

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 _____
Arresting Agency ORI FL0050000	Arresting Agency Name BREVARD COUNTY SHERIFF'S OFFICE	Arresting Agency Case/Arrest Number 2026-00170185	OBTS Number 0501499693
FDLE (SID) Number	FBI Number	DOC Number	Transport Time 18:55
Location of Arrest (Include Name of Business) City CLEARLAKE RD / BELLEVIEW RD Cocoa FL 32922		Jail Date / Time 06/02/2026 20:45	Jail Booking Number 2026-00006613
Location of Offense (Business Name, Address) City S FISKE BLVD / BERNICE RD Rockledge FL 32955		Booking Agency ORI FL0050000	
Offense Date OR Date Range 06/02/2026 -- 06/02/2026	Arrest Date / Time 06/02/2026 18:19	Charge Type (Check as many as apply) Misdemeanor <input checked="" type="checkbox"/> Traffic _____ Ordinance _____	Evidence Confiscated (Check as many as apply) Vehicle _____ Firearm _____ Property _____
Name (Last, First, Middle) CORONA JAMES CASH		Alias and Type	Date of Birth 03/29/1999
			Age 27
			Jacket Number 4806786
Race B-Black	Ethnicity Non-Hispanic	Sex Male	Height 5' 2"
		Weight 130	Eye Color Black
Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description)			Hair Color Brown
Local Address (Street, Apt. Number) City, State, Zip 4725 WHITE HERON DR, Melbourne FL 32934		Phone/Type (include area code) (321)806-8555 Cellular Phone	Primary Language English <input checked="" type="checkbox"/>
Permanent Address (Street, Apt. Number) or Parent's Name if Juvenile City, State, Zip 4725 WHITE HERON DR Melbourne FL Melbourne		Phone/Type (include area code)	Complexion Dark
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 / C239500076000	Social Security Number* [REDACTED]	INS Number	Place of Birth FL
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) Alcohol <input checked="" type="checkbox"/> Computer/Handheld Device _____ Drugs <input checked="" type="checkbox"/>	
PARENT Driver's License State / Number / Type	PARENT Social Security Number	Juvenile Civil Citation Not Referred Explanation	Juvenile Facility
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*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 Resist Officer WO Viol	Counts 1	F.S. <input checked="" type="checkbox"/> Statute / Ordinance Number 843.02	Reclassifier
Drug Activity	Drug Type	Amount / Unit	Bond Amount \$,500.00 per count
			\$,500.00 Total
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 _____ day of _____ at _____ 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 06/02/2026	Officer's/Complainant's Signature Electronically Signed	ID# 5434	Officer's/Complainant's Name (Printed) Justin Sharp
Sworn and Subscribed before me, the undersigned authority this _____ day of 06/02/2026	Notary Signature Electronically Signed	Notary Name (Printed) Davis, Kylee	Notary/Law Enforcement Officer in Performance of Official Duties. Personally Known <input checked="" type="checkbox"/> ID _____
Patrol - West			Page <u>1</u> of <u>3</u>

AGENCY NAME: BREVARD COUNTY SHERIFF'S OFFICE	BREVARD COUNTY, FLORIDA	Arresting Agency Case Number 2026-00170185
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Defendant / Juvenile Name (Last, First, Middle) CORONA JAMES CASH	CBTS Number 0501499693
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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 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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Year	Make	Model	VIN	Tag / Tag State	Primary Color	Secondary Color
* If Applicable, provide information related to the vehicle involved in the crime.						

On the above listed date and time, A White Honda Civic bearing Florida tag NJQI53 was believed to have Mr. James Corona (Arrestee) in the vehicle. Mr. James Corona has an active VOP warrant. (WARRANT NO: 2025CT026464) Mr. Corona was identified to be in the vehicle based on his photograph in FCIC/NCIC. Mr. Corona was in the passenger seat of the vehicle. Corporal W. Mosebach # 4733 initiated a traffic stop at South Fiske Boulevard and Bernice Road on the vehicle by activating his emergency lights along with multiple other deputies.

K-9 Deputy A. Weimer #2156 K-9 first called out the driver of the vehicle, and she exited the vehicle as directed and back to deputies. K-9 Deputy Weimer made multiple requests for Mr. Corona to exit the vehicle from the passenger side of the vehicle. Mr. Corona refused to exit the vehicle. Deputy Weimer ordered his K-9 to be used. Mr. Corona was then taken into custody.

I then placed Mr. James Cash Corona under arrest for resisting without violence and for his active warrant.

Mr. Corona received medical attention from BCFR on scene and then later treated him at Viera Hospital.

Mr. Corona was then transported to the BCJC without incident where he was turned over to booking staff.

Officer's/Complainant's Signature Electronically Signed	ID# 5434	Officer's/Complainant's Name (Printed) Justin Sharp
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