

PROBABLE CAUSE AFFIDAVIT		FORM On View (PC Arrest) _____ PURPOSE Taken into Custody (Warrant/Capias Arrest) _____	Capias Request _____	Summoned/Cited (NTA) _____	JUVENILE YES _____ NO <input checked="" type="checkbox"/>	
		AMENDED _____		Referral _____ Civil Citation _____		
ADMINISTRATIVE	Arresting Agency ORI FL0051000	Arresting Agency Name Satellite Beach Police Department		Arresting Agency Case/Arrest Number 2024-00005860	OBT5 Number 0501-470501	
	FDLE (SID) Number	FBI Number	DOC Number	Transport Time	Jail Date / Time 5/16/24 0605	
	Location of Arrest (include Name of Business) 698 JACKSON CT SATELLITE BEACH FL 32937		City	Location of Offense (Business Name, Address) 698 JACKSON CT SATELLITE BEACH FL 32937		
	Offense Date OR Date Range 05/26/2024	Arrest Date / Time 05/26/2024 00:56	Charge Type (Check as many as apply) Misdemeanor _____ Traffic _____ Ordinance _____ Felony <input checked="" type="checkbox"/>		Evidence Confiscated (Check as many as apply) Vehicle _____ Firearm _____ Property _____	
Name (Last, Suffix) Nile	Name (First) Leonard	Name (Middle) KEAT	Alias and Type	Date of Birth 04/06/1973	Age 51	
Race W-White	Ethnicity Unknown	Sex Male	Height 5' 7"	Weight 180	Eye Color Blue	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)						
DEFENDANT / JUVENILE	Local Address (Street, Apt. Number) 2061 CEDARWOOD DR, Melbourne FL 32935-			Phone/Type (include area code) (321)999-4773 Cellular Phone	Primary Language English <input checked="" type="checkbox"/>	
	Permanent Address (Street, Apt. #) or Parent's Name if Juvenile 2061 CEDARWOOD DR Melbourne FL			Phone/Type (include area code)	Complexion Medium	
	Business Address (Name, Street) or School if Juvenile			Phone/Type (include area code)	Build Heavy	
	Driver's License State / Number / Type FL/ N400536731260 05 - E-Operator	Social Security Number* ---	INS Number	Place of Birth UNKNOWN	Citizenship United States US	
	Residence Type: City <input checked="" type="checkbox"/> County _____ 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 <input checked="" type="checkbox"/>	
	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.						
CHARGE	PC <input checked="" type="checkbox"/> Capias _____ Warrant _____ Additional Charge _____		Date Issued	Writ Aff. _____ Domestic Violence _____ Order of Arrest _____		
	Charge Description NEGLECT CHILD-NEGLECT CHILD WITHOUT GREAT BODILY HARM		Counts 3	F.S. <input checked="" type="checkbox"/>	Statute / Ordinance Number 827.03(2d)	Reclassifier
	Drug Activity	Drug Type	Amount / Unit	Bond Amount NO BOND	Warrant / Citation / Court Number 3 X 0	
PROBABLE CAUSE	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 26 day of May , 2024 at 0203 <input checked="" type="checkbox"/> AM _____ PM (Specifically include facts constituting cause for arrest)					
	See the Narrative on the Continuation Page(s)					
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 <input checked="" type="checkbox"/> Charges <input checked="" type="checkbox"/>						
NOTICE TO APPEAR	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	
ADMINISTRATIVE	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 05/26/2024	Officer's/Complainant's Signature Electronically Signed	ID# 496	Officer's/Complainant's Name (Printed) Erik Abrahamson		
	Sworn and Subscribed before me, the undersigned authority this 26 day of May	Notary Signature	Notary Name (Printed)	Notary/Law Enforcement Officer in Performance of Official Duties. Personally Known _____ ID _____		
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OBT5 # 0501-470501

47096188

AGENCY NAME: <u>SATELLITE BEACH POLICE DEPARTMENT</u>	BREVARD COUNTY, FLORIDA	Arresting Agency Case Number 2024-00005860
Continuation Page <u>2</u> of <u>3</u>		

Defendant / Juvenile Name (Last, Suffix) Nile	Defendant / Juvenile Name (First) Leonard	Defendant / Juvenile Name (Middle) Nile EA	OBTS Number
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CO-DEF	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"/>						

CHARGE	PC <input type="checkbox"/> Capias <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"/> Ord. <input type="checkbox"/>	Statute / Ordinance Number	Reclassifier
	Drug Activity	Drug Type	Amount / Unit	Bond Amount	Warrant / Citation / Court Number

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VEHICLE*	Year	Make	Model	VIN	Tag / Tag State	Primary Color	Secondary Color
	2001	Chevrolet	SUBURBAN	3GNFK16T11G186857	73EJTC / FL	Blue	Blue
* If Applicable, provide information related to the vehicle involved in the crime.							

On May 26th, 2024, at approximately 0106 hours I, Officer Abrahamsen #496, arrived in the area of 698 Jackson Ct., Satellite Beach, Florida, 32937, in reference to [REDACTED]

Upon arrival, I observed the defendant, later identified via Florida Driver License as Leonard Nile, who was acting erratic and yelling. The defendant stated he and his "friend," identified via FCIC/NCIC as Kayla Campbell, planned on camping as he dropped off [REDACTED] on Samson Island located directly across a canal from where I met with him. The defendant was emotional, showing mood swings and even crying while yelling in reference to missing children. I could smell the odor of alcohol emitting from his breath, and based off my knowledge, training, and experience would say he was under the influence of some kind of narcotic.

Both Kayla and the defendant claimed two children were left on the island with a dog, while the defendant returned to a boat ramp to retrieve equipment. After some technical difficulties with their boat, the duo drove an SUV to the location which we met at in an attempt to locate the missing children. It should be noted the defendant admitted driving to the scene, however both he and Kayla have suspended Florida Driver Licenses.

It was difficult to ascertain a coherent statement from either individual due to their clear intoxication, however it appeared the defendant and Kayla were under the impression two children were left on the island for a short time. Both Kayla and the defendant [REDACTED] The children were abandoned on the island while the defendant drove the small boat they arrived on several miles

Officer's/Complainant's Signature Electronically Signed	ID# 496	Officer's/Complainant's Name (Printed) Erik Abrahamsen
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Continuation Page <u>3</u> of <u>3</u>		

Defendant / Juvenile Name (Last, Suffix) Nile	Defendant / Juvenile Name (First) Leonard	Defendant / Juvenile Name (Middle) Nile EA	OBTS Number
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CHARGE	PC _____ Capias _____ Warrant _____ Additional Charge _____	Date Issued _____	Writ Aff. _____	Domestic Violence _____	Order of Arrest _____
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CHARGE	PC _____ Capias _____ Warrant _____ Additional Charge _____	Date Issued _____	Writ Aff. _____	Domestic Violence _____	Order of Arrest _____
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north near towards the Pineda Causeway to retrieve camping equipment. At this point, the defendant failed to provide children with the care, supervision, and services necessary to maintain the child's physical and mental health, including, but not limited to, food, nutrition, clothing, shelter, supervision, medicine, and medical services that a prudent person would consider essential for the well-being of the child.

It was later discovered, through four independent callers/witnesses to this event, the defendant had dropped off not two, but three children; only one of which [REDACTED]. Two witnesses who reside in the area I arrived in stated they overheard children crying and screaming for help multiple times before making contact with the children on the island. One caller was a Good Samaritan, who overheard the commotion and brought the children to his residence in order to contact police. An additional witness provided a statement where he notes seeing the defendant leave with the children at approximately 2000 hours from the boat ramp while appearing to be on "drugs", meaning the children were left alone for possibly over four hours with no access to food, shelter, water or other necessities.

The children stated they were in fear, and Kayla [REDACTED] specifically requested not to go back to Kayla [REDACTED]. It was later revealed Kayla is out on bond for child neglect and is not allowed contact with [REDACTED]. The third child was under the defendant [REDACTED] and was not able to retrieve important medication which was still within the defendant's truck. All the children involved [REDACTED].

It should be noted the defendant stated he had smoked weed, consumed cocaine, and drank beer prior to meeting with me. Additionally, the children who were abandoned are ages [REDACTED].

The defendant was ultimately placed under arrest for Child Neglect, before being turned over to Deputy Durrance with the Brevard County Sheriff's Office Transport Unit.

Officer's/Complainant's Signature Electronically Signed	ID# 496	Officer's/Complainant's Name (Printed) Erik Abrahamsen
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