

PROBABLE CAUSE AFFIDAVIT		FORM On View (PC Arrest) <input checked="" type="checkbox"/> Capias Request _____ Summons/Cited (NTA) _____	JUVENILE YES _____ NO <input checked="" type="checkbox"/>
PURPOSE Taken into Custody (Warrant/Capias Arrest) _____		AMENDED _____	Referral _____ Civil Citation _____
ADMINISTRATIVE	Arresting Agency ORI FL0050200	Arresting Agency Name COCOA POLICE DEPARTMENT	Arresting Agency Case/Arrest Number 2025-00017588
	Arresting Agency Case/Arrest Number 2025-00017588	OBTS Number	
	FOLE (SID) Number	FBI Number	DOC Number
	Transport Time	Jail Date / Time 4/26/25 1800	Jail Booking Number 2025-
Location of Arrest (Include Name of Business) STONE ST / BREVARD CT Cocoa 32922		Location of Offense (Business Name, Address) STONE ST / BREVARD CT Cocoa FL 32922	
Offense Date OR Date Range 04/26/2025	Arrest Date / Time 04/26/2025 12:48	Charge Type (Check as many as apply) Misdemeanor <input checked="" type="checkbox"/> Traffic <input checked="" type="checkbox"/> Ordinance _____	Evidence Confiscated (Check as many as apply) Unarmed Vehicle _____ Firearm _____ Property _____
Name (Last, Suffix) CORONA	Name (First) JAMES	Name (Middle) CASH	Alias and Type
Date of Birth 03/29/1999	Age 26	Jacket Number 4806786	
Race Black	Ethnicity Black	Sex Male	Height 5' 2"
Weight 130	Eye Color Brown	Hair Color Black	
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)			
Local Address (Street, Apt. Number) 93 Delannoy Ave 501, Cocoa, FL 32922-		City, State, Zip	Phone/Type (include area code) (321)806-8555
Permanent Address (Street, Apt. #) or Parent's Name if Juvenile 93 Delannoy Ave 501, Cocoa FL Cocoa		City, State, Zip	Primary Language English <input checked="" type="checkbox"/> English
Business Address (Name, Street) or School if Juvenile		City, State, Zip	Complexion Dark
Driver's License State / Number / Type FL/ C239500076000		Social Security Number* [REDACTED]	INS Number
Residence Type: City <input checked="" type="checkbox"/> County _____ Florida _____ Out of State _____		Place of Birth FL	Citizenship U.S. Citizen
Mark All that Apply (Y, N, Unk) Homeless <input checked="" type="checkbox"/> Sex Offender <input checked="" type="checkbox"/> Gang Affiliation _____		Suspected of Using (Y, N, Unk) Alcohol <input checked="" type="checkbox"/> Computer/Handheld Device <input checked="" type="checkbox"/> Drugs <input type="checkbox"/>	
PARENT Driver's License State / Number / Type		PARENT Social Security Number	Juvenile Civil Citation Not Referred Explanation
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 DUI		Counts 1	F.S. <input checked="" type="checkbox"/> Statute / Ordinance Number 316.193
Drug Activity		Drug Type	Amount / Unit
			Bond Amount \$,500.00
			Warrant / Citation / Court Number
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 April, 2025 at 1206 AM <input checked="" type="checkbox"/> 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 \$ \$,341.00 .			
Affidavit Attached: Yes <input checked="" type="checkbox"/> No _____		Continue for: Narrative <input checked="" type="checkbox"/> 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	
I swear/affirm the above and attached statements are true and correct <input checked="" type="checkbox"/> on 04/26/2025		Hold for 1st Appearance (Adults Only)	
Officer's/Complainant's Signature <i>[Signature]</i>		ID# 42	Officer's/Complainant's Name (Printed) Kenneth Brackin, Jr
Sworn and Subscribed before me, the undersigned authority this 26th day of April 25		Notary Name (Printed) Brandi Marchica	
Notary Signature <i>[Signature]</i>		Notary/Law Enforcement Officer in Performance of Official Duties. Personally Known <input checked="" type="checkbox"/> ID _____	
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AGENCY NAME: COCOA POLICE DEPARTMENT	BREVARD COUNTY, FLORIDA	Arresting Agency Case Number 2025-00017588
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Defendant / Juvenile Name (Last, Suffix) CORONA	Defendant / Juvenile Name (First) JAMES	Defendant / Juvenile Name (Middle) CASH	OBTS Number
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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)				
Arrested <input type="checkbox"/> At Large <input type="checkbox"/> Cited <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor <input type="checkbox"/>				

PC <input type="checkbox"/> Capias <input type="checkbox"/> Warrant <input type="checkbox"/> Additional Charge <input type="checkbox"/>	Date issued	Wrirt 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
Ord. <input type="checkbox"/>				

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

On Saturday, April 26, 2025, at approximately 1206 hours, I responded to 316 Brevard Avenue in reference to a hit and run crash.

Upon arrival, I met with the caller, Mr. Darrell Crandall (Reporting Person) who stated he observed a white Honda collide with a forklift and continue driving Southbound on Brevard Avenue. Numerous subject in the area observed the crash, but stated they could not identify the driver. Numerous bystanders stated they observed what they believed was the same vehicle attempting to back into a parking space in the area of Stone Street and Brevard Court.

I approached the vehicle, a White Honda Civic (FL Tag NJQI53), that had heavy damage to the driver side front, consistent with the crash described prior. The vehicle was occupied by Mr. James Corona (Arrestee) who I recognized from previous encounters. Due to bystanders claiming the vehicle occupied by Mr. Corona was involved in a hit and run, I asked Mr. Corona to step out of the vehicle and detained him in handcuffs.

As Mr. Corona exited the vehicle, I noticed the distinct odor of an alcoholic beverage emanating from his breath, and observed what appeared to be an alcoholic beverage in the center cup holder of the vehicle.

I requested Mr. Corona's driver license, which he stated was in his pocket. Mr. Corona gave me permission to retrieve it from his pocket but his pockets were empty. Prior to walking Mr. Corona to a patrol vehicle, I noticed Mr. Corona's driver license was in the interior driver door handle, along with a key fob to the vehicle.

While escorting Mr. Corona to a patrol vehicle, he began swaying and nearly fell while trying to walk. He

Officer's/Complainant's Signature 	ID# 42	Officer's/Complainant's Name (Printed) Kenneth Brackin, Jr
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AGENCY NAME: COCOA POLICE DEPARTMENT	BREVARD COUNTY, FLORIDA	Arresting Agency Case Number 2025-00017588
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Defendant / Juvenile Name (Last, Suffix) CORONA	Defendant / Juvenile Name (First) JAMES	Defendant / Juvenile Name (Middle) CASH	OBTS Number
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PC _____ Capias _____ Warrant _____ Additional Charge _____	Date Issued _____	Writt Aff. _____	Domestic Violence _____ Order of Arrest _____
Charge Description	Counts	F.S. _____ Ord. _____	Statute / Ordinance Number
Drug Activity	Drug Type	Amount / Unit	Bond Amount
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PC _____ Capias _____ Warrant _____ Additional Charge _____	Date Issued _____	Writt Aff. _____	Domestic Violence _____ Order of Arrest _____
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also had glassy, watery eyes, and heavily slurred speech.

Officer B. Fredette #30 was on scene during my interaction with Mr. Corona. See his supplement report for further information.

I then attempted to speak with the owner of the forklift involved in the crash, who refused to identify and stated he did not call, and there was no damage to his vehicle. He then left the area.

Ms. Carie Herstine Smith (Witness) approached me in the area of Stone Street and Brevard Court and stated she was parked one space South of the parking spot used by Mr. Corona. She stated the person I removed from the vehicle was driving the vehicle and backed into a tree while trying to park. She stated Mr. Corona was the only occupant in the vehicle. She completed a Sworn Written Witness Affidavit.

Mr. Corona was in actual physical control of the vehicle with a key fob in the driver door handle, giving him immediate ability to operate the vehicle. Due to the Mr. Corona having difficulty standing and walking on his own, the odor of an alcoholic beverage emanating from his breath, his glassy and watery eyes, slurred speech, and the presence of an open alcoholic beverage can in the vehicle, there was probable cause for the arrest of Mr. Corona for Driving Under the Influence FSS 316.193(1).

Due to the heavy traffic in the area of this investigation, I placed Mr. Corona under arrest prior to conducting Standardized Field Sobriety Exercises. He was transported to the Cocoa Police Department.

Upon arrival, I read Mr. Corona Miranda Warnings from a prepared card. He stated he understood the warnings and agreed to speak with me.

I explained Standardized Field Sobriety Exercises to Mr. Corona that he failed. See the Cocoa Police Department D.U.I. Investigation Report for further details.

Mr. Corona voluntarily consented to a lawful test of his breath for the purpose of determining it alcohol content. Rockledge Police Department Lieutenant P. Kennedy #185 responded to the Cocoa Police Department to perform the test. Mr. Corona would not blow into the testing instrument as directed, and failed to provide a breath sample. Lt. Kennedy read implied consent to Mr. Corona and explained to Mr. Corona that if he did not blow into the testing instrument as directed, it would be a refusal. Mr. Corona

Officer's/Complainant's Signature 	ID# 42	Officer's/Complainant's Name (Printed) Kenneth Brackin, Jr
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AGENCY NAME: **COCOA POLICE DEPARTMENT** BREVARD COUNTY, FLORIDA Arresting Agency Case Number
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Defendant / Juvenile Name (Last, Suffix) **CORONA** Defendant / Juvenile Name (First) **JAMES** Defendant / Juvenile Name (Middle) **CASH** QBTS Number

CHARGE	PC <input type="checkbox"/> Capias <input type="checkbox"/> Warrant <input type="checkbox"/> Additional Charge <input type="checkbox"/> Date Issued	Counts	F.S. <input type="checkbox"/>	Statute / Ordinance Number	Reclassifier
	Charge Description		Ord. <input type="checkbox"/>		
	Drug Activity	Drug Type	Amount / Unit	Bond Amount	Warrant / Citation / Court Number

CHARGE	PC <input type="checkbox"/> Capias <input type="checkbox"/> Warrant <input type="checkbox"/> Additional Charge <input type="checkbox"/> Date Issued	Counts	F.S. <input type="checkbox"/>	Statute / Ordinance Number	Reclassifier
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stated he understood implied consent and again failed to provide a sufficient sample. A Florida Department of Law Enforcement Breath Alcohol Test Affidavit and a State of Florida Affidavit of Refusal to Submit to Breath Test form were completed by Lt. Kennedy.

Mr. Corona was ultimately charged with Driving Under the Influence and issued DUI Citation A2FXHSP. He was also issued Uniform Traffic Citation A5MH1SP and A5MH1TP for Possession of an Open Container in a Motor Vehicle 316.1936(2)(A).

Due to the probability of Mr. Corona being in a traffic crash, he was transported to Cape Canaveral Hospital for medical clearance by Officer A. Fuller #63. He was later transported to the Brevard County Jail.

Body camera footage was uploaded to Evidence.com.

Officer's/Complainant's Signature  ID# **42** Officer's/Complainant's Name (Printed) **Kenneth Brackin, Jr**