0573506 19CT236084NS 1203

TEQUESTA POLICE DEPARTMENT
357 TEQUESTA DR. TEQUESTA FL, 33469

REPORT NUMBER
TPD92ARR901052

ARREST REPORT

Report Date / Time	Agency Case/Offense Number	OCA / Agency ID	OBTS Number (Offender Based Transaction System)	Jail Booking Number	Other Number
12/22/2019 03:02 PM	TPD19OFF000397				TPD19CAD011879

LOCATION OF OCCURRENCE

County	Address		
PALM BEACH	1500 N US HIGHWAY 1 , TEQUESTA, FL 33469		
Range of Occurrence Date/Time		Latitude	Longitude
12/22/2019 11:22 AM to 12/22/2019 11:22 AM		N 26.96821885	W 80.08666797

PERSON: SUSPECT

First Name	Middle Name	Last Name	Suffix	Date of Birth	Age	Race	Sex	Height	Weight	Hair	Eyes
MICHAEL	RYAN	ANNIS		11/10/1995	24	W	M	600	61	BRO	BLU

Master Name Index Number	Place of Birth	Nation	SSN	Driver's License or Other ID	State	Class or Type
	WEST PALM BEACH FL		[redacted]	A520556954100	FL	E

Address	City	County	State	Zip Code	Phone
2555 PGA BLVD LOT 87	PALM BEACH GARDENS		FL	33410	

CHARGES

Counts	Charge Number	Charge
1	316.193.1	TRAFFIC OFFENSE

Charge Degree	Charge Level	General Offense Code	Hate Crime	Domestic Violence	Bond Amount
	MISDEMEANOR	PRINCIPAL	☐	☐	

DUI ALCOHOL OR DRUGS

PROBABLE CAUSE

SEE DUI PC

PERSON: OTHER SUSPECT

First Name	Middle Name	Last Name	Suffix	Date of Birth	Age	Race	Sex	Height	Weight	Hair	Eyes
BAILEY	EVAN	DANIELS		07/02/1998	21	W	M	511	511	BRO	BLU

Master Name Index Number	Place of Birth	Nation	SSN	Driver's License or Other ID	State	Class or Type
	WEST PALM BEACH FL		[redacted]	D542065982420	FL	E

Address	City	County	State	Zip Code	Phone
225 SW OTTER RUN PL	STUART		FL	34997	

LEO BOND

Bond Amount $ _____ ☐

COURT APPEARANCE INFORMATION

Court	Court Phone	Court Date & Time
(CIRCUIT) NORTH COUNTY COURTHOUSE	(561) 624-6650	01/15/2020 10:30 AM

Court Address: 3188 PGA BLVD, PALM BEACH GARDENS, FL 33410

Instructions:

ARREST INFORMATION

Arrest Date / Time	Residency	Injured	Extent of Injury	Resist Arrest
12/22/2019 12:01 PM	Within state	None		

Prior Arrests	Arrest Jurisdiction	Alcohol	Drugs
No	Within Jurisdiction	Yes	No

ARREST LOCATION

County	Address
PALM BEACH	42 BEACH ROAD , TEQUESTA VILLAGE, FL 33469

ARREST DELIVERED TO

Jail / Booking Facility	Location	Phone
PALM BEACH COUNTY CORRECTIONS	3228 GUN CLUB ROAD, WEST PALM BEACH, FLORIDA 33406	(561) 688-4556

ARRESTING OFFICER

Officer Call Number	Officer Name	Officer Signature
1218	R.COOK	

Subscribed and sworn to (or affirmed) before me this 22 day of December A.D., _____ by _____ who is __ personally known to me or has produced _____ as identification.

_____ __Notary Public __LEO __CO Commission No: _____ My Commission Expires: _____
Signature

Notary Public State of Florida
Paris Pound
My Commission GG 200028
Expires 03/25/2022

D.U.I. PROBABLE CAUSE AFFIDAVIT

ON THE 22nd DAY OF December 20 19, AT 1151 ✓ AM PM

SUBJECT: MICHAEL RYAN ANNIS CASE NUMBER: TPD19OFF000397

AGENCY: TEQUESTA POLICE ARRESTING OFFICER: R. COOK 1218

PERSONAL CONTACT

DRIVING PATTERN: ACTUAL PHYSICAL CONTROL (PHYSICAL EVIDENCE OR STATEMENTS PUTTING DEF. BEHIND WHEEL OF VEHICLE)

Annis was traveling west in the 300 block of Beach Road in the Village of Tequesta at 44 mph in excess of the clearly posted 35 mph speed zone. I activated the emergency lights and siren on the clearly marked patrol unit I was driving to initiate a traffic stop. Annis continued traveling without slowing passing an abundant amount of clear safe places to stop. Annis continued through the intersection of Beach Rd and US Highway 1 where he came to stop just west of the intersection.

OBSERVATION OF DRIVER:

While speaking with Annis I observed his eyes were blood shot and glassy, he speech was slurred and his verbal responses were delayed. The smell of an unknown alcoholic beverage emitted from his person. I asked Annis we he did not stop immediately and he responded he was looking for a place to safely stop, then stated he was unaware I was behind his vehicle with my emergency equipment activated. I required Annis to exit his vehicle and he again looked at me as if he was confused; a few moments after Annis exited walking to my patrol vehicle.

DRIVER'S STATEMENTS:

Annis stated he had been drinking "beer" at the beach and was now trying to get home.

ODORS:

Annis had an odor of an unknown alcoholic beverage emitting from his breath.

GENERAL OBSERVATIONS

SPEECH: **Slurred, Slow**

ATTITUDE: **Confused, indifferent, cooperative**

CLOTHING: **Blue long sleeve shirt, blue jeans, no shoes**

MEDICAL/OTHER: **None**

STATE OF FLORIDA
COUNTY OF PALM BEACH

R. COOK 1218
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 22nd day of December 20 19 by R. COOK 1218

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification. Type of identification produced LEO

Notary Public, Clerk of Court, Officer (F.S.S. 117.10)

Notary Public State of Florida
Paris Pound
My Commission GG 200025
Expires 03/25/2022

SUBJECT: Michael Ryan Annis **CASE NUMBER** TPD19OFF000397

ROADSIDE TASKS

HORIZONTAL GAZE NYSTAGMUS:

- [x] LT EYE-LACK OF SMOOTH PURSUIT
- [x] RT EYE-LACK OF SMOOTH PURSUIT
- [x] LT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- [x] RT EYE-DISTINCT & SUSTAINED NYSTAGMUS AT MAX. DEVIATION
- [x] LT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES
- [x] RT- EYE-ONSET OF NYSTAGMUS PRIOR TO 45 DEGREES

Other Observations:

Annis was given directions several times, Annis refused to keep his head still while I administered the test. Two times; Annis moved only his head and not his eyes following being directed to follow my finger with his eyes and eyes only.

WALK & TURN:

Annis was required to stand heal to toe on a white painted line as I gave him further instruction. While giving instruction Annis stumbled while swaying, loosing his balance. After being instructed to take nine heal to two steps away and nine heal to two steps back he began without being instructed to do so. Annis completed nine step away without ever walking heal to two as instructed. Annis walked twelve steps back without ever touching heal to tow. Annis also used his harms for balance after being instructed to keep his hands to his side.

ONE LEG STAND:

Annis was instructed to stand with his feet together and arms to his side as I gave instructions for the One Leg Stand. Annis could not stand still, swaying multiple times. Annis stated he could complete the one leg stance claiming he has suffered from knee pain in the past yet it would not affect is ability to do what was instructed. Annis was instructed to use which ever leg he so chooses and instructed to begin. During the course of thirty seconds Annis used his arms for balance, placed his foot on the ground several times and stumbled to the point I was concerned he would fall.

FINGER TO NOSE:

After given instruction; Annis leaned his head back opening his eyes several times during the test. Annis was instructed to keep his eyes closed yet he did not follow said instruction. Annis was instructed to touch the tip of his nose with the tip of his index fingers. Annis touched his upper lip, side nostril and cheek.

ROMBERG ALPHABET:

Not Administered

BREATH TEST RESULTS: .197 .188

STATE OF FLORIDA
COUNTY OF PALM BEACH

R. COOK 1218
(Signature of Arresting/Investigative Officer)

The foregoing instrument was sworn to or affirmed and subscribed before me this 22nd day of December 20 19 by R. COOK 1218

(Print name of Arresting/Investigative Officer), who is personally known to me and/or produced identification Type of identification produced LEO

Notary Public, Clerk of Court, Officer (F.S.S. 117.10)

Notary Public State of Florida
Paris Pound
My Commission GG 200028
Expires 03/25/2022

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FLORIDA DEPARTMENT OF LAW ENFORCEMENT
ALCOHOL TESTING PROGRAM
BREATH ALCOHOL TEST AFFIDAVIT

Instrument Type: Intoxilyzer 8000
Instrument Registered To: PALM BEACH CO SO
Instrument Serial Number: 80-006029 Software: 8100.27
Date of Test: 12/22/2019

Date of Last Agency Inspection: 12/06/2019
Observation Period Began: 12:45
Subject's Name: MICHAEL R ANNIS DOB: 11/10/1995 Sex: M

The subject was observed for at least twenty-minutes prior to the administration of the breath test to ensure that the subject did not take anything orally and did not regurgitate.

Results:

Test	g/210L	Time
Diagnostics Check	OK	13:14
Air Blank	0.000	13:14
Control Test	0.082	13:15
Air Blank	0.000	13:15
Subject Sample #1	0.197	13:16
Air Blank	0.000	13:16
Air Blank	0.000	13:18
Subject Sample #2	0.188	13:19
Air Blank	0.000	13:19
Control Test	0.080	13:20
Air Blank	0.000	13:20
Diagnostics Check	OK	13:20

Cylinder Lot: 17919080A1
Exp: 08/05/2021

State of Florida, County of PALM BEACH,

Personally appeared before me the undersigned authority, who (✓) is personally known to me or (__) produced _____ as identification, and who after being placed under oath states:

I PARIS D POUND, hold a valid Breath Test Operator permit issued by the Florida Department of Law Enforcement, I administered the above breath test to the subject named above in accordance with Chapter 11D-8, Florida Administrative Code, and this form is a true and accurate report of that breath test.

Breath Test Operator: _____ Date: 12/22/19
Signature

Sworn to (or affirmed) before me this 22nd day of December, 2019

_____ OFC. R. COOK
Signature of Notary Public-State of Florida Printed Name of Notary Public-State of Florida

Note: Pursuant to section 117.10, Florida Statutes, law enforcement officers, correctional officers, traffic accident investigation officers and traffic infraction enforcement officers are notaries public when engaged in the performance of official duties. In accordance with section 316.1934(5), F.S., this completed form is admissible without further authentication and is presumptive proof of the results herein. To be used in accordance with Section 316.1934(5), F.S., and in administrative proceedings pursuant to 322.[illegible], F.S.

FDLE/ATP FORM 38 - MARCH 2004, Ref. 11D-8.007

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TESTING FACILITY TASK REPORT

AGENCY: TPD

SUBJECT: ANNIS, MICHAEL R CASE NUMBER: 19-151360

DATE: 12/22/19 VIDEO TAPE NUMBER: N/A

BEGINNING TIME: 13:11 ENDING TIME: 13:29

BREATH TESTS RESULTS: 1) .197 TIME 13:16 A.M./(P.M.) 2) .188 TIME 13:19 A.M./(P.M.)

3) N/A TIME — A.M./P.M. 4) N/A TIME — A.M./P.M.

BREATH OPERATOR: P. POUND # 24639

MAINTENANCE TECHNICIAN: J. KARLECKE # 6467

TESTING OFFICER'S OBSERVATIONS

SPEECH: SLURRED

ATTITUDE: TALKATIVE, CALM

CLOTHING: BLUE JEANS, GRAY JACKETS, NO SHOES

MEDICAL CONDITIONS: NONE

MEDICATIONS: NONE

OTHER: EYES GLASSY + BLOODSHOT

COMMENTS: ARRIVED AT CENTER A/O BEGAN THE 20 MINUTE OBSERVATION PERIOD AT 12:45 HRS.

A. STATED YES HE WOULD TAKE TEST.

A/O. READ RIGHTS

A. STATED HE UNDERSTOOD RIGHTS

TECH. READ TEST RESULTS.

A. STATED HE UNDERSTOOD TEST RESULTS

A/O. CONDUCTED QIA

A. ANSWERS QUESTIONS.

WHITE - STATE ATTY. YELLOW - DHSMV PINK - CENTRAL RECORDS GOLD - JAIL

PBSO #0129A REV.11/02

PALM BEACH COUNTY SHERIFF'S OFFICE
DUI TESTING FACILITY
INFORMATION SHEET

PBSO CASE # 19-151360 PBSO ZONE 3-11

AGENCY CASE # TP019OFF000397 CRASH CASE #

TIME OF STOP/CRASH 1122 hrs DATE 12/22/19 DAY Sunday

SUBJECT'S NAME Annis, Michael RACE W SEX M

HGT 6'' WGT 180 DOB 11/10/1995

LOCATION 42 Beach Road Tequesta FL 33469

ARRESTING OFFICER'S NAME & ID R. Cook 1218 AGENCY Tequesta Police

DIVISION: Patrol

NOTIFIED BY COMMO Y

ARRIVAL AT FACILITY 1245 hrs

BREATH RESULTS: Arrest Time 1151 hrs

1. .197
2. .188
3. N/A
4. N/A

TESTING OFFICER'S ID 24639 PBSO VIDEOTAPE # N/A

WITNESS LIST

CASE NUMBER: TPD19OFF000397

ARRESTING OFFICER: R. COOK 1218

ADDRESS: 357 Tequesta Drive Tequesta, FL 33469

PHONE NUMBERS (HOME): ______ (WORK) 561-768-0500

CAN TESTIFY TO: SFST's, PC,Transport, BAT

NAME: Sgt. E. Yildiz

ADDRESS: 357 Tequesta Drive Tequesta, FL 33469

PHONE NUMBERS (HOME) ______ (WORK) 561-768-0500

CAN TESTIFY TO: Suspect behviors and observations

NAME: ______

ADDRESS ______

PHONE NUMBERS (HOME) ______ (WORK) ______

CAN TESTIFY TO: ______

NAME: ______

ADDRESS ______

PHONE NUMBERS (HOME) ______ (WORK) ______

CAN TESTIFY TO: ______

NAME: ______

ADDRESS ______

PHONE NUMBERS (HOME) ______ (WORK) ______

CAN TESTIFY TO: ______

NAME: ______

ADDRESS ______

PHONE NUMBERS (HOME) ______ (WORK) ______

CAN TESTIFY TO: ______

NAME: ______

ADDRESS ______

PHONE NUMBERS (HOME) ______ (WORK) ______

CAN TESTIFY TO: ______

NAME: ______

ADDRESS ______

PHONE NUMBERS (HOME) ______ (WORK) ______

CAN TESTIFY TO: ______

NAME: ______

ADDRESS ______

PHONE NUMBERS (HOME) ______ (WORK) ______

CAN TESTIFY TO: ______

NAME: ______

ADDRESS ______

PHONE NUMBERS (HOME) ______ (WORK) ______

CAN TESTIFY TO: ______

NAME: ______

ADDRESS ______

PHONE NUMBERS (HOME) ______ (WORK) ______

CAN TESTIFY TO: ______

SUBJECT: ANNIS, MICHAEL R CASE NUMBER: _____

QUESTIONS AND ANSWERS

I AM NOW GOING TO ASK YOU SOME QUESTIONS. WITH THESE RIGHTS IN MIND, YOU MAY ANSWER SOME OF, ALL OF, OR NONE OF THE FOLLOWING QUESTIONS AS YOU LIKE.

WERE YOU OPERATING A MOTOR VEHICLE AT THE TIME OF THE STOP/ACCIDENT? _____

WHERE WERE YOU GOING? Home

WHAT STREET OR HIGHWAY WERE YOU ON? _____

DIRECTION OF TRAVEL? _____ WHERE DID YOU START? _____

WHAT TIME DID YOU START? _____ WHAT TIME IS IT NOW? _____

WHAT IS TODAY'S DATE? Saturday WHAT DAY OF THE WEEK IS IT? _____

WHAT COUNTY AND CITY ARE YOU IN NOW? No

WHEN DID YOU LAST EAT? Hours Ago WHAT DID YOU EAT? Steak Shrimp Potat.

WHAT HAVE YOU BEEN DOING FOR THE LAST THREE HOURS? _____

HOW MUCH DO YOU WEIGH? 180/185 HAVE YOU BEEN DRINKING? _____ WHAT? _____

HOW MUCH? _____ WHERE? _____ WITH WHOM? _____

WHEN DID YOU HAVE YOUR FIRST DRINK? _____ AND YOUR LAST DRINK? _____

HOW DID YOU CONSUME YOUR LAST TWO DRINKS? _____

CAN YOU FEEL THE EFFECTS OF THE ALCOHOL? No ARE YOU UNDER THE INFLUENCE? _____

HAVE YOU CONSUMED ANY ALCOHOL SINCE THE ACCIDENT? _____ HOW MUCH? _____

WHAT? _____ WHERE? _____ WHEN? _____

WHAT LINE OF WORK ARE YOU IN? A/C WHEN DID YOU LAST WORK? Friday

DO YOU HAVE ANY PHYSICAL DEFECTS OR INJURIES? No WHAT? _____

ARE YOU SICK OR INJURED? Sick WHAT'S WRONG? Ear Ringing

DO YOU LIMP? Some times DID YOU RECEIVE A BUMP ON THE HEAD RECENTLY? Last Week

WERE YOU IN AN ACCIDENT TODAY? No

HAVE YOU TAKEN ANY DRUGS OR SMOKED ANY MARIJUANA TODAY? No WHEN? _____

HAVE YOU SEEN A DOCTOR OR DENTIST TODAY? No WHO? _____ WHY? _____

ARE YOU TAKING ANY PRESCRIPTION MEDICINES? No WHAT? _____ WHEN? _____

DO YOU HAVE:

EPILEPSY?	No
GLASS EYE?	No
FALSE TEETH?	No
EAR INFECTION?	No
INNER EAR TROUBLE?	Yes
DIABETES?	No

DO YOU HAVE ANY PROBLEMS WITH YOUR EYES THAT ARE NOT CORRECTED BY GLASSES? No

DO YOU TAKE INSULIN? No IF SO, WHEN WAS YOUR LAST INJECTION? _____

HAVE YOU EVER HAD A DRIVER'S LICENSE IN ANY OTHER STATE? No WHERE? DEC 23 2019

INTERVIEWER: R. Cook 1219

SUBJECT: ANNIS, MICHAEL R CASE NUMBER: _____

IMPLIED CONSENT FOR DUI IN A MOTOR VEHICLE

NOTE: READ ONLY THE PARAGRAPH APPLICABLE TO THE TYPE OF TEST YOU ARE REQUESTING.

I am now requesting that you submit to a lawful test of your BREATH for the purpose of determining its alcohol content.

-OR-

I am now requesting that you submit to a lawful test of your URINE for the purpose of detecting the presence of chemical or controlled substances.

-OR-

I am now requesting that you submit to a lawful test of your BLOOD for the purpose of detecting its alcohol content and the presence of chemical or controlled substances.

NOTE: READ ONLY IF THE SUBJECT DOES NOT COMPLY WITH YOUR REQUEST.

I am _____ of the _____.

If you fail to submit to the test I have requested of you, your privilege to operate a motor vehicle will be suspended for a period of one (1) year for a first refusal, or eighteen (18) months if your privilege has been previously suspended as a result of a refusal to submit to a lawful test of your breath, urine or blood. Additionally, if you refuse to submit to the test I have requested of you and if your driving privilege has been previously suspended for a prior refusal to submit to a lawful test of your breath, urine or blood, you will be committing a misdemeanor. Refusal to submit to the test I have requested of you is admissible into evidence in any criminal proceeding.

SUBJECT'S SIGNATURE: (X)_____

CONSTITUTIONAL WARNINGS

I AM REQUIRED TO WARN YOU BEFORE YOU MAKE ANY STATEMENTS THAT YOU HAVE THE FOLLOWING RIGHTS:

1. You have the right to remain silent and not answer any questions.
2. Any statement must be freely and voluntarily given.
3. You have the right to the presence of a lawyer of your choice before you make any statement and during any questioning.
4. If you cannot afford a lawyer, you are entitled to the presence of a court appointed lawyer before you make any statements and during any questioning.
5. If at any time during the interview you do not wish to answer any questions, you are privileged to remain silent.
6. I can make no threats or promises to induce you to make a statement. This must be of your own free will.
7. Any statement can and will be used against you in a court of law.

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SUSPECT'S SIGNATURE: (X) READ ON CAMERA

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	☐	119.071(2)(d)	Surveillance techniques, procedures and personnel; inventory of law enforcement resources, policies or plans pertaining to mobilization deployment or tactical operations.	
	☐	943.053, 943.0525	NCIC/FCIC/FBI and in-state FDLE/DOC.	
	☐	119.071(4)(c)	Undercover personnel.	
	☐	119.071(2)(f)	Confidential informants (CIs).	
	☐	119.071(2)(e)	Confession.	
Public Info. Exemptions	☐	985.04(1)	Juvenile offender records.	
	☐	119.071(h)(i)	Assets of a crime victim.	
	☐	395.3025(7)(a), 456.057(7)(a)	Medical information.	
	☐	394.4615(7)	Mental health information.	
	☐	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)	☒	(iii) 119.0714(1)(i)-(j), (2)(a)-(e)	Social Security, bank account, charge, debit, and credit card numbers.	2
	☐	(viii) 394.4615(7)	Clinical records under the Baker Act.	
	☐	(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	☐		Other:	
	☐		Other:	

REVIEW COMPLETED BY

Booking Number: 2019040742	**Date:** 12/23/2019
	Specialist Name/ID: AM/31562

DEC 23 2019