, MENDEL M		W	M	04/14/1996

CHARGES

Charge Description	Charge Description
800.03 LEWD - EXPOSURE OF SEXUAL ORGANS	
Charge Description	Charge Description

VICTIM

Victim's Name (Last, First, Middle)	Race	Sex	Date of Birth
SOCIETY			

Local Address (Street, Apt. Number) (City) (State) (Zip)	Phone	Address Source
Business Address (Name, Street) (City) (State) (Zip)	**Phone**	**Occupation**

PROBABLE CAUSE STATEMENT

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 _____ 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 18 day of January, 2019 at 10:20 (Specifically include facts constituting cause for arrest.)

On Friday, January 18, 2019 at approximately 10:15 a.m. I was dispatched to the beach at 1111 Ocean Drive, Juno Beach, FL (Palm Beach County) reference a naked male on the beach. The male was described as a white male approximately 6` tall with brown hair. The 911 call was placed by a Palm Beach County Lifeguard.
Upon my arrival at this location I was directed by three citizens to the location of the naked male. I did personally observe a male fitting that description standing on the beach completely naked, with his sexual organs completely exposed. This is a public beach and there were six (6) people in the immediate area. The male provided me with a New York State driver license (921739320) identifying himself as Mendel M Meshchaninov, from Monsey NY.
I find that there is probable cause to arrest the defendant for Indecent Exposure, as I personally observed him be naked in a public place, contrary to Florida Statute 800.03 (1 DEG MISD).

NOT A CERTIFIED COPY

ADMINISTRATIVE

SWORN AND SUBSCRIBED BEFORE ME

LUSCAVICH, ANDREW
NOTARY PUBLIC / CLERK OF COURT / OFFICER (F.S. 117.10)

01/18/2019
DATE

[redacted]
NAME OF OFFICER (PLEASE PRINT)

01/18/2019
DATE

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