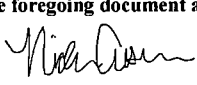


COMPLAINT/ARREST AFFIDAVIT - CIRCUIT/COUNTY COURT - PINELLAS COUNTY, FLORIDA

OBTS #	REPORT # 21-003796				DOCKET # 1862347														
Person ID	311695264			SSN# 000-00-0000															
Charge Description	<input checked="" type="checkbox"/> Felony	<input type="checkbox"/> Misdemeanor	<input type="checkbox"/> Warrant	<input type="checkbox"/> Traffic	<input type="checkbox"/> Ordinance	Traffic Citation # (if any)		Court Case #											
Charge	ARMED BURGLARY					21-03872-CF-1													
Defendant's Name (Last, First, Middle)	CURRY, SAGE GAYLE			DOB	11/11/2001	Sex	M	Race	W	Ht	600	Wt	150	Hair	BRO	Eyes	BLU	Skin	
Alias	DL #	C-600-787-01-411-0			State	FL	Scars/Marks/Tattoos/Physical Features												
Local Address (Street, City, State, Zip Code)					Telephone		Place of Birth		Citizenship										
Permanent Address (Street, City, State, Zip Code)					Telephone		Employed by / School												
Weapon Seized Type				Indication of Drug Influence			Indication of Mental Health Issues			Indication of Alcohol Influence									
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> UNK			<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> UNK			<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> UNK									
Co-Defendant's Name (Last, First, Middle)				DOB		Sex		Race		In Custody		<input type="checkbox"/> Yes <input type="checkbox"/> No							
										<input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor									
Co-Defendant's Name (Last, First, Middle)				DOB		Sex		Race		In Custody		<input type="checkbox"/> Yes <input type="checkbox"/> No							
										<input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor									
The undersigned swears that he/she has reasonable grounds to believe that the above named defendant on the <u>26</u> day of <u>APRIL</u> , 2021 at approximately <u>1:53</u> AM, at <u>[REDACTED]</u> , in Pinellas County did:																			
UNLAWFULLY AND WITHOUT INVITATION OR LICENSE DID ENTER OR REMAIN IN THAT CERTAIN STRUCTURE, TO-WIT: A RESIDENCE LOCATED AT <u>[REDACTED]</u> WITHIN PINELLAS COUNTY, FLORIDA. AFOREMENTIONED THE PROPERTY OF <u>[REDACTED]</u> , WITH THE INTENT TO COMMIT AN OFFENSE THEREIN, AND DURING THE COURSE THEREOF AND WITHIN SAID STRUCTURE WAS ARMED OR DID BECOME ARMED WITH A DANGEROUS WEAPON, TO WIT: A BUTCHER KNIFE AND THE SAID STRUCTURE AT THE TIME WAS NOT OPEN TO THE PUBLIC.																			
THE DEFENDANT MADE CONTACT WITH A NEIGHBOR ADVISING HE NEEDED HELP DUE TO HIS INJURY AND ALERTED POLICE TO THE INCIDENT LOCATION. UPON POLICE ARRIVAL, <u>[REDACTED]</u> AND <u>[REDACTED]</u> WERE DISCOVERED DECEASED ON THE FLOOR WITHIN THE RESIDENCE. POST MIRANDA, THE DEFENDANT ADMITTED HE FOLLOWED <u>[REDACTED]</u> AND <u>[REDACTED]</u> TO THE RESIDENCE. THE DEFENDANT ADVISED HE ENTERED THE RESIDENCE THROUGH THE BEDROOM WINDOW WITHOUT PERMISSION AND CONFESSED TO STABBING <u>[REDACTED]</u> AND <u>[REDACTED]</u> MULTIPLE TIMES WITH THE SHARPEST KITCHEN KNIFE HE COULD FIND.																			
Contrary to Florida Statute/Ordinance <u>810.02.2B</u>																			
ARREST DATE: <u>4/26/2021</u> Time <u>4:56 PM</u> . Aggravating/Mitigating Factors <u>TWO COUNTS OF MURDER</u>																			
Booking Officer: <u>GOODRICH 58205</u> Amount of Bond <u>150,000 JW9414</u> Bond Out Date <u>[REDACTED]</u> Time <u>[REDACTED]</u> a.m. <input type="checkbox"/> p.m. <input type="checkbox"/>																			
Victim Notified of Advisory? <input type="checkbox"/> Yes <input type="checkbox"/> No Injuries to Victim? <input type="checkbox"/> Yes <input type="checkbox"/> No Medical Treatment to Victim? <input type="checkbox"/> Yes <input type="checkbox"/> No																			
The Court reviewed this complaint and finds there: <input type="checkbox"/> is probable cause <input type="checkbox"/> is not probable cause to detain defendant <input type="checkbox"/> Bond Action, if any:																			
The probable cause determination is passed for: <input type="checkbox"/> 24 Hrs <input type="checkbox"/> 24 Hrs on showing of extraordinary circumstances Received by Booking: 4/26/2021 6:50:39 PM																			
Pursuant to F.S. 92.525 and under penalty of perjury, I declare that I have read the foregoing document and that the facts in it are true.				REQUEST FOR INVESTIGATIVE COSTS, F.S. 938.27(1)															
 Declarant Signature DETECTIVE NICOLE CUSUMANO 491 Printed Name LARGO POLICE DEPT. Agency 03321507 Declarant ID#				DATE	OFFICER	HOURS X PAY RATE	OR	COST											
				04/26/2021	N.CUSUMANO	0	25.00												
				04/26/2021	J.BERARD	0	25.00												
				04/26/2021	K.WEDIN	0	25.00												
				04/26/2021	C.CHENEY	0	25.00												
				OTHER - Describe															
				Continuation sheet <input type="checkbox"/> Yes <input type="checkbox"/> No				TOTAL \$ 0.00											

**FILED**  
 CRIMINAL COURT RECORDS  
  
**APR 27 2021**  
 KEN BURKE  
 Clerk of Circuit Court & Comptroller

FILED  
 CLERK OF DISTRICT COURT  
 2021 APR 27 PM 12:12  
 COURT ASSISTANCE

**Defendant** CURRY, SAGE GAYLE

**Court Case No:** 21-03872-CF-1

**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.

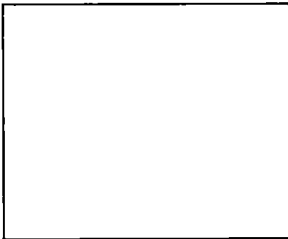
I FURTHER CERTIFY THAT:

- A. Defendant has advised the Court that he has retained counsel or will retain counsel.
- B. The Court investigated Defendant's solvency and found the Defendant financially able to secure counsel.
- C. The Court investigated Defendant's solvency and provisionally appointed the Public Defender.
- D. The Defendant waived the right to counsel at the first appearance only.

\_\_\_\_\_  
DATE AND TIME

  
\_\_\_\_\_  
JUDGE

- I hereby waive the right to counsel at the first appearance only.
- I, having been found solvent and financially able to secure counsel, hereby waive counsel until my attorney files an appearance in this case or until I file a written request for a review of my solvency and ability to secure counsel.



Thumb Print

\_\_\_\_\_  
DEFENDANT'S SIGNATURE

I HEREBY acknowledge receipt of a copy of the foregoing Complaint and Advisory.

\_\_\_\_\_  
DEFENDANT'S SIGNATURE

\_\_\_\_\_  
DEFENDANT'S ATTORNEY'S SIGNATURE

\_\_\_\_\_  
DATE

COMPLAINT/ARREST AFFIDAVIT - CIRCUIT/COUNTY COURT - PINELLAS COUNTY, FLORIDA

OBTS #	REPORT # 21003796				DOCKET # 1862347				
Person ID	311695264			SSN#	000-00-0000				
Charge Description	<input checked="" type="checkbox"/> Felony	<input type="checkbox"/> Misdemeanor	<input type="checkbox"/> Warrant	<input type="checkbox"/> Traffic	<input type="checkbox"/> Ordinance	Traffic Citation # (if any)	Court Case #		
Charge	MURDER IN THE FIRST DEGREE					21-03872-CF-2			
Defendant's Name (Last, First, Middle)	CURRY, SAGE GAYLE		DOB	11/11/2001	Sex	M	Race	W	
					Ht	600	Wt	150	
					Hair	BRO	Eyes	BLU	
Alias	DL #	C-600-787-01-411-0		State	FL				
Local Address (Street, City, State, Zip Code)	1399-5 BELCHER RD S LARGO FL 33771			Telephone	7274240256		Place of Birth	AL	
				Telephone	7274240256		Citizenship	US	
Permanent Address (Street, City, State, Zip Code)	1399-5 BELCHER RD S LARGO FL 33771			Employed by / School					
Weapon Seized	Type	Indication of Drug Influence		Y	N	UNK	Indication of Mental Health Issues		
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Y	<input checked="" type="checkbox"/> N	<input type="checkbox"/> UNK	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> UNK	Indication of Alcohol Influence	
		<input type="checkbox"/> Y	<input checked="" type="checkbox"/> N	<input type="checkbox"/> UNK	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	<input type="checkbox"/> UNK	<input type="checkbox"/> Y	<input checked="" type="checkbox"/> N
Co-Defendant's Name (Last, First, Middle)			DOB			Sex	Race		In Custody
									<input type="checkbox"/> Yes <input type="checkbox"/> No
									<input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor
Co-Defendant's Name (Last, First, Middle)			DOB			Sex	Race		In Custody
									<input type="checkbox"/> Yes <input type="checkbox"/> No
									<input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor

The undersigned swears that he/she has reasonable grounds to believe that the above named defendant on the 26 day of APRIL, 2021,

at approximately 1:53 AM, at [redacted], in Pinellas County did:

THE DEFENDANT UNLAWFULLY, AND FROM A PREMEDITATED DESIGN TO EFFECT THE DEATH OF ZHANETA DINDI, A HUMAN BEING, DID STAB ZHANETA DINDI MULTIPLE TIMES, WITH THE SHARPEST KITCHEN KNIFE HE COULD FIND IN THE RESIDENCE, THEREBY INFLECTING UPON ZHANETA DINDI MORTAL WOUNDS, OF WHICH SAID MORTAL WOUNDS, AND BY THE MEANS AFORESAID AND AS A DIRECT RESULT THEREOF, ZHANETA DINDI DIED.

THE DEFENDANT MADE CONTACT WITH A NEIGHBOR ADVISING HE NEEDED HELP DUE TO HIS INJURY AND ALERTED POLICE TO THE INCIDENT LOCATION. UPON POLICE ARRIVAL, ZHANETA DINDI WAS DISCOVERED DECEASED ON THE FLOOR WITHIN HER RESIDENCE. CLOSER OBSERVATION OF ZHANETA DINDI REVEALED MULTIPLE STAB WOUNDS IN HER CHEST AREA. POST MIRANDA, THE DEFENDANT ADMITTED HE FOLLOWED ZHANETA DINDI HOME AND ENTERED HER RESIDENCE THROUGH THE BEDROOM WINDOW. THE DEFENDANT CONFESSED TO STABBING ZHANETA DINDI MULTIPLE TIMES WITH THE SHARPEST KITCHEN KNIFE HE COULD FIND FOR AN UNKNOWN REASON WHILE SHE WAS SLEEPING. THE DEFENDANT ALSO ADVISED HE ROLLED ZHANETA DINDI OFF THE COUCH TO MAKE THE INCIDENT LOOK LIKE AN ACCIDENT BEFORE HE LEFT THE RESIDENCE.

Contrary to Florida Statute/Ordinance 782.04.1A4

ARREST DATE: 4/26/2021 Time 4:56 PM . Aggravating/Mitigating Factors MURDER/ARMED BURGLARY

Booking Officer: GOODRICH 58205 Amount of Bond ZERO Bond Out Date Time 2021 AM 21 a.m. p.m.

Victim Notified of Advisory? Yes No Injuries to Victim? Yes No Medical Treatment to Victim? Yes No

The Court reviewed this complaint and finds there: is probable cause is not probable cause to detain defendant Bond Action, if any:

The probable cause determination is passed for: 24 Hrs 24 Hrs on showing of extraordinary circumstances Received by Booking: 4/26/2021 6:43:24 PM

Pursuant to F.S. 92.525 and under penalty of perjury, I declare that I have read the foregoing document and that the facts in it are true.

Declarant Signature: Nicole Cusumano LARGO POLICE DEPT. Agency: LARGO POLICE DEPT. DETECTIVE NICOLE CUSUMANO 491 03321507 Printed Name: Nicole Cusumano Declarant ID#: 03321507

REQUEST FOR INVESTIGATIVE COSTS, F.S. 938.27(1)				
DATE	OFFICER	HOURS X PAY RATE	OR	COST
04/26/2021	N.CUSUMANO	32 25.00		\$800.00
04/26/2021	J.BERARD	18 25.00		450
04/26/2021	K.WEDIN	18 25.00		450
04/26/2021	C.CHENY	18 25.00		450

OTHER - Describe Continuation sheet Yes No TOTAL \$ 2,150.00

**Defendant** CURRY, SAGE GAYLE

**Court Case No:** 21-03872-CF-2

**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.

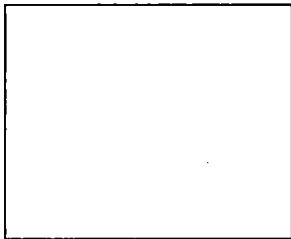
I FURTHER CERTIFY THAT:

- A. Defendant has advised the Court that he has retained counsel or will retain counsel.
- B. The Court investigated Defendant's solvency and found the Defendant financially able to secure counsel.
- C. The Court investigated Defendant's solvency and provisionally appointed the Public Defender.
- D. The Defendant waived the right to counsel at the first appearance only.

\_\_\_\_\_  
DATE AND TIME

  
\_\_\_\_\_  
JUDGE

- I hereby waive the right to counsel at the first appearance only.
- I, having been found solvent and financially able to secure counsel, hereby waive counsel until my attorney files an appearance in this case or until I file a written request for a review of my solvency and ability to secure counsel.



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\_\_\_\_\_  
DEFENDANT'S SIGNATURE

I HEREBY acknowledge receipt of a copy of the foregoing Complaint and Advisory.

\_\_\_\_\_  
DEFENDANT'S SIGNATURE

\_\_\_\_\_  
DEFENDANT'S ATTORNEY'S SIGNATURE

\_\_\_\_\_  
DATE

COMPLAINT/ARREST AFFIDAVIT - CIRCUIT/COUNTY COURT - PINELLAS COUNTY, FLORIDA

OBTS #	REPORT # <b>21-003796</b>		DOCKET # <b>1862347</b>	
Person ID <b>311695264</b>	SSN# <b>000-00-0000</b>			
Charge Description <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor <input type="checkbox"/> Warrant <input type="checkbox"/> Traffic <input type="checkbox"/> Ordinance	Traffic Citation # (if any)		Court Case #	
Charge <b>MURDER IN THE FIRST DEGREE</b>		<b>21-03872-CF-3</b>		
Defendant's Name (Last, First, Middle) <b>CURRY, SAGE GAYLE</b>	DOB <b>11/11/2001</b>	Sex <b>M</b>	Race <b>W</b>	Ht <b>600</b>
		Wt <b>150</b>	Hair <b>BRO</b>	Eyes <b>BLU</b>
Alias	DL # <b>C-600-787-01-411-0</b>	State <b>FL</b>	Scars/Marks/Tattoos/Physical Features	
Local Address (Street, City, State, Zip Code) <b>1399-5 BELCHER RD S LARGO FL 33771</b>		Telephone <b>7274240256</b>	Place of Birth <b>AL</b>	Citizenship <b>US</b>
Permanent Address (Street, City, State, Zip Code) <b>1399-5 BELCHER RD S LARGO FL 33771</b>		Telephone <b>7274240256</b>	Employed by / School	
Weapon Seized Type <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Indication of Drug Influence Y <input type="checkbox"/> N <input checked="" type="checkbox"/> UNK <input type="checkbox"/>	Indication of Mental Health Issues Y <input checked="" type="checkbox"/> N <input type="checkbox"/> UNK <input type="checkbox"/>	Indication of Alcohol Influence Y <input type="checkbox"/> N <input checked="" type="checkbox"/> UNK <input type="checkbox"/>	
Co-Defendant's Name (Last, First, Middle)	DOB	Sex	Race	In Custody <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor
Co-Defendant's Name (Last, First, Middle)	DOB	Sex	Race	In Custody <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor

The undersigned swears that he/she has reasonable grounds to believe that the above named defendant on the 26 day of APRIL, 2021,

at approximately 1:53 AM, at [REDACTED], in Pinellas County did:

THE DEFENDANT UNLAWFULLY, AND FROM A PREMEDITATED DESIGN TO EFFECT THE DEATH OF HERA DINDI, A HUMAN BEING, DID STAB HERA DINDI MULTIPLE TIMES, WITH THE SHARPEST KITCHEN KNIFE HE COULD FIND IN THE RESIDENCE, THEREBY INFLECTING UPON HERA DINDI MORTAL WOUNDS, OF WHICH SAID MORTAL WOUNDS, AND BY THE MEANS AFORESAID AND AS A DIRECT RESULT THEREOF, HERA DINDI DIED.

THE DEFENDANT MADE CONTACT WITH A NEIGHBOR ADVISING HE NEEDED HELP DUE TO HIS INJURY AND ALERTED POLICE TO THE INCIDENT LOCATION. UPON POLICE ARRIVAL, HERA DINDI WAS DISCOVERED DECEASED ON THE FLOOR WITHIN HER RESIDENCE. CLOSER OBSERVATION OF HERA DINDI REVEALED MULTIPLE STAB WOUNDS IN HER NECK AND FACIAL AREA. POST MIRANDA, THE DEFENDANT ADMITTED HE FOLLOWED HERA DINDI HOME AND ENTERED HER RESIDENCE THROUGH THE BEDROOM WINDOW. THE DEFENDANT CONFESSED TO STABBING HERA DINDI MULTIPLE TIMES WITH A KITCHEN KNIFE.

Contrary to Florida Statute/Ordinance 782.04.1A4

ARREST DATE: 4/26/2021 Time 4:56 PM . Aggravating/Mitigating Factors MURDER/ARMED BURGLARY

Booking Officer: GOODRICH 58205 Amount of Bond ZERO Bond Out Date \_\_\_\_\_ Time \_\_\_\_\_ a.m.  p.m.

Victim Notified of Advisory?  Yes  No Injuries to Victim?  Yes  No Medical Treatment to Victim?  Yes  No

The Court reviewed this complaint and finds there:  is probable cause  is not probable cause to detain defendant  Bond Action, if any:

The probable cause determination is passed for:  24 Hrs  24 Hrs on showing of extraordinary circumstances Received by Booking: 4/26/2021 6:43:34 PM

Pursuant to F.S. 92.525 and under penalty of perjury, I declare that I have read the foregoing document and that the facts in it are true.

Nicole Cusumano  
 Declarant Signature LARGO POLICE DEPT.  
 Agency

DETECTIVE NICOLE CUSUMANO 491 03321507  
 Printed Name Declarant ID#

DATE	OFFICER	HOURS X PAY RATE	OR	COST
04/26/2021	N.CUSUMANO	0 25.00	OR	\$0.00
04/26/2021	J.BERARD	0 25.00		0
04/26/2021	K.WEDIN	0 25.00		0
04/26/2021	C.CHENEY	0 25.00		0

OTHER - Describe \_\_\_\_\_

Continuation sheet  Yes  No TOTAL \$ \$0.00

**Defendant** CURRY, SAGE GAYLE

**Court Case No:** 21-03872-CF-3

**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.

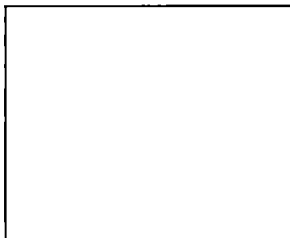
I FURTHER CERTIFY THAT:

- A. Defendant has advised the Court that he has retained counsel or will retain counsel.
- B. The Court investigated Defendant's solvency and found the Defendant financially able to secure counsel.
- C. The Court investigated Defendant's solvency and provisionally appointed the Public Defender.
- D. The Defendant waived the right to counsel at the first appearance only.

\_\_\_\_\_  
DATE AND TIME

  
\_\_\_\_\_  
JUDGE

- I hereby waive the right to counsel at the first appearance only.
- I, having been found solvent and financially able to secure counsel, hereby waive counsel until my attorney files an appearance in this case or until I file a written request for a review of my solvency and ability to secure counsel.



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\_\_\_\_\_  
DEFENDANT'S SIGNATURE

I HEREBY acknowledge receipt of a copy of the foregoing Complaint and Advisory.

\_\_\_\_\_  
DEFENDANT'S SIGNATURE

\_\_\_\_\_  
DEFENDANT'S ATTORNEY'S SIGNATURE

\_\_\_\_\_  
DATE