UCN: 522023CF002557XXXXCF

FL0520000

COMPLAINT/ARREST A					KI -	- 1				OKIDA	<u> </u>
OBTS#	REP	ORT # SO	23-823	66			DOCK	ет# 192	24180		ļ
Person ID 311678534			SSN#								
Charge Description X Felony Misdemean	r Warrant Traffic	Ordinance	Traffic	Citati	on # (if an	y)		Cour	t Case #		,
Charge BATTERY ON A PERSON 65 YEA	RS OF AGE OR (	OLDER						23-0	2557-C	F-1	
Defendant's Name (Last, First, Middle)		DOB		Se		- 1	í	Wt	Hair	Eyes	Skin
EDWARDS, ROSA ELAINE		05/27	7/1999	F		54		135	BLK	BRO	
Alias	DL#		State FL	Scars	/Marks/Ta		<u> </u>				
Local Address (Street, City, State, Zip Code)				Teleph	ione	_	lace of I FL	Birth .	Citizensh USA	ip	
Permanent Address (Street, City, State, Zip C	ode)			Telepl	none	E	mploye	d by / School	l .		
Weapon Seized Type		Indication			Indication				ndication of		UNK
☐Yes ☑No		Drug Influ	ence 🔲 🗶	_	Health Iss DOB	ues	Sex	Race	Icohol Influe		
Co-Defendant's Name (Last, First, Middle)									In Custody		
HALL, ANIESHA					12/19/2	2003	F	В	□Felony [		
Co-Defendant's Name (Last, First, Middle)					DOB		Sex	Race	In Custody	_	
									Felony [	_Misdem	eanor
The undersigned swears that he/she has reaso	nable grounds to believe	that the above	named defend	ant on	the 12	day of	,	MARCH	202	23	
i ne undersigned swears that ne/sne has reaso			. Maineu Uelenu	ant UII		any UI			,		
at approximately 10:15 PM	, at7179 40TH AV	E N			*			,i	n Pinellas Co	unty did:	
DID ACTUALLY AND INTENTI	ONALLY TOUCH	OR STR	IKE, AGAI	NST	THE V	VILL	OF W	VILLIE W	/ILLIAMS	, A	
PERSON 65 YEARS OF AGE			,								
	a	<b>555</b>			- ADO		004	TION M	IA OFÓLI	DITY	
THE DEFENDANT IS A CARE	GIVER AT INSPI	KED LIVII	NG ALF A		IE ABO	OE T	UE V	ITION. VI	ADM IN	KIIT A	
FOOTAGE, YOUR AFFIANT ( FORCEFUL MANNER WHILE	DROEKAED LUE		ANI GRA	8 C/	UOFD.	OF I	: //IC.	TIM TO I	FALL TO	THE	
GROUND. THE VICTIM WAS				THE	D DAT	IENT	INIM	HICH T	HE OTH	R PAI	IENT
WAS SITTING IN DURING TH	IS ALTERCATION	N WHEN	THE VICT	TIM F	FILT	O TH	IF GE	ROUND	THE OT	HER	
PATIENT FELL FROM HER W	UEEL CHAID TH	IN. WITEIN	AND THE	TOT	HER P	ATIF	NTF	FILINA	FORCE	FUI	
MANNER. THE DEFENDANT	THEN BACKED	AWAY AN		TAS	SSIST	THE V	VICT	M OFF	THE GRO	DUND.	THE
VICTIM WAS 65 YEARS OR C	I DER AT THE T	IME OF T	HE INCID	FNT	WITH	A BIF	RTHE	AY OF	08/21/19	48.	
VICTIM WAS US LEARS OR C	EDENTI IIIE I										
70/	08(2)(C) - F3										
Contrary to Florida Statute/Ordinance 784											
ARREST DATE: 3/14/2023Time	3:22 PM	Aggra	vating/Mitigati	ing Fac	ctors						·
Booking Officer: GRIEVES, A 57622	Amou	int of Bond	2,500		Bond Out	Date_	B .	3/15	Гіте	a.m	. □p.m.
Victim Notified of Advisory?Yes	No Injur	ies to Victim?	Yes ]	No		Med	lical Tro	eatment to V	ictim?	Yes 🗆 N	o
The Court reviewed this complaint and finds	there: 🔲 is probable cau	ıse ⊡is not pr	obable cause to	detair	ı defendar	ıt 🗌 Bo	nd Acti	on, if any:			—.
The probable cause determination is passed	or: □24 Hrs □24 Hrs o	on showing of e	xtraordinary o	ircum	stances	Receiv	red by Bo	ooking: 3/14/2	2023 9:59:52 P	M	
Pursuant to F.S. 92.525 and under penalty o read the foregoing document and that the fa	f perjury, I declare that l cts in it are true.	D	ATE O	FFICE	ER			IVE COSTS PAY RATE 29.14	S, F.S. 938.27 OR	(1) COS' \$174.84	r
De Bridt		-	3/14/2023 J.	BERRO	, n			29.14		ψ17-1.04 	
	PINELLAS COUNTY SHE	RIFF -		_							
Declarant Signature	Agency	-									
DEPUTY JOSHUA BERROTH 59804	311076545	0	THER – Descr	ibe							÷
Printed Name	Declarant ID#	c	ontinuation sh	eet 🖵	Yes		No	TO	TAL <u>\$ \$1</u>	74.84	

Defendant	EDWARDS,	<b>ROSA EI</b>	_AINE
Jerendant	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		

ourt	Case	No:	23-02557-C
		_	

## ADVISORY AND SOLVENCY HEARING

The above named Defendant came before me for Advisory and Solvency hearing and was advised by me of the charge(s) against him; his right to remain silent; that any statements by him may be used against him; his right to counsel, and, if he is financially unable to afford counsel, that counsel forthwith will be appointed; of his right to communicate with his counsel, family or friends, and that reasonable implementation will be afforded him to contact the foregoing.

A. Defendant has advised the Court that he has retained c	ounsel or will retain counsel.
B. The Court investigated Defendant's solvency and foun	d the Defendant financially able to secure counsel.
C. The Court investigated Defendant's solvency and prov	
D. The Defendant waived the right to counsel at the first a	
2. 110 2020101110 110 110 110 110 110 110	
DATE AND TIME	JUDGE
	•
I hereby waive the right to counsel at the first appearance	e only.
I having been found solvent and financially able to s	secure counsel, hereby waive counsel until my attorney fil
an appearance in this case or until I file a written reques	t for a review of my solvency and ability to secure counsel.
	• 10x & 10 × 10 · · · · · · · · · · · · · · · · · ·
	DEFENDANT'S SIGNATURE
	DEFENDANT'S SIGNATURE
	DEFENDANT'S SIGNATURE
Thumb Print	DEFENDANT'S SIGNATURE
Thumb Print	DEFENDANT'S SIGNATURE
•	
Thumb Print  HEREBY acknowledge receipt of a copy of the foregoing	
HEREBY acknowledge receipt of a copy of the foregoing	

COCR59 (Revised 02/2014)

UCN: 522023CF002557XXXXCF

FL0520000 COMPLAINT/ARREST AFFIDAVIT - CIRCUIT/COUNTY COURT - PINELLAS COUNTY EL ODIDA

OBTS#		REPO	ORT#SO	23-82						24180	OKIDA	<u> </u>
Person ID	311678534			SSN#				DOCE		24100		
Charge Desc	ription <b>X</b> Felony Misdemo	eanor Warrant Traffic	Ordinance	Traf	fic Cit	tation #	(if any)	<del></del>	Cox	urt Case #		
Charge BATTER	Y ON A PERSON 65 Y	EARS OF AGE OR O					(ii uiiy)					
Defendant	's Name (Last, First, Middle)		DOB			Sex	Race	Ht	23- Wt	-02557-C		Skin
<b>EDWAI</b>	RDS, ROSA ELAINI	E	05/27	/1999	İ	F	В	54	135	BLK	Eyes BRO	SKIII
Alias		DL # E363-725-99	_1	State	Sca	ars/Ma		os/Physical		DLIC	DINO	
Local Addi	ress (Street, City, State, Zip Co ST S ST. PETERSBURG I	de)		<u> </u>	Tele	ephone 27281	1756	Place of	Birth	Citizensl	tip	
Permanent	Address (Street, City, State, Zi	ip Code)			<del></del> -	ephone			d by / Scho	USA	-	
	ST S ST. PETERSBURG F	L 33712	Indication o	of Y N		7281			- 			
□Yes [	ZNo_		Drug Influe				th Issues	Mental Y		Indication of Alcohol Influe	nce 🔲 🛭	UNK
	ant's Name (Last, First, Middle	2)				DOB	3	Sex	Race	In Custody		
	ANIESHA					12/	19/20	03 F	В	Felony [		
Co-Defenda	ant's Name (Last, First, Middle	)	-			DOB		Sex	Race	In Custody	Yes	По
										☐Felony [	_	
The unders	igned swears that he/she has re	comple annual to bell and				+	12		MADOU	202		
The unders	igued swears that he/she has re	asonable grounds to believe in	at the above i	named defen	dant (	on the _	da	y of	MARCH		<u>.s</u>	
at approxin	nately 10:15 PM	, at 7179 40TH AVE	N							in Pinellas Co	unty did:	
DID AC	TUALLY AND INTEN	TIONALLY TOUCH (	OR STRIJ	KF AGA	INS	ТТН	IE W/II	LOFIN			-	
<b>YEARS</b>	OF AGE OR OLDER		J. ( J. ) ( )	L, / LO/	10			.L OI 10	A DLA	N, A FER	SON O	•
THE DE	TENDANT IC A CAD		· === • · · · · · · ·									
FOOTA	FENDANT IS A CAR	OBSERVED THE DI	ED LIVIN	G ALF A	TT	HE A	BOVE	LOCA	TION. V	IA SECUI	RITY	
FORCE	GE, YOUR AFFIANT FUL MANNER WHILI	F PULLING HIM TO	NADDO F	VIGRA	16 C	HULL	) OF /	ANO I HI	EK PAT	IENIS AI	KM IN A	١
GROUN	ID. THE PATIENT W	AS HOLDING THE V	ICTIM'S I	NHEFI (	CHA	JR W	HEN.	THE DA	TIENT	J FALL II	J IHE	
GROUN	ID, CAUSING THE VI	CTIM'S WHEELCHA	IR TO TI	POVER	AN	D TH	IF VIC	TIM FA		THE CDO	IND T	.ne
<b>VICTIM</b>	AND THE OTHER PA	ATIENT FELL IN A F	ORCEFU	i Overv IL	, , ,, ,	<i>-</i> 11	iL VIC	, 1 11A1 1 1-7	LL IO	ITIL GRO	ו . טויט.	
	R. THE DEFENDANT				T A	SSIS	T THE	E VICTII	M OR T	HE THER	PATIF	NT
OFF IH	E GROUND. THE											``'
VICTIM	WAS 65 YEARS OR	OLDER AT THE TIM	IE OF TH	E INCID	EN٦	ΓWI	ГНАЕ	BIRTHD	AY OF	02/07/193	5.	
Contrary to	Florida Statute/Ordinance 78	34.08(2)(C) - F3		<u>•</u>								
ARREST D	ATE: 3/14/2023 Time	e 8:22 PM		4 0000								
	<del></del>	· -	. Aggrava	ting/Mitigat	ing Fa	ictors_						<del></del>
Booking Off	icer: GRIEVES, A 57622	Amount o	of Bond	2,500		_Bond	Out Date	<u>SB 3</u>	<u>3/15</u> 1	Гіте	a.m.	<b>□р.т</b> .
Victim Notif	ied of Advisory?Yes	No Injuries t	to Victim?	_ Yes _ ]	No		M	edical Trea	tment to V	ictim? <b>\_</b> Y	es 🔲 No	.
The Court r	eviewed this complaint and find	ls there: □is probable cause [	]is not proba	ıble cause to	detai	n defen	dant 🔲	Bond Action	n, if any:			
	e cause determination is passed								-	023 10:00:00 P	<u> </u>	<del></del> .
Pursuant to	F.S. 92.525 and under penalty	of perjury, I declare that I hav	ve	F	EQU	EST F				, F.S. 938.27(1		
$\sim$	egoing document and that the i	facts in it are true.	DAT 03/1	<b>E O</b>	FFICE	ER		IOURS X P		OR	COST 5174.84	-
S	-Budt	DINELLAS COUNTY CONTRACTOR										- 1
Declarant S	Signature	PINELLAS COUNTY SHERIFF	- /	-						<del>-</del>		
·		Agency										
Printed Nan	OSHUA BERROTH 59804	311076545	-	ER – Descri							<del></del>	
TIMEG NAI	uc 	Declarant ID#	Cont	inuation she	et 🖳	Ye	s <u> </u>	□No	TO	TAL <u>\$</u> \$174	.84	

## **ADVISORY AND SOLVENCY HEARING**

The above named Defendant came before me for Advisory and Solvency hearing and was advised by me of the charge(s) against him; his right to remain silent; that any statements by him may be used against him; his right to counsel, and, if he is financially unable to afford counsel, that counsel forthwith will be appointed; of his right to communicate with his counsel, family or friends, and that reasonable implementation will be afforded him to contact the foregoing.

C. The Court investi	gated Defendant's solvency and provision	
o. The Defendant w	raived the right to counsel at the first app	earance only.
	DATE AND TIME	JUDGE
I, having been fou	right to counsel at the first appearance or nd solvent and financially able to secu	re counsel, hereby waive counsel until my attorney
I, having been fou	nd solvent and financially able to secu	
I, having been fou	nd solvent and financially able to secu	re counsel, hereby waive counsel until my attorney
I, having been fou	nd solvent and financially able to secu	re counsel, hereby waive counsel until my attorney
I, having been fou	nd solvent and financially able to secu	re counsel, hereby waive counsel until my attorney a review of my solvency and ability to secure counse.

COCR59 (Revised 02/2014)