

**VOLUSIA COUNTY COURT ACTION FORM**

**CASE:** 2023 102216 CFDL  
**STATE OF FLORIDA**  
**VS**  
**MICHAEL T WEBB**  
**PSBD**  
**SPN:** 969594  
**TRIAL DATE:** \_\_\_\_\_

**COURT/SESSION TYPE:** Sentencing  
**DATE:** 06/27/2025  
**TIME:** 09:00 AM  
**JUDGE:** FOXMAN Div. 08  
**ATTY:** RICHARD E ZALESKI JR  
**BNA:** ALLIANCE BAIL BONDS  
**LOCATION:** DeLand Courtroom 4B, 101 N ALABAMA AVENUE, DELAND, FLORIDA

**Laura E. Roth**  
**CLERK OF THE CIRCUIT COURT**  
**VOLUSIA COUNTY, FLORIDA**  
**P.O. BOX 6043**  
**DELAND, FL 32721-6043**

<b>PARTIES PRESENT</b>	<b>RELEASE ACTIONS</b>	<b>Custody/Capias/Estreat</b>	<b>Continued To:</b> <input type="checkbox"/> By Def. <input type="checkbox"/> By State <input type="checkbox"/> By Court <input type="checkbox"/> Waived Spdy.Trt
<input checked="" type="checkbox"/> DEF. APPEARED <input checked="" type="checkbox"/> APP.W/COUNSEL <input type="checkbox"/> DEF. COUNSEL APP. W/OUT DEF. <input type="checkbox"/> DEF. FAILED TO APPEAR	<input type="checkbox"/> TOTAL BOND FOR CASE SET <input type="checkbox"/> AT \$ _____ <input type="checkbox"/> DEF. ROR'D <input type="checkbox"/> RELEASE TO PTS <input type="checkbox"/> RELEASE TO PTS W/BOND <input type="checkbox"/> OTHER: _____ <input type="checkbox"/> NO CONTACT W/VICTIM <input type="checkbox"/> NO VIOL.CONTACT W/VICTIM <input type="checkbox"/> OTHER:	<input type="checkbox"/> CAPIAS ISSUED-BOND SET <input type="checkbox"/> AT \$ _____ <input type="checkbox"/> BOND ESTREATED <input type="checkbox"/> DO NOT ESTREAT BOND <input type="checkbox"/> CAPIAS WITHDRAWN <input type="checkbox"/> BOND REINSTATED <input type="checkbox"/> BOND ESTR. SET ASIDE <input type="checkbox"/> OTHER: <input type="checkbox"/> HOLD CAPIAS-PTS INVEST. <input type="checkbox"/> 48 HRS	<b>REMARKS:</b> <b>SENTENCING- PLEA TAKEN ON 05/07/2025</b> <b>COURT TAKES NOTICE OVER DIN #58</b>  <b>**DEFENDANT REMANDED INTO CUSTODY TO SERVE SENTENCE **</b> <b>COURT FINDS GROUNDS FOR DOWNWARD DEPARTURE- ORDER TO FOLLOW STATE WAIVES 3 YR MIN/MAN.</b> <b>THE FIRST 90 DAYS OF COMMUNITY CONTROL TO BE SERVED IN VCBJ</b> <b>DEFENDANT TO REPORT TO COMMUNITY CONTROL BY NOON THE DAY OF RELEASE</b> <b>NO WEAPONS OR FIREARMS IN HOUSEHOLD OR POSSESSION</b> <b>CONTINUE MENTAL HEALTH TREATMENT IN VA</b> <b>MUST SEND BOTH DEPUTIES A WRITTEN APOLOGY</b> <b>FORFEIT ALL ITEMS IN EVIDENCE</b>
<b>ATTORNEY STATUS</b>			
<input type="checkbox"/> APP. IND. STATUS - PD APPT. <input type="checkbox"/> APP. IND. STATUS - NOT INDIGENT <input type="checkbox"/> PD APPT. BY COURT <input type="checkbox"/> DEF. TO RETAIN COUNSEL <input type="checkbox"/> PD WITHDREW <input type="checkbox"/> ATTY.TO BE APPT <input checked="" type="checkbox"/> OTHER: <b>ASA MEGARO</b> <input type="checkbox"/> OTHER:			

CT. CHARGE	COURT ACTION	INCARCERATION/PROBATION/COMMUNITY CONTROL INFORMATION	COSTS
1 AGG.ASSAULT LAW ENFORCEMENT OFFICER-FIREARM (NOLO) Statute: 784.07(2)(c) LVL:F DEG:S	<input type="checkbox"/> N.G.PLEA <input type="checkbox"/> NO INFO. <input type="checkbox"/> GUILTY PLEA <input type="checkbox"/> NOLLE PROSS. <input type="checkbox"/> NOLO PLEA <input type="checkbox"/> DISMISSED <input type="checkbox"/> NG.VERDICT <input type="checkbox"/> JGMT ACQT. <input type="checkbox"/> GLTY.VERDICT <input type="checkbox"/> ADJ.WITHHELD <input type="checkbox"/> MISTRIAL <input checked="" type="checkbox"/> ADJ.GUILTY <input type="checkbox"/> ADMIT <input type="checkbox"/> DENY : VOP/VOCC  <input type="checkbox"/> WAIVED PSI <input type="checkbox"/> PSI ORDERED <input type="checkbox"/> PDR ORDERED <input type="checkbox"/> TO BE SENT:	<input checked="" type="checkbox"/> VCJ MO <u>90</u> DY <input type="checkbox"/> PROB.REVOKED <input type="checkbox"/> DOC YR _____ MO _____ DY <input type="checkbox"/> C.C. REVOKED <input checked="" type="checkbox"/> JAIL CREDIT TIME: <u>3</u> DY <input type="checkbox"/> PROB. REINSTATE <input checked="" type="checkbox"/> PROB <b>F/B 3</b> YR _____ MO _____ DY <input type="checkbox"/> C.C. REINSTATE <input checked="" type="checkbox"/> COM.CONT. <u>2</u> YR _____ MO _____ <input type="checkbox"/> PROB. MODIFIED <input type="checkbox"/> DRUG OFFENDER <input type="checkbox"/> SEX OFFENDER <input type="checkbox"/> C.C. MODIFIED <input checked="" type="checkbox"/> CONCURRENT <input type="checkbox"/> CONSECUTIVE TO: _____ <input type="checkbox"/> _____ HRS.COM. SERVICE <input checked="" type="checkbox"/> STANDARD COND. <input checked="" type="checkbox"/> SUBST.ABUSE COUNSEL/TREAT. <input type="checkbox"/> PREVIOUS COND. <input checked="" type="checkbox"/> RANDOM U/A <input checked="" type="checkbox"/> NO ALCOHOL/ILL.DRUG <input type="checkbox"/> COS WAIVED <input type="checkbox"/> MAY CONVERT CRT COST TO CS \$ _____ PER HOUR <input type="checkbox"/> PROB. TERMINATED	CRT. COSTS \$ <b>770.00</b> FINE \$ _____ PD FEE \$ _____ SAO FEE \$ <b>100.00</b> LEO FEE \$ <b>100.00</b> PD APP.FEE _____ REST. \$ _____ OTHER: _____ <input type="checkbox"/> CONVRT. FINE/COST JDGMT <input type="checkbox"/> PREVIOUS COST TO JDGMT
AMENDED CHARGE:			
BOND SET AT \$ _____			
2 AGG.ASSAULT LAW ENFORCEMENT OFFICER-FIREARM (NOLO) Statute: 784.07(2)(c) LVL:F DEG:S	<input type="checkbox"/> N.G.PLEA <input type="checkbox"/> NO INFO. <input type="checkbox"/> GUILTY PLEA <input type="checkbox"/> NOLLE PROSS. <input type="checkbox"/> NOLO PLEA <input type="checkbox"/> DISMISSED <input type="checkbox"/> NG.VERDICT <input type="checkbox"/> JGMT ACQT. <input type="checkbox"/> GLTY.VERDICT <input type="checkbox"/> ADJ.WITHHELD <input type="checkbox"/> MISTRIAL <input checked="" type="checkbox"/> ADJ.GUILTY <input type="checkbox"/> ADMIT <input type="checkbox"/> DENY : VOP/VOCC  <input type="checkbox"/> WAIVED PSI <input type="checkbox"/> PSI ORDERED: <input type="checkbox"/> PDR ORDERED <input type="checkbox"/> TO BE SENT:	<input checked="" type="checkbox"/> VCJ MO <u>90</u> DY <input type="checkbox"/> PROB.REVOKED <input type="checkbox"/> DOC YR _____ MO _____ DY <input type="checkbox"/> C.C. REVOKED <input checked="" type="checkbox"/> JAIL CREDIT TIME: <u>3</u> DY <input type="checkbox"/> PROB. REINSTATE <input checked="" type="checkbox"/> PROB <b>F/B 3</b> YR _____ MO _____ DY <input type="checkbox"/> C.C. REINSTATE <input checked="" type="checkbox"/> COM.CONT. <u>2</u> YR _____ MO _____ <input type="checkbox"/> PROB. MODIFIED <input type="checkbox"/> DRUG OFFENDER <input type="checkbox"/> SEX OFFENDER <input type="checkbox"/> C.C. MODIFIED <input checked="" type="checkbox"/> CONCURRENT <input type="checkbox"/> CONSECUTIVE TO: _____ <input type="checkbox"/> _____ HRS.COM. SERVICE <input checked="" type="checkbox"/> STANDARD COND. <input checked="" type="checkbox"/> SUBST.ABUSE COUNSEL/TREAT. <input type="checkbox"/> PREVIOUS COND. <input checked="" type="checkbox"/> RANDOM U/A <input checked="" type="checkbox"/> NO ALCOHOL/ILL.DRUG <input type="checkbox"/> COS WAIVED <input type="checkbox"/> MAY CONVERT CRT COST TO CS \$ _____ PER HOUR <input type="checkbox"/> PROB. TERMINATED	CRT. COSTS \$ _____ FINE \$ _____ PD FEE \$ _____ SAO FEE \$ _____ LEO FEE \$ _____ PD APP.FEE \$ _____ REST. \$ _____ OTHER: _____ <input type="checkbox"/> CONVRT. FINE/COST JDGMT <input type="checkbox"/> PREVIOUS COST TO JDGMT
AMENDED CHARGE:			
BOND SET AT \$ _____			

6/27/2025 1:28 PM

  
 KAREN A FOXMAN

ASSISTANT STATE ATTORNEY

**Laura E. Roth, Clerk of the Circuit Court**

Filed in Open Court this 27 day of June, 2025

/S/ SHELBY J MULLEN  
 DEPUTY CLERK IN ATTENDANCE

**VOLUSIA COUNTY COURT ACTION FORM**

CASE: 2023 102216 CFDL

DATE: 06/27/2025

COURT/SESSION TYPE: Sentencing

STATE OF FLORIDA

TIME: 09:00 AM

JUDGE: FOXMAN Div. 08

VS

MICHAEL T WEBB

SPN: 969594

**PSBD**

CT.	CHARGE		COURT ACTION	INCARCERATION/PROBATION/COMMUNITY CONTROL INFORMATION	COSTS	
3	SHOOTING WITHIN BUILDING Statute: 790.19	(NOLO) LVL:F DEG:S	<input type="checkbox"/> N.G.PLEA <input type="checkbox"/> GUILTY PLEA <input type="checkbox"/> NOLO PLEA <input type="checkbox"/> NG.VERDICT <input type="checkbox"/> GLTY.VERDICT <input type="checkbox"/> MISTRIAL <input type="checkbox"/> ADMIT <input type="checkbox"/> DENY : VOP/VOCC <input type="checkbox"/> NO INFO. <input type="checkbox"/> NOLLE PROSS. <input type="checkbox"/> DISMISSED <input type="checkbox"/> JGMT ACQT. <input type="checkbox"/> ADJ.WITHHELD <input checked="" type="checkbox"/> ADJ.GUILTY <input type="checkbox"/> PDR ORDERED <input type="checkbox"/> TO BE SENT:	<input checked="" type="checkbox"/> VCJ <u>90</u> MO <u>3</u> DY <input type="checkbox"/> DOC _____ YR _____ MO _____ DY <input checked="" type="checkbox"/> JAIL CREDIT TIME: <u>3</u> DY <input checked="" type="checkbox"/> PROB <u>F/B 3</u> YR _____ MO _____ DY <input checked="" type="checkbox"/> COM.CONT. <u>2</u> YR _____ MO _____ <input type="checkbox"/> DRUG OFFENDER <input type="checkbox"/> SEX OFFENDER <input checked="" type="checkbox"/> CONCURRENT <input type="checkbox"/> CONSECUTIVE TO: _____ <input type="checkbox"/> _____ HRS.COM. SERVICE <input checked="" type="checkbox"/> SUBST.ABUSE COUNSEL/TREAT. <input checked="" type="checkbox"/> RANDOM U/A <input checked="" type="checkbox"/> NO ALCOHOL/LL.DRUG <input type="checkbox"/> MAY CONVERT CRT COST TO CS \$ _____ PER HOUR	<input type="checkbox"/> PROB.REVOKED <input type="checkbox"/> C.C. REVOKED <input type="checkbox"/> PROB. REINSTATE <input type="checkbox"/> C.C. REINSTATE <input type="checkbox"/> PROB. MODIFIED <input type="checkbox"/> C.C. MODIFIED <input checked="" type="checkbox"/> STANDARD COND. <input type="checkbox"/> PREVIOUS COND. <input type="checkbox"/> COS WAIVED <input type="checkbox"/> PROB.TERMINATED	CRT. COSTS \$ FINE \$ PD FEE \$ SAO FEE \$ LEO FEE \$ PD APP.FEE \$ REST. \$ OTHER: <input type="checkbox"/> CONVRT. FINE/COST JDGMT <input type="checkbox"/> PREVIOUS COST TO JDGMT
AMENDED CHARGE:						
BOND SET AT \$						
4	SHOOTING WITHIN BUILDING Statute: 790.19	(NOLO) LVL:F DEG:S	<input type="checkbox"/> N.G.PLEA <input type="checkbox"/> GUILTY PLEA <input type="checkbox"/> NOLO PLEA <input type="checkbox"/> NG.VERDICT <input type="checkbox"/> GLTY.VERDICT <input type="checkbox"/> MISTRIAL <input type="checkbox"/> ADMIT <input type="checkbox"/> DENY : VOP/VOCC <input type="checkbox"/> NO INFO. <input type="checkbox"/> NOLLE PROSS. <input type="checkbox"/> DISMISSED <input type="checkbox"/> JGMT ACQT. <input type="checkbox"/> ADJ.WITHHELD <input checked="" type="checkbox"/> ADJ.GUILTY <input type="checkbox"/> PDR ORDERED <input type="checkbox"/> TO BE SENT:	<input checked="" type="checkbox"/> VCJ <u>90</u> MO <u>3</u> DY <input type="checkbox"/> DOC _____ YR _____ MO _____ DY <input checked="" type="checkbox"/> JAIL CREDIT TIME: <u>3</u> DY <input checked="" type="checkbox"/> PROB <u>F/B 3</u> YR _____ MO _____ DY <input checked="" type="checkbox"/> COM.CONT. <u>2</u> YR _____ MO _____ <input type="checkbox"/> DRUG OFFENDER <input type="checkbox"/> SEX OFFENDER <input checked="" type="checkbox"/> CONCURRENT <input type="checkbox"/> CONSECUTIVE TO: _____ <input type="checkbox"/> _____ HRS.COM. SERVICE <input checked="" type="checkbox"/> SUBST.ABUSE COUNSEL/TREAT. <input checked="" type="checkbox"/> RANDOM U/A <input checked="" type="checkbox"/> NO ALCOHOL/LL.DRUG <input type="checkbox"/> MAY CONVERT CRT COST TO CS \$ _____ PER HOUR	<input type="checkbox"/> PROB.REVOKED <input type="checkbox"/> C.C. REVOKED <input type="checkbox"/> PROB. REINSTATE <input type="checkbox"/> C.C. REINSTATE <input type="checkbox"/> PROB. MODIFIED <input type="checkbox"/> C.C. MODIFIED <input checked="" type="checkbox"/> STANDARD COND. <input type="checkbox"/> PREVIOUS COND. <input type="checkbox"/> COS WAIVED <input type="checkbox"/> PROB.TERMINATED	CRT. COSTS \$ FINE \$ PD FEE \$ SAO FEE \$ LEO FEE \$ PD APP.FEE \$ REST. \$ OTHER: <input type="checkbox"/> CONVRT. FINE/COST JDGMT <input type="checkbox"/> PREVIOUS COST TO JDGMT
AMENDED CHARGE:						
BOND SET AT \$						
	DISCHARGING A FIREARM IN PUBLIC Statute: 790.15(1)	(Arrest) LVL:M DEG:F	<input type="checkbox"/> N.G.PLEA <input type="checkbox"/> GUILTY PLEA <input type="checkbox"/> NOLO PLEA <input type="checkbox"/> NG.VERDICT <input type="checkbox"/> GLTY.VERDICT <input type="checkbox"/> MISTRIAL <input type="checkbox"/> ADMIT <input type="checkbox"/> DENY : VOP/VOCC <input checked="" type="checkbox"/> NO INFO. <input type="checkbox"/> NOLLE PROSS. <input type="checkbox"/> DISMISSED <input type="checkbox"/> JGMT ACQT. <input type="checkbox"/> ADJ.WITHHELD <input type="checkbox"/> ADJ.GUILTY <input type="checkbox"/> PDR ORDERED <input type="checkbox"/> TO BE SENT:	<input type="checkbox"/> VCJ _____ MO _____ DY <input type="checkbox"/> DOC _____ YR _____ MO _____ DY <input type="checkbox"/> JAIL CREDIT TIME: _____ DY <input type="checkbox"/> PROB _____ YR _____ MO _____ DY <input type="checkbox"/> COM.CONT. _____ YR _____ MO _____ <input type="checkbox"/> DRUG OFFENDER <input type="checkbox"/> SEX OFFENDER <input type="checkbox"/> CONCURRENT <input type="checkbox"/> CONSECUTIVE TO: _____ <input type="checkbox"/> _____ HRS.COM. SERVICE <input type="checkbox"/> SUBST.ABUSE COUNSEL/TREAT. <input type="checkbox"/> RANDOM U/A <input type="checkbox"/> NO ALCOHOL/LL.DRUG <input type="checkbox"/> MAY CONVERT CRT COST TO CS \$ _____ PER HOUR	<input type="checkbox"/> PROB.REVOKED <input type="checkbox"/> C.C. REVOKED <input type="checkbox"/> PROB. REINSTATE <input type="checkbox"/> C.C. REINSTATE <input type="checkbox"/> PROB. MODIFIED <input type="checkbox"/> C.C. MODIFIED <input type="checkbox"/> STANDARD COND. <input type="checkbox"/> PREVIOUS COND. <input type="checkbox"/> COS WAIVED <input type="checkbox"/> PROB.TERMINATED	CRT. COSTS \$ FINE \$ PD FEE \$ SAO FEE \$ LEO FEE \$ PD APP.FEE \$ REST. \$ OTHER: <input type="checkbox"/> CONVRT. FINE/COST JDGMT <input type="checkbox"/> PREVIOUS COST TO JDGMT
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