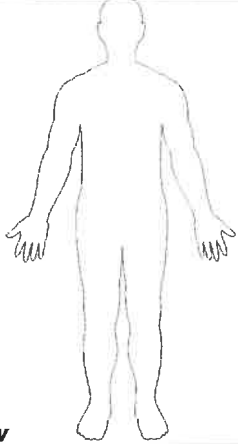
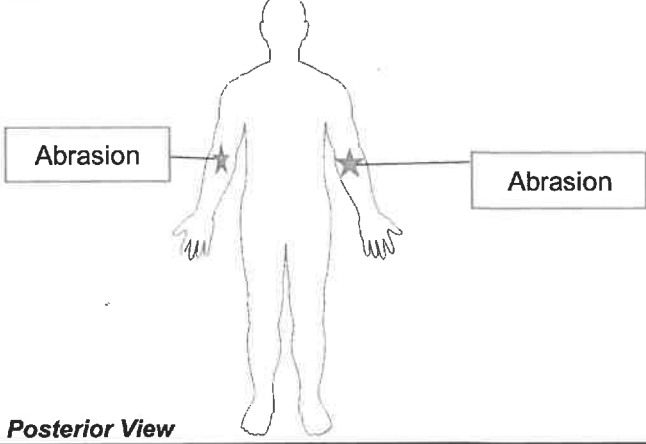
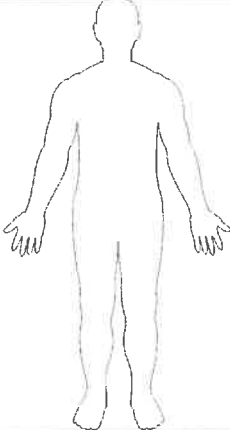
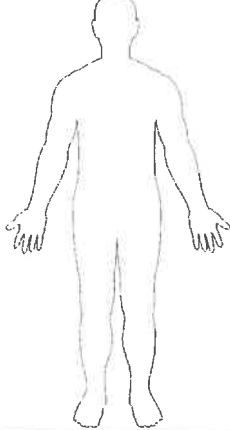


Response to Resistance Report

Key West Police Department

Case No: 23-2589

1. A Response to Resistance Report will be completed by the supervisor for: (Check all that apply)				
<input type="checkbox"/> A response through the use of non-lethal weapons, <input type="checkbox"/> Applies weaponless physical force of strikes, kicks, or "take-downs" <input type="checkbox"/> When any person sustains an apparent substantial or fatal injury as a result of the application of force <input checked="" type="checkbox"/> When any person complains of injury as a result of the application of force <input type="checkbox"/> Discharge of firearm in the line of duty off-duty or on-duty (other than for training, maintenance or ballistics testing)				
INCIDENT	2. Date: 05/02/2023 3. Time: 1910 4. Location: 1200 Truman Street 5. Incident type: S36			
	6. Resistance Level <input checked="" type="checkbox"/> Passive: _____ <input type="checkbox"/> Active: _____ <input type="checkbox"/> Aggressive: _____ <input type="checkbox"/> Deadly Force: _____	7. Explanation Non-compliant _____	8. Response Option <input checked="" type="checkbox"/> Physical Control _____ <input type="checkbox"/> Non-lethal Weapon _____ <input type="checkbox"/> Deadly Force _____	9. Explanation Escorts/Controlling _____
	10. Last Name: Llanes 11. First: Antonio 12. Race: W 13. Sex: M			
	14. DOB: 01/12/1961 15. Height: 6'02" 16. Weight: 145			
SUBJECT	17. Did you observe the subject: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If NO, explain why in Section 42. If "YES", complete sections 18-22			
	18. Appeared to be: <input checked="" type="checkbox"/> Intoxicated <input type="checkbox"/> Under the influence of controlled substance <input type="checkbox"/> Emotionally / mentally disturbed			
	19. Injuries: <input type="checkbox"/> No <input checked="" type="checkbox"/> Evident <input type="checkbox"/> Alleged (If Evident or Alleged, describe and indicate areas on charts in Section 22)			
	20. Photographed: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes 21. Treated: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes By: <input type="checkbox"/> EMT/Paramedic on scene <input type="checkbox"/> Hospital <input type="checkbox"/> Detention			
				
	22. Anterior View		Posterior View	
OFFICER	23. Officer: Josue Martinez 24. Race: W 25. Sex: M 26. Age: 31 27. Height: 5'05" 28. Weight: 222			
	29. Duty Status: <input checked="" type="checkbox"/> On-duty <input type="checkbox"/> Off-duty <input type="checkbox"/> Extra duty employment <input checked="" type="checkbox"/> Uniformed <input type="checkbox"/> Plain clothes 30. Yrs Exp: 9m			
	31. Injuries: <input checked="" type="checkbox"/> No <input type="checkbox"/> Evident <input type="checkbox"/> Alleged (If Evident or Alleged, describe and indicate areas on charts in Section 35)			
	32. Photographed: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes 33. Treated: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes By: <input type="checkbox"/> EMT/Paramedic on scene <input type="checkbox"/> Hospital			
	34. Response option used by this officer: (If TASER®, also reference line number from TASER® section)			
				
35. Anterior View		Posterior View		

Response to Resistance Report (continued)

Key West Police Department

Case No: 23-2589

TASER USE ONLY	36. TASER® device serial #		37. TASER® device serial #		
	Battery serial #		Battery serial #		
	Cartridge 1 serial #1	serial #2	Cartridge 1 serial #1	serial #2	
	Cartridge 2 serial #3	serial # 4	Cartridge 2 serial # 3	serial #4	
	Number of cycles:		Number of cycles:		
	Type of contact: <input type="checkbox"/> Probe <input type="checkbox"/> CODS <input type="checkbox"/> Drive Stun		Type of contact: <input type="checkbox"/> Probe <input type="checkbox"/> CODS <input type="checkbox"/> Drive Stun		
	Did probes penetrate skin: <input type="checkbox"/> Yes <input type="checkbox"/> No		Did probes penetrate skin: <input type="checkbox"/> Yes <input type="checkbox"/> No		
	Target distance at probe launch:		Target distance at probe launch:		
	Distance between probes:		Distance between probes:		
	Probes removed by (name):		Probes removed by (name):		
Device downloaded by:		Device downloaded by:			
<input type="checkbox"/> 38. Check and list any additional TASER® devices, cartridges or details in the incident description section.					
REPORT	39. Offense/Incident Report and/or Warrant Affidavit must include:				
	<input checked="" type="checkbox"/> All necessary criminal elements.				
	<input checked="" type="checkbox"/> All details of the arrest				
	<input checked="" type="checkbox"/> Details articulating the subject's words, mannerisms and actions that justify the use of force.				
	<input checked="" type="checkbox"/> Details outlining the response to resistance utilized by each officer.				
	<input checked="" type="checkbox"/> Detailed description of injury complaints and/or observed injuries				
<input checked="" type="checkbox"/> Details outlining the decontamination, first aid or medical treatment provided to the officer and/or subject.					
SUPERVISOR'S INQUIRY	40. Notified Date: 05/02/2023		41. Time: 1929 hours		
	42. Did you respond to the scene: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "No", explain why)				
	43. Did you watch all relevant videos associated with the use of force? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "No", explain why)				
	44. Did you meet with the Officer(s): <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "No", explain why)				
	45. During your review did you find any potential policy violations or training issues associated with the incident?				
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (If "Yes," list below)				
	46. Were you able to locate any independent witnesses: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (If "Yes," list below)				
	Name		Address		Phone Number
Sgt Nicholas Revoreco		[Signature] 2962		05/02/23	
47. Preparing Supervisor / Printed Name		48. Preparing Supervisor / Signature / ID		49. Date	
INT. AFF.	50. Did the review of this incident conclude that use of force was in compliance with Departmental policy? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes		[Signature] 3317		
			51. Signature of Internal Affairs Inspector		
				7/27/2023	
				52. Date	

INCIDENT/INVESTIGATION REPORT

Agency Name
Key West Police Department

ORI
FL0440100

Case#
23-002589

Date / Time Reported
05/02/2023 18:42 Tue

Last Known Secure
05/02/2023 18:42 Tue

At Found
05/02/2023 18:42 Tue

Location of Incident
1127 TRUMAN AVE, Key West FL 33040

Gang Relat
NO

Premise Type
Convenience Store

Beat/GP
B3, GPB3

Crime Incident(s)	(Com)	Weapon / Tools	Activity
#1 <i>Trespassing XOT</i>		Entry Exit Security	
#2 <i>Crime Incident</i>		Entry Exit Security	
#3 <i>Crime Incident</i>		Entry Exit Security	

MO

of Victims *1* Type: *BUSINESS* Injury: Domestic: *N*

V1 Victim/Business Name (Last, First, Middle)
CHEVRON

Victim of Crime # DOB *//* Race Sex Relationship To Offender Resident Status *N/A* Military Branch/Status

Home Address *1127 TRUMAN AVE, Key West, FL 33040* Email Home Phone *305-296-5669*

Employer Name/Address Business Phone Mobile Phone

VYR Make Model Style Color Lic/Lis VIN

VICTIM

CODES: V- Victim (Denote V2, V3) W1 = Witness IO = Involved Other RP = Reporting Person (if other than victim)

Type: *INDIVIDUAL* Injury:

Code *IO* Name (Last, First, Middle)
PAUL, ODSON

Victim of Crime # DOB *01/28/1995* Race *B* Sex *M* Relationship To Offender Resident Status *Resident* Military Branch/Status

Age *28*

Home Address *1213 14TH STREET LOT - 70 KEY WEST, FL 33040* Email Home Phone *305-910-9341*

Employer Name/Address *CHEVRON, 1127 TRUMAN AVE* Business Phone Mobile Phone

Type: *INDIVIDUAL* Injury:

Code *IO* Name (Last, First, Middle)
VARGAS, FLOR DE MARIA

Victim of Crime # DOB *12/22/1960* Race *W* Sex *F* Relationship To Offender Resident Status *Resident* Military Branch/Status

Age *62*

Home Address *1210 PACKER ST KEY WEST, FL 33040* Email Home Phone *305-290-9228*

Employer Name/Address *Chevron Gas Station (CLERK)* Business Phone *305-745-1564* Mobile Phone *305-393-7437*

OTHERS INVOLVED

1 = None 2 = Burned 3 = Counterfeit / Forged 4 = Damaged / Vandalized 5 = Recovered 6 = Seized 7 = Stolen 8 = Unknown
("OJ" = Recovered for Other Jurisdiction)

VI #	Code	Status Frm/To	Value	OJ	QTY	Property Description	Make/Model	Serial Number
	<i>27</i>	<i>EVID</i>	<i>\$1.00</i>		<i>0</i>	<i>4263 AXON BWC</i>		
	<i>27</i>	<i>EVID</i>	<i>\$1.00</i>		<i>1</i>	<i>4263 COBAN IN-CAR</i>		

PROPERTY

Officer/ID# *RAMOS MARTINEZ, JOSUE (4263)*

Invest ID# *(0)* Supervisor *REVOREDO, NICK (2962)*

Status Complainant Signature Case Status *Cleared By Arrest* Date *05/02/2023* Case Disposition: Page 1

INCIDENT/INVESTIGATION REPORT

Key West Police Department

Case # 23-002589

Status Codes L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found

	UCR	Status	Quantity	Type Measure	Suspected Type	Up to 3 types of activity
D R U G S						

Assisting Officers
REVOREDO, N. (2962), THORNBRUGH, E. (4303)

Suspect Hate / Bias Motivated:

NARRATIVE

REPORTING OFFICER NARRATIVE

Key West Police Department

		OCA 23-002589
Victim CHEVRON	Offense TRESPASSING	Date / Time Reported Tue 05/02/2023 18:42

-- Antonio Angel Llanes Arrest Narrative:

On 5/02/2023, at approximately 19:00 hours, I (Officer Josue Ramos) was dispatched to the call of a suspicious incident at 1127 Truman Ave (Chevron gas Station).

I arrived and met with the staff at the Chevron Gas station. I met with two employees, Flor De Maria Vargas D.O.B 12/22/1960 (later identified by her Florida Driver's License) and Paul Odson D.O.B 01/28/1995 (later identified by his Florida Driver's License). Vargas and Odson advised me that a male subject had been harassing them prior to my arrival. Vargas and Odson stated they warned the male multiple times to leave and not enter the Chevron. Vargas and Odson stated the male did not listen and continued into the gas station passed them. Vargas stated the male had insulted her as he entered. Vargas stated the male grabbed something then threw some change on the counter as he exited the Chevron. Vargas stated that she now fears coming back to work at the Chevron and wants to quit her job because of the male's actions towards her. I asked Vargas and Odson where the male was. Vargas stated he was across the street at the Harvey Government Center (1200 Truman Ave). I asked Vargas if she wanted the male trespassed from the location. Vargas stated yes, she did.

Officer Elam Thornbrugh arrived to assist.

I located the suspect standing on the sidewalk in front of the Harvey Government Center. Officer Thornbrugh and I detained the suspect and questioned him about what had occurred. I read the suspect, identified as Antonio Angel Llanes D.O.B 01/12/1961, his Miranda Rights. I asked Llanes if he wanted to continue to speak to me. Llanes stated he did.

Officer E. Thornburgh and I searched Llanes for Officer safety and did not find anything on Llanes person.

Officer E. Thornburgh and I questioned Llanes as to what happened inside the Chevron. Llanes stated nothing happened, and that he just got in an argument with the employees. I asked Llanes what the employees told him and Llanes could not give me an answer, instead Llanes rambled and mumbled about the time of day it was and how confused and sorry he was about the incident.

As I spoke to Llanes I observed the smell of alcohol emanating from his breathe. I observed Llanes could not maintain his balance, so I asked him to sick on a curb near the sidewalk. I again asked Llanes to tell me what had occurred in the Chevron with the employees. Llanes became animated and sprung up from his seated position. I placed my left hand on Llanes shoulder to prevent him from moving towards Officer E. Thornburgh and I. As I placed my hand on Llanes, he fell over from a seated position onto the ground. I assisted Llanes back to his seat on the curb. I observed Llanes to have a minor cut on his elbow after I assisted him back to his seat. I advised my Supervisor Sergeant Nick Revoredo of what had occurred.

I asked Llanes if he needed any medical attention. Llanes stated that he did not need medical attention.

Sergeant N. Revoredo arrived and took images of Llanes to document for an ROI.

Upon further investigation into Llanes through RMS I found he has multiple Trespass Warnings from 1127 Truman Ave by other KWPD Officers. He has warnings on these dates: 05/31/20, 07/13/22, 08/21/22.

I placed Llanes under arrest. Officer E. Thornburgh and I walked Llanes over to my marked Key West Police

REPORTING OFFICER NARRATIVE

Key West Police Department

OCA
23-002589
Date / Time Reported
Tue 05/02/2023 18:42

Victim	Offense	Date / Time Reported
CHEVRON	TRESPASSING	Tue 05/02/2023 18:42

Department Patrol Vehicle. I placed Llanes into the back of my patrol vehicle.

Since Antonio Angel Llanes was asked to leave multiple times by the employees at 1127 Truman Ave (Chevron Gas Station), and since Llanes continued into the store after warning to leave and did not listen to the employees putting them in fear of their safety after hailing insults towards them, and since Llanes has multiple trespass warnings from the location I find Antonio Angel Llanes to be in violation of FSS 810.09-2B.

My Axon BWC was activated for the incident and later uploaded to Evidence.com.

My COBAIN in-car camera was activated and later uploaded to Evidence.com.

I transported Llanes to Monroe County Detention Center for processing without incident.

I had no further involvement with the incident.

=====

Incident Report Suspect List

Key West Police Department

OCA: 23-002589

1	Name (Last, First, Middle) <i>LLANES, ANTONIO ANGEL</i>					Also Known As					Home Address <i>1 GENERAL DELIVERY KEY WEST, FL 33040 305-360-0710</i>					
	Business Address <i>UNEMPLOYED, UNEMPLOYED, UNEMPLOYED</i>															
DOB <i>01/12/1961</i>		Age <i>62</i>	Race <i>W</i>	Sex <i>M</i>	Eth <i>H</i>	Hgt <i>601</i>	Wgt <i>175</i>	Hair <i>BLK</i>	Eye <i>BRO</i>	Skin <i>MED</i>	Driver's License / State <i>L520001610120 FL</i>					
Scars, Marks, Tattoos, or other distinguishing features																
Reported Suspect Detail																
Suspect Age		Race	Sex	Eth	Height			Weight			SSN					
Weapon, Type		Feature		Make		Model			Color		Caliber		Dir of Travel Mode of Travel			
Veh Yr / Make / Model			Drs	Style		Color		Lic Plate / State				VIN				
Notes										Physical Char						

OCA: 23002589

THE INFORMATION BELOW IS CONFIDENTIAL - FOR USE BY AUTHORIZED PERSONNEL ONLY

Investigator: THORNBRUGH, ELAM (4303)

Date / Time: 05/03/2023 02:21:08, Wednesday

Supervisor: REVOREDO, NICK (2962)

Supervisor Review Date / Time: 05/03/2023 03:23:55, Wednesday

Contact:

Reference: General Supplemental Report

On 5/2/2023 I Officer Thornbrugh was dispatched to Chevron on Truman Ave in reference to a battery that had already occurred.

Upon arrival I met with Officer Ramos who informed me that a male subject battered two Chevron employees. Ofc. Ramos informed me the subject was on Truman Ave in front the Harvey Government Center, I relocated and went out with the subject. I identified the subject as Antonio Llanes from previous law enforcement encounters. Llanes was extremely intoxicated, and continuously argued with me and Ofc. Ramos. Ofc. Ramos detained Llanes and sat him on an adjacent curb. Llanes became excited and jumped to his feet, Ofc. Ramos put his hand on Llanes to prevent him from falling forward, Llanes sat down on the curb but fell off striking his elbow on the ground.

I relocated to Chevron. I spoke with the employee Flor who informed me of the following.

I saw Llanes trying to steal something, I got in front of him and told him to leave. Llanes pushed me then pushed my coworker. Llanes proceeded to the counter where he placed twenty cents before exiting the store.

Flor informed she is in fear of Llanes and that he continuously harasses her at her place of employment.

BWC (4303) was activated.

Investigator Signature: _____

