

ARREST  SWORN COMPLAINT  HOLD

# EIGHTH JUDICIAL CIRCUIT

GPA  JUVENILE  NOTICE TO APPEAR

4-8-4

OBJ'S NUMBER: <b>0108061516</b>	AGENCY CASE REPORT NUMBER: <b>02-23-016192</b>
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NAME OF SUBJECT (LAST, FIRST, MI): <b>GUIDER, TERRY TYRONE</b>		ALIAS / MAIDEN:	
911 HOME ADDRESS (STREET, APARTMENT NUMBER, ETC.): <b>1825 NW 42ND AVE</b>	CITY: <b>GAINESVILLE</b>	STATE: <b>FL</b>	ZIP CODE: <b>32605</b>
BUSINESS / SCHOOL ADDRESS (STREET, APARTMENT NUMBER, PO BOX, ETC.):		TELEPHONE NUMBER: <b>(352) 415-5175</b>	

MAILING ADDRESS (PO BOX, ETC. IF DIFFERENT THAN 911 ADDRESS):		SCARS, MARKS, TATTOOS, FACIAL HAIR, UNIQUE PHYSICAL FEATURES (LOCATION, TYPE, DESCRIPTION):							
RACE: <input checked="" type="checkbox"/> WHITE <input type="checkbox"/> BLACK <input type="checkbox"/> AMERICAN INDIAN <input type="checkbox"/> ASIAN / ORIENTAL	SEX: <b>M</b>	DATE OF BIRTH: <b>02/24/1977</b>	HEIGHT: <b>5'11</b>	WEIGHT: <b>200</b>	HAIR COLOR: <b>BALD</b>	EYE COLOR: <b>BROWN</b>	COMPLEXION: <b>MEDIUM</b>	BUILD:	
DRIVERS LICENSE / STATE ID NUMBER: <b>G360818770640</b>	STATE OF DL / ID: <b>FL</b>	SOCIAL SECURITY NUMBER: [REDACTED]	PHOTO NUMBER:	PLACE OF BIRTH: <b>Florida</b>	COUNTRY OF CITIZENSHIP: <b>UNITED STATES OF AMERICA</b>			SUBJECT'S OCCUPATION:	
SUBJECT'S OCCUPATION:		SPN NUMBER:	AGENCY ORI NUMBER: <b>0010100</b>	SO ID / AGENCY ID / NUMBER:	BOOKING NUMBER: <b>23-006325</b>		LOCATION OF ARREST: <b>1825 NW 42ND AVE</b>		
DATE OF ARREST: <b>10/09/2023</b>		TIME OF ARREST (MILITARY): <b>19:51</b>	DATE OF BOOKING: <b>10/09/2023</b>	TIME OF BOOKING (MILITARY): <b>20:10</b>		SUBJECT IDENTIFIED BY WHOM (VICTIM, WITNESS, LEO, ETC.): <b>SUTTON, ISAAC</b>			
SUBJECT IDENTIFIED BY WHOM (VICTIM, WITNESS, LEO, ETC.): <b>SUTTON, ISAAC</b>		SUBJECT'S NAME VERIFIED BY (PHOTO ID, FAMILY MEMBER, KNOWN TO OFFICER, ETC.): <b>FL ID</b>							

#1 (NAME):	DATE OF BIRTH:	RACE:	SEX:	COURT NUMBER:	<input type="checkbox"/> ARRESTED <input type="checkbox"/> SWORN COMPLAINT <input type="checkbox"/> NTA	<input type="checkbox"/> FELONY <input type="checkbox"/> MISDEMEANOR <input type="checkbox"/> TRAFFIC CASE	<input type="checkbox"/> JUVENILE: <input type="checkbox"/> YES <input type="checkbox"/> NO		
	#2 (NAME):	DATE OF BIRTH:	RACE:	SEX:	COURT NUMBER:	<input type="checkbox"/> ARRESTED <input type="checkbox"/> SWORN COMPLAINT <input type="checkbox"/> NTA	<input type="checkbox"/> FELONY <input type="checkbox"/> MISDEMEANOR <input type="checkbox"/> TRAFFIC CASE	<input type="checkbox"/> JUVENILE: <input type="checkbox"/> YES <input type="checkbox"/> NO	
JUVENILE DISPOSITION: <input type="checkbox"/> RELEASED TO JAC <input type="checkbox"/> ISSUED NTA AND RELEASED		NAME OF PARENT / GUARDIAN (NOT PARENT / GUARDIAN HOME ADDRESS (STREET, APARTMENT #, PO BOX, E)		STATE: <b>FL</b>		ZIP CODE: <b>32605</b>		HOME TELEPHONE NUMBER:	
PARENT / GUARDIAN HOME ADDRESS (STREET, APARTMENT #, PO BOX, E)		ADDRESS:		ADDRESS:		ADDRESS:		ADDRESS:	
<b>012023CF003188A</b>		<b>1824 NW 42ND AVE, GAINESVILLE FL 32605</b>		<b>1824 NW 42ND AVE, GAINESVILLE FL 32605</b>		<b>1824 NW 42ND AVE, GAINESVILLE FL 32605</b>		<b>(352) 678-7367</b>	

#1 (NAME): <b>CEGLIA, TYANNA CHRISTINE</b>	ADDRESS: <b>1824 NW 42ND AVE, GAINESVILLE FL 32605</b>	TELEPHONE NUMBER: <b>(352) 678-7367</b>
#2 (NAME): <b>CEGLIA, JASON ALEXANDER</b>	ADDRESS: <b>1824 NW 42ND AVE, GAINESVILLE FL 32605</b>	TELEPHONE NUMBER: <b>(352) 678-7367</b>
OFFENSE DESCRIPTION: <b>ANIMAL CRUELTY FELONY</b>	<input checked="" type="checkbox"/> FELONY <input type="checkbox"/> MISDEMEANOR <input type="checkbox"/> TRAFFIC <input type="checkbox"/> NTA	COMPLETE STATUTE / ORDINANCE NUMBER: <b>828-12(2)</b>
<input type="checkbox"/> WARRANT <input type="checkbox"/> JUVENILE PU ORDER <input type="checkbox"/> CIVIL ORDER <input type="checkbox"/> CITATION	DATE OF OFFENSE: <b>10/09/2023</b>	TIME OF OFFENSE: <b>20:26</b>
VICTIM (NAME): <b>The State Of Florida</b>	ADDRESS (STREET, APARTMENT NUMBER, PO BOX, ETC.):	CITY:
STATE: <b>FL</b>	ZIP CODE:	VICTIM'S TELEPHONE NUMBER:

OFFENSE DESCRIPTION:	<input type="checkbox"/> FELONY <input type="checkbox"/> MISDEMEANOR <input type="checkbox"/> TRAFFIC <input type="checkbox"/> NTA	COMPLETE STATUTE / ORDINANCE NUMBER:	VICTIM NOTIFICATION: ARREST: <input type="checkbox"/> YES <input type="checkbox"/> NO RELEASE: <input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> WARRANT <input type="checkbox"/> JUVENILE PU ORDER <input type="checkbox"/> CIVIL ORDER <input type="checkbox"/> CITATION	DATE OF OFFENSE:	TIME OF OFFENSE:	VICTIM'S TELEPHONE NUMBER:
VICTIM (NAME):	ADDRESS (STREET, APARTMENT NUMBER, PO BOX, ETC.):	CITY:	STATE:
STATE:	ZIP CODE:	VICTIM'S TELEPHONE NUMBER:	

THE FOLLOWING INCIDENT OCCURRED AT (ADDRESS / LOCATION): <b>1825 NW 42ND AVE</b>	CITY OF: <b>GAINESVILLE</b>	COUNTY OF: <b>ALACHUA</b>	STATE OF: <b>FLORIDA</b>
On Sunday 10/01/2023, the DEF willfully and intentionally poured antifreeze inside a can of cat food and intentionally placed the cat food in his yard, causing WIT 1 and WIT 2 cat to be poisoned, which was the cause of the cat's death. The DEF was upset with WIT 1 and WIT 2 cats coming onto his property and scratching his vehicle. WIT 1 and WIT 2 are the actual owners of the cat, but they left them at their residence on Sunday, 10/01/2023, as their friend was house-sitting.			
On 10/01/2023, Ring cameras showed the DEF walking to WIT 1 and WIT 2 residences. The			

<input type="checkbox"/> MANDATORY APPEARANCE IN COURT AT:	DATE OF APPEARANCE:	TIME OF APPEARANCE: <input type="checkbox"/> AM <input type="checkbox"/> PM
I AGREE AND PROMISE TO COMPLY AND ANSWER TO THE CHARGES AND INSTRUCTIONS SPECIFIED IN THIS NOTICE TO APPEAR. WILLFUL REFUSAL TO ACCEPT AND SIGN THIS NOTICE TO APPEAR MAY RESULT IN PHYSICAL ARREST. I UNDERSTAND MY SIGNATURE IS NOT AN ADMISSION OF GUILT OR WAIVER OF MY RIGHTS.	DEFENDANT (SIGNATURE):	DATE:

SWORN TO AND SUBSCRIBED BEFORE ME THIS: <b>9</b> DAY OF <b>October</b> <b>2023</b>	I SWEAR THE ABOVE, AND REVERSE AND ATTACHED PAGES AND STATEMENTS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.
SIGNATURE: <i>[Signature]</i>	NAME (PRINT): <b>SUTTON, ISAAC E.</b>
TITLE:	SIGNATURE: <i>[Signature]</i>
	AGENCY: <b>GAINESVILLE POLICE DEPARTMENT</b> LEO ID NUMBER: <b>1158</b>

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# SUPPLEMENT EIGHTH JUDICIAL CIRCUIT

OBTS NUMBER:  
AGENCY ORI NUMBER:  
**0010100**

SPN NUMBER:  
AGENCY CASE REPORT NUMBER:  
**02-23-016192**

NAME OF SUBJECT (LAST, FIRST, MI): **GUIDER, TERRY TYRONE** ALIAS / MAIDEN:  
RACE:  WHITE  AMERICAN INDIAN  BLACK  ASIAN / ORIENTAL SEX: **M** DATE OF BIRTH: **02/24/1977** HEIGHT: **5'11** WEIGHT: **200** JAIL NUMBER: SO ID / AGENCY ID / NUMBER:

WITNESSES  
#3 (NAME): ADDRESS: TELEPHONE NUMBER:  
#4 (NAME): ADDRESS: TELEPHONE NUMBER:

CHARGE  
OFFENSE DESCRIPTION:  FELONY  MISDEMEANOR  TRAFFIC  NTA COMPLETE STATUTE / ORDINANCE NUMBER: VICTIM NOTIFICATION: ARREST:  YES  NO RELEASE:  YES  NO  
 WARRANT  JUVENILE PU ORDER  CIVIL ORDER  CITATION DATE OF OFFENSE: TIME OF OFFENSE: BAIL AMOUNT: VICTIM'S TELEPHONE NUMBER:  
 CAPIAS NUMBER: VICTIM (NAME): ADDRESS (STREET, APARTMENT NUMBER, PO BOX, ETC.): CITY: STATE: ZIP CODE:

CHARGE  
OFFENSE DESCRIPTION:  FELONY  MISDEMEANOR  TRAFFIC  NTA COMPLETE STATUTE / ORDINANCE NUMBER: VICTIM NOTIFICATION: ARREST:  YES  NO RELEASE:  YES  NO  
 WARRANT  JUVENILE PU ORDER  CIVIL ORDER  CITATION DATE OF OFFENSE: TIME OF OFFENSE: BAIL AMOUNT: VICTIM'S TELEPHONE NUMBER:  
 CAPIAS NUMBER: VICTIM (NAME): ADDRESS (STREET, APARTMENT NUMBER, PO BOX, ETC.): CITY: STATE: ZIP CODE:

CHARGE  
OFFENSE DESCRIPTION:  FELONY  MISDEMEANOR  TRAFFIC  NTA COMPLETE STATUTE / ORDINANCE NUMBER: VICTIM NOTIFICATION: ARREST:  YES  NO RELEASE:  YES  NO  
 WARRANT  JUVENILE PU ORDER  CIVIL ORDER  CITATION DATE OF OFFENSE: TIME OF OFFENSE: BAIL AMOUNT: VICTIM'S TELEPHONE NUMBER:  
 CAPIAS NUMBER: VICTIM (NAME): ADDRESS (STREET, APARTMENT NUMBER, PO BOX, ETC.): CITY: STATE: ZIP CODE:

CHARGE  
OFFENSE DESCRIPTION:  FELONY  MISDEMEANOR  TRAFFIC  NTA COMPLETE STATUTE / ORDINANCE NUMBER: VICTIM NOTIFICATION: ARREST:  YES  NO RELEASE:  YES  NO  
 WARRANT  JUVENILE PU ORDER  CIVIL ORDER  CITATION DATE OF OFFENSE: TIME OF OFFENSE: BAIL AMOUNT: VICTIM'S TELEPHONE NUMBER:  
 CAPIAS NUMBER: VICTIM (NAME): ADDRESS (STREET, APARTMENT NUMBER, PO BOX, ETC.): CITY: STATE: ZIP CODE:

PROSECUTIVE SUMMARY - CONTINUED  
DEF stated on camera, "I will kill your cat if they come on my property again." WIT 1 responded to the DEF via the Ring app and told the DEF, "Please leave my yard." WIT 1 and the DEF got into an argument that day. The DEF left the property after being asked to do so.  
On 10/02/2023, WIT 1 and WIT 2 returned home and found their cat deceased on their property. On 10/03/2023, UF Small Animal Hospital performed an autopsy, which the Diagnosis showed the cat had suspected Ethylene Glycol Toxicity.  
Alachua County Animal Resources and Care has a case report number; please see CR (C0008231935) for further information.  
Post Miranda, The DEF stated that on 10/01/2023, he did go to WIT 1 and WIT 2 residence to confront them about their cat. The DEF then admitted that he would kill their cat if the cat came onto his property again. The DEF stated he would poison them if it happened again. The DEF admitted he was told by his brother to put antifreeze inside cat food and place it in the yard to keep them away.  
I identified the DEF by his FL DL Photo.

CLERK OF COURT  
ALACHUA COUNTY, FL  
OCT 11 2023  
7:55