

## COMPLAINT/ARREST AFFIDAVIT – CIRCUIT/COUNTY COURT – PINELLAS COUNTY, FLORIDA

OBTS #	REPORT # FWC25ON33755		DOCKET # 2004317														
Person ID	686827		SSN# [REDACTED]														
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 OUT OF COUNTY FELONY WARRANT (FLEEING THE SCENE OF A BOATING ACCIDENT INVOLVING INJURY)						25-06211-CF-1											
Defendant's Name (Last, First, Middle)			DOB	Sex	Race	Ht	Wt	Hair	Eyes	Skin							
KNIGHT, JEFFRY			09/29/1962			5'9	180										
Alias	DL #		State FL	Scars/Marks/Tattoos/Physical Features													
Local Address (Street, City, State, Zip Code)				Telephone		Place of Birth		Citizenship									
						UNK		US									
Permanent Address (Street, City, State, Zip Code)				Telephone		Employed by / School											
Weapon Seized Type			Indication of Drug Influence		Y	N	UNK	Indication of Mental Health Issues		Y	N	UNK	Indication of Alcohol Influence		Y	N	UNK
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>					<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>					<input type="checkbox"/> <input checked="" type="checkbox"/> <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 28 day of JULY, 2025, at approximately 6:00 PM, at CLEARWATER AIRPORT, in Pinellas County did:

PINELLAS COUNTY WARRANT

ARREST ON WARRANT/CAPIAS # 2506211CF1

I HAVE NO KNOWLEDGE OF THIS CASE

BOND: \$40,000

ISSUE DATE: 07/09/2025

ON JULY 28, 2025, I, INVESTIGATOR CLINT WILLIAMS OF THE FLORIDA FISH AND WILDLIFE CONSERVATION COMMISSION, OBSERVED AN INDIVIDUAL KNOWN TO ME THROUGH MY INVESTIGATION AS JEFFRY DAVID KNIGHT (09/29/1962). IT WAS KNOWN TO ME THAT MR. KNIGHT HAD AN ACTIVE WARRANT FOR HIS ARREST, WARRANT NUMBER 2506211CF1. I PLACED MR. KNIGHT IN HANDCUFFS WITHOUT INCIDENT. MR. KNIGHT'S IDENTITY WAS CONFIRMED VIA HIS GOVERNMENT ISSUED PASSPORT. FWC OFC. HOPPE AND I PLACED MR. KNIGHT INTO OUR PATROL VEHICLE AND TRANSPORTED HIM TO THE PINELLAS COUNTY JAIL.

WARRANT CANCELLED:

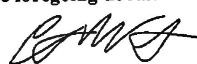
DATE: 7/28/2025 7:06:31 PM

CLERK: 60765

DEPUTY: 59901

Contrary to Florida Statute/Ordinance 901.04 - F3ARREST DATE: 7/28/2025 Time 6:00 PM . Aggravating/Mitigating Factors \_\_\_\_\_Booking Officer: KAHANEK, J 59901 Amount of Bond \$40,000 Bond Out Date \_\_\_\_\_ Time \_\_\_\_\_ ☐ a.m. ☐ p.m.Victim Notified of Advisory? ☐ Yes ☐ No Injuries to Victim? ☐ Yes ☐ No Medical Treatment to Victim? ☐ Yes ☐ NoThe 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: 7/28/2025 7:06:35 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  
OFFICER CLINT WILLIAMS N417  
Printed Name  
FLORIDA FISH & WILDLIFE  
Agency  
310756329  
Declarant ID#

REQUEST FOR INVESTIGATIVE COSTS, F.S. 938.27(1)			
DATE	OFFICER	HOURS X PAY RATE	OR COST
OTHER – Describe _____			
Continuation sheet <input type="checkbox"/> Yes <input type="checkbox"/> No			
TOTAL \$ \$0.00			

**Defendant** KNIGHT, JEFFRY **Court Case No:** 25-06211-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.

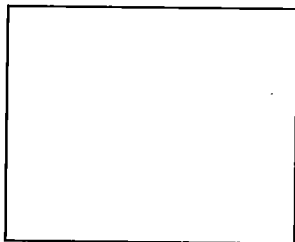
**I FURTHER CERTIFY THAT:**

- ☐ 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