

PROBABLE CAUSE AFFIDAVIT		FORM On View (PC Arrest) <input checked="" type="checkbox"/>	Capias Request _____	Summoned/Cited (NTA) _____	JUVENILE YES _____ NO <input checked="" type="checkbox"/>
PURPOSE Taken Into Custody (Warrant/Capias Arrest) _____		AMENDED _____		Referral _____ Civil Citation _____	
Arresting Agency ORI FL0051600	Arresting Agency Name WEST MELBOURNE POLICE DEPARTMENT		Arresting Agency Case/Arrest Number 2024-00016932	OBTS Number 0501470246	
FDLE (SID) Number _____	FBI Number _____	DOC Number _____	Transport Time _____	Jail Date / Time 05/20/2024 10:00	Jail Booking Number 2024-00006419
Location of Arrest (Include Name of Business) 2245 COASTAL LN West Melbourne FL 32904			City GOODWILL 2245 COASTAL LN West Melbourne FL 32904		
Offense Date OR Date Range 05/20/2024 - 05/20/2024		Arrest Date / Time 05/20/2024 07:13		Charge Type (Check as many as apply) Felony <input checked="" type="checkbox"/> Misdemeanor <input checked="" type="checkbox"/> Traffic _____ Ordinance _____	
Evidence Confiscated (Check as many as apply) Vehicle _____ Firearm _____ Property <input checked="" type="checkbox"/>					
Name (Last, Suffix) STRZESYNSKI	Name (First) KURT	Name (Middle) JAMES	Alias and Type _____		Date of Birth 10/16/1992
Age 31		Jacket Number 319078		Race W-White	
Ethnicity Non-Hispanic		Sex Male	Height 6' 0"	Weight 180	Eye Color Brown
Hair Color Brown					
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) _____					
Local Address (Street, Apt. Number) HOMELESS		City, State, Zip _____		Phone/Type (include area code) _____	Primary Language English <input checked="" type="checkbox"/> _____
Permanent Address (Street, Apt. Number) or Parent's Name if Juvenile HOMELESS		City, State, Zip _____		Phone/Type (include area code) _____	Complexion Light
Business Address (Name, Street) or School if Juvenile _____		City, State, Zip _____		Phone/Type (include area code) _____	Build Average
Driver's License State / Number / Type FL / S362510923760		Social Security Number* [REDACTED]	INS Number _____	Place of Birth OH	Citizenship U.S. Citizen
Residence Type: City _____ County <input checked="" type="checkbox"/> Florida _____ Out of State _____		Mark All that Apply (Y, N, Unk) Homeless <input checked="" type="checkbox"/> Sex Offender <input checked="" type="checkbox"/> Gang Affiliation <input checked="" type="checkbox"/>		Suspected of Using (Y, N, Unk) Drugs _____ Alcohol _____ Computer/Handheld Device _____	
PARENT Driver's License State / Number / Type _____		PARENT Social Security Number _____	Juvenile Civil Citation Not Referred Explanation _____		Juvenile Facility _____
*Collection of social security numbers from an arrested individual is to verify identity and may be shared with other law enforcement agencies.					
PC <input checked="" type="checkbox"/> Capias _____ Warrant _____ Additional Charge _____		Date Issued _____	Writ Aff. _____ Domestic Violence _____ Order of Arrest _____		_____
Charge Description Agg Assault W/Deadly Weapon WO Intent Kill		Counts 2	F.S. <input checked="" type="checkbox"/> Ord. _____	Statute / Ordinance Number 784.021.1a	Reclassifier _____
Drug Activity _____		Drug Type _____	Amount / Unit _____	Bond Amount \$5,000.00 per count	Warrant / Citation / Court Number _____
				\$10,000.00 Total	
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 On the 20th day of May, 2024 at 07:33 <input checked="" type="checkbox"/> AM _____ PM _____ (Specifically include facts constituting cause for arrest)					
Confidential Victim Information included - YES _____ NO <input checked="" type="checkbox"/>					
In accordance with F.S.S. 938.27, I hereby request reimbursement of investigative costs consisting of _____ hrs @ \$_____ per hr and/or _____ miles @ _____ per mile for a total of \$_____.					
Affidavit Attached: Yes _____ No _____			Continue for: Narrative _____ Charges _____		
Mandatory Appearance in Court		Location (Court and Address) _____		Division # _____	
Date: Month _____ Day _____ Year _____ Time _____ AM _____ PM		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 OR A TAKE INTO CUSTODY ORDER SHALL BE ISSUED.			
Signature of Defendant / Juvenile _____		Signature of Juvenile's Parent/Custodian _____		Release to: (Name) _____	Date _____ Time _____
Hold for Other Agency Name: _____		Verified By: _____	Do Not Bond Out Reason _____ Hold for 1st Appearance (Adults Only)		
I swear/affirm the above and attached statements are true and correct <input checked="" type="checkbox"/> on 05/20/2024		Officer's/Complainant's Signature Electronically Signed		ID# 0191	Officer's/Complainant's Name (Printed) Eileen Stanton
Sworn and Subscribed before me, the undersigned authority this _____ day of 05/20/2024		Notary Signature Electronically Signed		Notary Name (Printed) Conyers, Michael	
				Notary/Law Enforcement Officer in Performance of Official Duties. Personally Known <input checked="" type="checkbox"/> ID _____	
				WMPD Patrol	
				Page 1 of 3	

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AGENCY NAME: WEST MELBOURNE POLICE DEPARTMENT	BREVARD COUNTY, FLORIDA	Arresting Agency Case Number 2024-00016932
Continuation Page 2 of 3		

Defendant / Juvenile Name (Last, Suffix) STRZESYNSKI	Defendant / Juvenile Name (First) KURT	Defendant / Juvenile Name (Middle) JAMES	OBTS Number 0501470246
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Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth/Age	Juvenile (Y or N)
Arrested <input type="checkbox"/> At Large <input type="checkbox"/> Cited <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor <input type="checkbox"/>				
Co-Defendant Name (Last, First, Middle)	Race	Sex	Date of Birth/Age	Juvenile (Y or N)
Arrested <input type="checkbox"/> At Large <input type="checkbox"/> Cited <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor <input type="checkbox"/>				

PC <input checked="" type="checkbox"/> Caplas <input type="checkbox"/> Warrant <input type="checkbox"/> Additional Charge <input type="checkbox"/>	Date Issued	Writt Aff. <input type="checkbox"/> Domestic Violence <input type="checkbox"/> Order of Arrest <input type="checkbox"/>
Charge Description False Imprisonment Child Under 13 YOA	Counts 2	F.S. <input checked="" type="checkbox"/> Statute / Ordinance Number 787.02.1b
Drug Activity	Drug Type	Bond Amount NO BOND
Amount / Unit	Warrant / Citation / Court Number	

PC <input checked="" type="checkbox"/> Caplas <input type="checkbox"/> Warrant <input type="checkbox"/> Additional Charge <input type="checkbox"/>	Date Issued	Writt Aff. <input type="checkbox"/> Domestic Violence <input type="checkbox"/> Order of Arrest <input type="checkbox"/>
Charge Description Resist Officer WO Viol	Counts 1	F.S. <input checked="" type="checkbox"/> Statute / Ordinance Number 843.02
Drug Activity	Drug Type	Bond Amount \$,500.00 per count
Amount / Unit	Total \$,500.00	
Warrant / Citation / Court Number		

PC <input type="checkbox"/> Caplas <input type="checkbox"/> Warrant <input type="checkbox"/> Additional Charge <input type="checkbox"/>	Date Issued	Writt Aff. <input type="checkbox"/> Domestic Violence <input type="checkbox"/> Order of Arrest <input type="checkbox"/>
Charge Description	Counts	F.S. <input type="checkbox"/> Statute / Ordinance Number
Drug Activity	Drug Type	Bond Amount
Amount / Unit	Warrant / Citation / Court Number	

Year	Make	Model	VIN	Tag / Tag State	Primary Color	Secondary Color
* If Applicable, provide information related to the vehicle involved in the crime.						

The defendant did commit the offense of aggravated assault x2, false imprisonment x2, and resisting arrest without violence. He committed this offense when he approached two juveniles at a school bus stop wielding a screwdriver and demanded they lay down on the ground to show him respect.

WMPD units were dispatched to 2245 Coastal Lane (Goodwill) in reference to two juveniles reporting a male threatening them with a screwdriver. Upon arrival contact was made with the black female juvenile who reported that a lighter skinned male wearing all black approached her and another student at the bus stop and demanded they lay down on the ground to show them respect. In a sworn written statement, this black female juvenile advised that she complied with the male due to her being in fear, as the male was holding a screw driver while making these demands. A white male student at the bus stop corroborated her claims, as he also complied with the male while at the bus stop. Both students described the screw driver as metal and red in color. This male suspect is not a parental figure or legal gaurdian, and confined and demanded the two juveniles to the ground out of fear due to the threatening manner of which the suspect was wielding a screwdriver while making these demands.

While speaking with the juveniles, a male subject matching the description provided began walking towards the scene. I asked the juveniles if this was the male that threatened them, to which they both advised "yes". Officers approached the male from the rear in marked patrol vehicles and made clear and concise commands for the male to stop, however the male continued walking through the parking lot resisting officers lawful demands to detain him. The male continued until being confronted directly at taser point. This male was later identified as the defendant, Kurt Strzesynski.

A search incident to arrest revealed a metal/red screw driver on the defendants person, matching the exact description provided by the juvenile victims.

Officer's/Complainant's Signature Electronically Signed	ID# 0191	Officer's/Complainant's Name (Printed) Eileen Stanton
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Continuation Page 3 of 3	Defendant / Juvenile Name (Last, Suffix) STRZESYNSKI	Defendant / Juvenile Name (First) KURT	Defendant / Juvenile Name (Middle) JAMES	OBTS Number 0501470246
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CHARGE	PC <input type="checkbox"/> Capias <input type="checkbox"/> Warrant <input type="checkbox"/> Additional Charge <input type="checkbox"/>	Date Issued	Writ Aff. <input type="checkbox"/>	Domestic Violence <input type="checkbox"/>	Order of Arrest <input type="checkbox"/>
Charge Description	Counts	F.S. <input type="checkbox"/>	Statute / Ordinance Number	Reclassifier	
Drug Activity	Drug Type	Amount / Unit	Bond Amount	Warrant / Citation / Court Number	

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Charge Description	Counts	F.S. <input type="checkbox"/>	Statute / Ordinance Number	Reclassifier	
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The defendant was placed under arrest for the aforementioned charges. He was transported to the Brevard County Jail without incident.

:::DETAILED REPORT TO FOLLOW:::

Officer's/Complainant's Signature Electronically Signed	ID# 0191	Officer's/Complainant's Name (Printed) Eileen Stanton
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