

**Pasco Sheriff's Office**  
**Public Records Exemptions**

---

20-002664 #  
20-002704

Records are provided in accordance with Florida Statutes and the Public Records Law.  
The following has been redacted from your report pursuant to Florida Statute:

- Abuse Hot Line Information - FS 39.202
- Account Numbers - FS 119.071(5)b
- Active Investigation - FS 119.071(2)(c)1
- 911 Caller Information - FS 365.171(12)
- Child Abuse - FS 119.071(2)(h)1
- Confidential Informants - FS 119.071(2)(f)
- Criminal Intelligence Information - FS 119.071(2)(h)2
- David - FS 322.142(4)
- FCIC/NCIC Information - FS 943.053(2) & (3)
- Juvenile Offender Records - FS 985.04(1)
- Law Enforcement Personnel Information - FS 119.071(4)
- Marsy's Law - Victim Information - FS 119.071(2)(h)1
- Medical - FS 119.0712(1)
- Sexual Offense - FS 119.071(2)(h)1 & FS 794.024
- Social Security Number - FS 119.071(5)(5)
- Threat Assessment FS 119.071 (3)(a)1(b)
- Undercover Personnel - FS 119.071(4)c
- Other: \_\_\_\_\_

PASCO COUNTY COMPLAINT AFFIDAVIT

PSO FLO 510000 NPR PD FLO 510200 PR PD FLO 510400
DC PD FLO 510100 ZPD FLO 510300 FHP FLO 279000

Administrative: ARREST, NOTICE TO APPEAR, LOCATION OF ARREST, DATE OF ARREST, BOOKING DATE, JAIL DATE, WEAPON SEIZED, F.P.S.S. Notified, JAIL NUMBER, SPN NUMBER, FDLE NUMBER, DOC NUMBER, FBI NUMBER, Domestic Related.
Defendant: NAME (LAST, FIRST, MIDDLE), ALIAS, RACE, HISPANIC, AMERICAN INDIAN, ORIENTAL / ASIAN, CODE, SEX, DATE OF BIRTH, AGE, HEIGHT, WEIGHT, EYE COLOR, HAIR COLOR, COMPLEXION, BUILD, SCARS, MARKS, TATTOOS, ETC., PHYSICAL ADDRESS, MAILING ADDRESS, BUSINESS ADDRESS, UNEMPLOYED, DRIVERS LICENSE STATE / NUMBER, SOCIAL SECURITY NUMBER, INS NUMBER, PLACE OF BIRTH, CITIZENSHIP.
Co-Defendant: CO-DEFENDANT NAME, RACE, SEX, DATE OF BIRTH, AGE, 1. ARRESTED, 2. AT LARGE, 3. FELONY, 4. MISDEMEANOR, 5. JUVENILE, CODE.
Juvenile: PARENT, OTHER, NAME OF PARENT OR CUSTODIAN, RESIDENTIAL PHONE, BUSINESS PHONE, ADDRESS, NOTIFIED BY, DATE, TIME, JUVENILE DISPOSITION, RELEASED TO, RELATIONSHIP.
Charge: CHARGE DESCRIPTION, STATUTE VIOLATION NUMBER, NCIC #, COURT CASE #, ACTIVITY, S. SELL, R. SMUGGLE, K. DISPENSE / DISTRIBUTE, M. MANUFACTURE / PRODUCE / CULTIVATE, Z. OTHER, CODE, AMOUNT, TYPE, B. BARBITURATE, C. COCAINE, E. HEROIN, H. HALLUCINOGEN, M. MARIJUANA, O. OPIUM / DERIV, P. PARAPHERNALIA / EQUIPMENT, S. SYNTHETIC, U. UNKNOWN, Z. OTHER.
Cost Recovery: REQUEST FOR INVESTIGATIVE COSTS RECOVERY FSS 938.27(1), C.JIS # 1865, # of Investigative hrs. 15 x 26.00 = 390.00.
Probable Cause Statement: On the above listed date of incident, this affiant met with the listed witness who identified herself as [redacted]. The witness informed your affiant, on the above date at the incident location; she walked by [redacted] bedroom and observed the defendant penetrating the victim's anus with his penis (as the victim was crying). Upon this discovery, the witness removed the victim from the residence and reported it to law enforcement. Your affiant then met with the listed victim whom stated [redacted] (defendant) forced her to perform oral sex on him (described to this affiant by the victim who pointed at a [redacted]).
Notice: I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED WHEN I AM NOTIFIED 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 ONCE I AM NOTIFIED, THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED. IF CITED FOR A CIVIL INFRACTION, I AGREE TO APPEAR BEFORE THE COUNTY COURT OR COMPLY WITH THE REQUIREMENTS FOR PAYING THE FINE AND MEETING ANY OTHER SPECIFIED CONDITIONS AS INDICATED ON THE BACK SIDE OF THIS AFFIDAVIT.
Administrative: MIRANDA WARNING, HOLD FOR OTHER AGENCY, VERIFIED BY, RIGHT THUMB, DATE, VICTIM NOTIFIED, BOND CHARGE, BOND CHARGE #, BOND TYPE, RETURNABLE COURT DATE, RETURNABLE COURT TIME, RELEASE DATE, RELEASE TIME, RELEASING OFFICER, NAME (PRINTED), C.JIS #, PAGE 1 OF 2.

DEFENDANT <b>AQUILA, JOHN LELAND</b>						AGENCY REPORT NO. <b>20-002664</b>																					
CHARGE DESCRIPTION						<input type="checkbox"/> F.S. <input type="checkbox"/> CIVIL <input type="checkbox"/> ORD. <input type="checkbox"/> INF.		STATUTE VIOLATION NUMBER			NCIC #		COURT CASE #														
ACTIVITY N. N/A P. POSSESS		S. SELL B. BUY T. TRAFFIC		R. SMUGGLE D. DELIVER E. USE		K. DISPENSE/ DISTRIBUTE		M. MANUFACTURE PRODUCE / CULTIVATE		Z. OTHER		CODE		AMOUNT		TYPE N. N/A A. AMPHETAMINE		B. BARBITURATE C. COCAINE E. HEROIN		H. HALLUCINOGEN M. MARIJUANA O. OPIUM / DERIV		P. PARAPHERNALIA / EQUIPMENT S. SYNTHETIC		U. UNKNOWN Z. OTHER		CODE	
CHARGE DESCRIPTION						<input type="checkbox"/> F.S. <input type="checkbox"/> CIVIL <input type="checkbox"/> ORD. <input type="checkbox"/> INF.		STATUTE VIOLATION NUMBER			NCIC #		COURT CASE #														
ACTIVITY N. N/A P. POSSESS		S. SELL B. BUY T. TRAFFIC		R. SMUGGLE D. DELIVER E. USE		K. DISPENSE/ DISTRIBUTE		M. MANUFACTURE PRODUCE / CULTIVATE		Z. OTHER		CODE		AMOUNT		TYPE N. N/A A. AMPHETAMINE		B. BARBITURATE C. COCAINE E. HEROIN		H. HALLUCINOGEN M. MARIJUANA O. OPIUM / DERIV		P. PARAPHERNALIA / EQUIPMENT S. SYNTHETIC		U. UNKNOWN Z. OTHER		CODE	
<p>drawing of a penis and stated, [REDACTED] placed it in her mouth). The victim then informed your affiant, the defendant proceeded to penetrate her anus with his penis: [REDACTED] puts it in my butt." The victim concluded by stating, the defendant has been sexually battering her for at least a year.</p> <p>During a physical examination of the victim, the findings displayed severe injuries indicative of recently being sexually battered.</p> <p>During a controlled phone call with the listed witness [REDACTED], each time the witness confronted the defendant with the sexual battery she witnessed, the defendant responded by apologizing.</p> <p>The defendant was subsequently arrested upon making contact with him.</p>																											
* * * <i>End</i> * * *																											
ADMINISTRATIVE		UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING (DOCUMENT) AND THAT THE FACTS STATED IN IT ARE TRUE, TO THE BEST OF MY KNOWLEDGE AND BELIEF.																									
		X <i>Detective M. A. Toczykowski</i>																									
		<b>TOCZYLOWSKI, M. A.</b>												<b>1865</b>													
		NAME (PRINTED)												CJIS #													

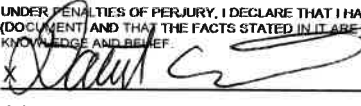
NARRATIVE / CONTINUATION

CLERK OF COURT

# PASCO COUNTY COMPLAINT AFFIDAVIT

PSO FLO 510000     NPR PD FLO 510200     PR PD FLO 510400  
 DC PD FLO 510100     ZPD FLO 510300     FHP FLO 279000

	ORTS NUMBER ARREST: <input checked="" type="checkbox"/> CHECK ALL THAT APPLY <input checked="" type="checkbox"/> 1. FELONY <input type="checkbox"/> 2. TRAFFIC FELONY <input type="checkbox"/> 3. MISD <input type="checkbox"/> 4. MISD TRAFFIC <input type="checkbox"/> 5. ORDNANCE <input type="checkbox"/> 6. OTHER <input type="checkbox"/> 7. VOP <input type="checkbox"/> 8. PROBABLE CAUSE <input type="checkbox"/> 9. CIVIL INF.	CO. ORD. CIVIL INF.	SHIRT CID	SECTOR 12	SEC.	TWP.	RING.	AGENCY REPORT NUMBER 20-002704	
ADMINISTRATIVE	LOCATION OF ARREST (INCLUDE NAME OF BUSINESS) 20101 CENTRAL BLVD, LAND O LAKES 34637								
DATE OF ARREST: 01/19/2020    TIME OF ARREST: 15:25    BOOKING DATE: 1/19/20    BOOKING TIME: 1540								WEAPON SEIZED: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO    WEAPON TYPE: NOT APPLICABLE	
JAIL NUMBER: 235336    SPN NUMBER: 00445097    FILE NUMBER:								DOC NUMBER:    FBI NUMBER: 202157RB8	
NAME (LAST, FIRST, MIDDLE): AQUILA, JOHN LELAND    ALIAS:								F.P.S.S. Notified: <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Juv. <input type="checkbox"/> Elderly <input type="checkbox"/> Handicap	
RACE: W    HISPANIC:    AGE: 33    HEIGHT: 6'00"    WEIGHT: 160    EYE COLOR: BLUE    HAIR COLOR: BROWN    COMPLEXION: MED    BUILD: MEDIU								Convicted Sexual Predator / Offender: <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
DEFENDANT	TATT CNTR CHEST / STARS; SCAR LEFT ANKL / SCAR LEFT ANKLE								
PHYSICAL ADDRESS (STREET & APT #):								PHONE: (330) 556-1602	
BUSINESS ADDRESS (NAME & STREET): UNEMPLOYED								OCCUPATION:	
DRIVER'S LICENSE STATE / NUMBER: FL A240472863630								SOCIAL SECURITY NUMBER:    INS NUMBER:    PLACE OF BIRTH: NEW PORT RICHEY, FL,    CITIZENSHIP: US	
CO-DEF	GO-DEFENDANT NAME (LAST, FIRST, MIDDLE):								
NAME OF PARENT OR CUSTODIAN (LAST, FIRST, MIDDLE):								RESIDENTIAL PHONE:	
ADDRESS (STREET, APT NUMBER):								BUSINESS PHONE:	
JUVENILE	NOTIFIED BY (NAME):    DATE:    TIME:								
RELEASED TO (NAME):    RELATIONSHIP:    DATE:    TIME:									
CHARGE DESCRIPTION: ARSON DWELLING/STRUCTURE/VEHICLE 1ST DEGREE								STATUTE VIOLATION NUMBER: 806.01.1    NCIC #: 2099    COURT CASE #: 2020CF000335AWS.1	
CHARGE DESCRIPTION: REQUEST FOR INVESTIGATIVE COSTS RECOVERY FSS 938.27(1)								STATUTE VIOLATION NUMBER:    NCIC #:    COURT CASE #:	
COST RECOVERY	C.JIS # 2861    # of Investigative hrs. 8 x 26 = 208								
THE UNDERSIGNED CERTIFIED 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 19 DAY OF January, 2020 AT 8:00 A.M.									
(SPECIFICALLY INCLUDE FACTS CONSTITUTING CAUSE FOR ARREST.)									
PROBABLE CAUSE STATEMENT	I had the privilege to investigating this case. I was advised the home owner, John Aquila was locked in his home as deputies were attempting to make contact with him, due to the fact he made suicidal statements and there was an active criminal case being investigated and John was the suspect reference case number 20-2664. While deputies were trying to get John to come out of his home, deputies observed smoke coming from a back bedroom. The home filled with smoke and John was removed from the house by deputies pulling John out of a bathroom window. Fire Rescue arrived on scene and extinguished the fire.								
* * * Continued * * *									
P.C. EXISTS FOR CHARGE(S)    JUDGE'S SIGNATURE    DATE									
NOTICE	I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED WHEN I AM NOTIFIED 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 ONCE I AM NOTIFIED, THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED. IF CITED FOR A CIVIL INFRACTION, I AGREE TO APPEAR BEFORE THE COUNTY COURT OR COMPLY WITH THE REQUIREMENTS FOR PAYING THE FINE AND MEETING ANY OTHER SPECIFIED CONDITIONS AS INDICATED ON THE BACK SIDE OF THIS AFFIDAVIT.								
SIGNATURE OF DEFENDANT / JUVENILE AND PARENT OR CUSTODIAN:									
DATE:									
ADMINISTRATIVE	MIRANDA WARNING:    HOLD FOR OTHER AGENCY:    VERIFIED BY:    RIGHT THUMB:								
BOND CHARGE # 150,000									
RETURNABLE COURT DATE:    RETURNABLE COURT TIME:									
RELEASE DATE:    RELEASE TIME:									
RELEASING OFFICER:									
NAME (PRINTED): COBIANCO, D. L.    2861    C.JIS #									

DEFENDANT <b>AQUILA, JOHN LELAND</b>						AGENCY REPORT NO. <b>20-002704</b>								
CHARGE DESCRIPTION						<input type="checkbox"/> F.S. <input type="checkbox"/> CIVIL <input type="checkbox"/> ORD. <input type="checkbox"/> INF.		STATUTE VIOLATION NUMBER			NCIC #		COURT CASE #	
ACTIVITY N. N/A P. POSSESS	S. SELL B. BUY T. TRAFFIC	R. SMUGGLE D. DELIVER E. USE	K. DISPENSE/ DISTRIBUTE	M. MANUFACTURE PRODUCE / CULTIVATE	Z. OTHER	CODE	AMOUNT	TYPE N. N/A A. AMPHETAMINE	B. BARBITURATE C. COCAINE E. HEROIN	H. HALLUCINOGEN M. MARIJUANA O. OPIUM / DERIV	P. PARAPHERNALIA / EQUIPMENT S. SYNTHETIC	U. UNKNOWN Z. OTHER	CODE	
CHARGE DESCRIPTION						<input type="checkbox"/> F.S. <input type="checkbox"/> CIVIL <input type="checkbox"/> ORD. <input type="checkbox"/> INF.		STATUTE VIOLATION NUMBER			NCIC #		COURT CASE #	
ACTIVITY N. N/A P. POSSESS	S. SELL B. BUY T. TRAFFIC	R. SMUGGLE D. DELIVER E. USE	K. DISPENSE/ DISTRIBUTE	M. MANUFACTURE PRODUCE / CULTIVATE	Z. OTHER	CODE	AMOUNT	TYPE N. N/A A. AMPHETAMINE	B. BARBITURATE C. COCAINE E. HEROIN	H. HALLUCINOGEN M. MARIJUANA O. OPIUM / DERIV	P. PARAPHERNALIA / EQUIPMENT S. SYNTHETIC	U. UNKNOWN Z. OTHER	CODE	
<p>Detective Charbonneau with the State Fire Marshal's office and I conducted the arson investigation and determined the point of origin to the fire was located in the back bedroom (south east side of home) based on fire tracking, fire patterns and going from least to most damage. There is another room located on the north side of the home. It is known as the [REDACTED] bedroom. We located a bunk bed and both mattresses had burn patterns on them. We also located a couch that was in the living and only one side of it was burned.</p> <p>I spoke with John post Miranda and he advised once the cops surrounded the home, he felt he was going to lose everything, so he did not want anyone to have anything. He said he began to set fires in the home. He said he used clothing to set both of the [REDACTED] beds on fire. He said he used clothing to set the couch on fire and he walked to their fake Christmas tree and set that on fire. He also stated the first room he set on fire was his bed that had his and [REDACTED] clothing on it. John said after he set the fires, the home filled up with smoke and he was in his bathroom. He said he did not want to die, so he was climbing out of the bathroom window and deputies pulled him out and detained him. John said he used a BIC style lighter to lite the fires and he did not use gasoline.</p> <p>John was later arrested for first degree arson to a dwelling.</p>														
* * * End * * *														
ADMINISTRATIVE	UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING (DOCUMENT) AND THAT THE FACTS STATED IN IT ARE TRUE, TO THE BEST OF MY KNOWLEDGE AND BELIEF.													
	 <b>COBIANCO, D. L.</b> NAME (PRINTED)						<b>2861</b> C.JIS #							