

7th. Judicial Circuit 707  
Charging Affidavit - FLAGLER

Arrest # \_\_\_\_\_

Bk # 26-1340

Pg #1 of 5

ARREST <input checked="" type="checkbox"/> NOTICE TO APPEAR <input type="checkbox"/> AFFIDAVIT <input type="checkbox"/> C.C. <input type="checkbox"/>		ADULT <input checked="" type="checkbox"/> JUVENILE <input type="checkbox"/>		Count Case Number: 2026 CF 000404
(ORD) FL: 0   1   8   0   0   0   0	Agency Name: Flagler County Sheriff's Office		Agency Case Number: 2026-00048607	
FCIC/NCIC Check? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	OBTIS#: <u>1803005386</u>	UCR:	Date Arrested: 05/17/2026	Time of Arrest: 21:58
ADDRESS OF ARREST: 2, RIPPLING, PL, Palm Coast, Florida, 32164			Arrested By: Jenkins, Laura	ID Number: 806
DEFENDANT Name (L.F.N.): JAVORONKOV, ILIA		A.K.A.:		Sex: Male Race: WHITE
DOB: 08/30/1982	Age: 43	Driver's Lic ID No.: J208744403000	State: Florida	Year Expires: 2033 S.S. #: 077-80-2909
Height: 5 10	Weight: 250	Hair: BROWN	Eyes: BROWN	POB (City, St. Country):
Scars, Marks, Tattoos:	Business & Occupation:		Statement: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Probation: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Sexual Predator: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	English: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Deaf/Mute: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Address-Mailing Permanent (STREET, APT, NUMBER)		(CITY)	(STATE)	ZIPCODE RESIDENCE PHONE
Address-Local (STREET, APT, NUMBER)		(CITY)	(STATE)	ZIPCODE RESIDENCE PHONE
2 RIPPLING PL		Palm Coast	Florida	32164 (386)220-2404
Address-Other(Employer, School) (STREET, APT, NUMBER)		(CITY)	(STATE)	ZIPCODE BUS SCHOOL PHONE
CHARGES DOMESTIC VIOLENCE? YES <input checked="" type="checkbox"/>		Attachments: Affidavit(s) <input checked="" type="checkbox"/> Statement(s) <input type="checkbox"/> NTA Schedule <input type="checkbox"/> Report <input type="checkbox"/> Traffic Infraction(s) <input type="checkbox"/> DUT <input type="checkbox"/>		Total Charges: 4
#1 Charge: BATTERY - TOUCH OR STRIKE	FEL <input type="checkbox"/> MISD <input checked="" type="checkbox"/> ORD <input type="checkbox"/>	FS ORD: 784.03.1.a.1	Citation No.:	Bond: None
#2 Charge: COMMIT DOMESTIC BATTERY BY STRANGULATION	FEL <input checked="" type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS ORD: 784.041.2.a	Citation No.:	Bond: None
#3 Charge: OBSTRUCT WO VIOLENCE	FEL <input type="checkbox"/> MISD <input checked="" type="checkbox"/> ORD <input type="checkbox"/>	FS ORD: 843.02	Citation No.:	Bond: \$500
CO-DEFENDANT Co-Def. - Is Arrested? Y <input type="checkbox"/> N <input type="checkbox"/> Fel <input type="checkbox"/> Misd. <input type="checkbox"/> Traf. <input type="checkbox"/> Ord. <input type="checkbox"/> NTA <input type="checkbox"/>		Co-Def. - Is Arrested? Y <input type="checkbox"/> N <input type="checkbox"/> Fel. <input type="checkbox"/> Misd. <input type="checkbox"/> Traf. <input type="checkbox"/> Ord. <input type="checkbox"/> NTA <input type="checkbox"/>		
#1 NAME(L.F.N.):	Race:	Sex:	DOB:	Age:
#2 NAME(L.F.N.):	Race:	Sex:	DOB:	Age:
NARRATIVE The undersigned certifies and swears that there is a probable cause to believe the above names defendant, on the 17th day of May, 2026, at approximately 21:58 A.M. X P.M. at [redacted] within Flagler County, violated the law and did then and there.				
**Marsy's Law Victims Information**				
On May 17, 2026, at approximately 2201 hours, I Master Deputy Jenkins responded to [redacted] in reference to a domestic disturbance. Prior to arrival FCSO Communications received an emergency call from Danielle Javoronkov who sounded distraught and stated that her husband, Ilia Javoronkov was hurting her. She said over the phone "He's going to kill me," "Please bring help, he's hurting me," and "I don't want to die."				
Supervisor Approved: Cangialosi, Andrew 05/18/2026				
NOTICE TO APPEAR MANDATORY APPEARANCE <input type="checkbox"/>		YOU NEED NOT APPEAR IN COURT BUT MUST COMPLY WITH INSTRUCTIONS ON THE REVERSE SIDE OF YOUR COPY <input type="checkbox"/>		FINE AND COSTS AMOUNT:
I AGREE TO APPEAR IN COURT HEREIN TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE INDICATED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED, OR PAY THE LISTED FINE, I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST WILL BE ISSUED.				
SIGNATURE OF DEFENDANT		DATE	RELATIONSHIP TO JUVENILE	Juve Disp. CITATION No.
Sworn to and subscribed before me, this undersigned, This 10 day of 5, 2026		I swear affirm the above statements are correct and true.		RT Thumb
Name: [Signature]		[Signature] 806		
Notary Public <input type="checkbox"/> Law Enforcement or Corrections Officer <input checked="" type="checkbox"/> Personally Known <input type="checkbox"/> Produced Identification <input type="checkbox"/>		NAME (PRINTED)	ID NUMBER	
Type of Identification:		JENKINS	806	
OFFICIAL USE ONLY		Inmate Number & Facility:		

707 - COURT COPY

# Narrative 707-B Supplement

Arrest  
 Affidavit  
 Notice to Appear  
 Adult  
 Juvenile

Court Case Number:

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Defendant Name: <b>JAVORONKOV, ILIA</b>		Agency Case Number: <b>2026-00048607</b>	
<b>CHARGES</b>		DOMESTIC VIOLENCE? YES <input checked="" type="checkbox"/> Attachments: Affidavit(s) <input checked="" type="checkbox"/> Statement(s) <input type="checkbox"/> NTA Schedule <input type="checkbox"/> Report <input type="checkbox"/> Traffic Infraction(s) <input type="checkbox"/>	Total Charges: <b>4</b>
#	Charge: <b>FALSE IMPRISONMENT OF PERSON</b>	FEL <input checked="" type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: <b>787.02.2</b> Citation No: Bond: <b>None</b>
#	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: Citation No: Bond:
#	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: Citation No: Bond:
[Empty area for narrative text]			
Sworn to and subscribed before me, the undersigned, this <b>18</b> day of <b>MAY</b> , <b>2026</b> . Name: <b>[Signature]</b>		I swear/affirm the above statements are correct and true. <b>[Signature]</b> <b>806</b> OFFICER'S/COMPLAINANT'S SIGNATURE	
Notary Public <input type="checkbox"/> Law Enforcement Officer <input checked="" type="checkbox"/> Personally Known <input type="checkbox"/> Produced Identification <input type="checkbox"/>		NAME (PRINTED) <b>JENKINS</b>	ID NUMBER <b>806</b>
Type of Identification:		Right thumb:	

707-B - COURT COPY

# Witness/Victim/Evidence Form 707-A

Arrest  
 Affidavit  
 Notice to Appear  
 Adult  
 Juvenile

Court Case Number

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Defendant Name: <b>JAVORONKOV, ILIA</b>		Agency Case Number: <b>2026-00048607</b>	
Name (L.F.M): <b>JAVORONKOV, DANIELLE</b>	Vic Wit: <input checked="" type="checkbox"/> <input type="checkbox"/>	Race: <b>WHITE</b>	Sex: <input type="checkbox"/> M <input checked="" type="checkbox"/> F Age: <b>43</b>
Name (L.F.M):		Vic Wit: <input type="checkbox"/> <input type="checkbox"/>	Race:
Address (#, Street, City, State):		Sex: <input type="checkbox"/> M <input type="checkbox"/> F	Age: DOB: SSN:
Bus/School Address:		Zip:	Home Phone: Statement Yes <input type="checkbox"/> No <input type="checkbox"/>
Relative/Contact Name:		Relative/Contact Address:	Bus Phone: Phone:
Name (L.F.M):		Vic Wit: <input type="checkbox"/> <input type="checkbox"/>	Race:
Address (#, Street, City, State):		Sex: <input type="checkbox"/> M <input type="checkbox"/> F	Age: DOB: SSN:
Bus/School Address:		Zip:	Home Phone: Statement Yes <input type="checkbox"/> No <input type="checkbox"/>
Relative/Contact Name:		Relative/Contact Address:	Bus Phone: Phone:
Name (L.F.M):		Vic Wit: <input type="checkbox"/> <input type="checkbox"/>	Race:
Address (#, Street, City, State):		Sex: <input type="checkbox"/> M <input type="checkbox"/> F	Age: DOB: SSN:
Bus/School Address:		Zip:	Home Phone: Statement Yes <input type="checkbox"/> No <input type="checkbox"/>
Relative/Contact Name:		Relative/Contact Address:	Bus Phone: Phone:
Name (L.F.M):		Vic Wit: <input type="checkbox"/> <input type="checkbox"/>	Race:
Address (#, Street, City, State):		Sex: <input type="checkbox"/> M <input type="checkbox"/> F	Age: DOB: SSN:
Bus/School Address:		Zip:	Home Phone: Statement Yes <input type="checkbox"/> No <input type="checkbox"/>
Relative/Contact Name:		Relative/Contact Address:	Bus Phone: Phone:
Name (L.F.M):		Vic Wit: <input type="checkbox"/> <input type="checkbox"/>	Race:
Address (#, Street, City, State):		Sex: <input type="checkbox"/> M <input type="checkbox"/> F	Age: DOB: SSN:
Bus/School Address:		Zip:	Home Phone: Statement Yes <input type="checkbox"/> No <input type="checkbox"/>
Relative/Contact Name:		Relative/Contact Address:	Bus Phone: Phone:
Name (L.F.M):		Vic Wit: <input type="checkbox"/> <input type="checkbox"/>	Race:
Address (#, Street, City, State):		Sex: <input type="checkbox"/> M <input type="checkbox"/> F	Age: DOB: SSN:
Bus/School Address:		Zip:	Home Phone: Statement Yes <input type="checkbox"/> No <input type="checkbox"/>
Relative/Contact Name:		Relative/Contact Address:	Bus Phone: Phone:

### EVIDENCE COLLECTED

Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Owner(Name) (Address) (Phone)			Value
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Owner(Name) (Address) (Phone)			Value
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount

I certify that the foregoing is a complete list of witnesses/victims & evidence known to me.

Investigating Officer: **MD [Signature]** ID Number: **2006** Agency: **FCSO**

707-A COURT COPY

**Narrative 707-B  
Supplement**

Arrest  
 Affidavit  
 Notice to Appear

Adult  
 Juvenile

Court Case  
Number:

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Defendant Name: <b>ILIA JAVORONKOV</b>		Agency Case Number: <b>2026-48607</b>	
<b>CHARGES</b>	DOMESTIC VIOLENCE? YES <input type="checkbox"/>	Attachments: Affidavit(s) <input type="checkbox"/> Statement(s) <input type="checkbox"/> NTA Schedule <input type="checkbox"/> Report <input type="checkbox"/> Traffic Infraction(s) <input type="checkbox"/>	Total Charges:
#	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: Citation No: Bond:
#	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: Citation No: Bond:
#	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: Citation No: Bond:

Communications noted that they could hear a male screaming in the background.

Upon arrival I could hear yelling coming from inside the residence. I noticed a doorbell camera and heard Ilia yell "The pigs are here." Ilia answered the door in nothing but a pair of black boxer briefs and drunkenly yelled "Are you serious?" Danielle was seen cowering behind Ilia and was asked to stop outside. Initially she cried that she was only upset because Ilia was "being nasty" to her. Ilia slammed the door shut

Danielle said she and Ilia were in their primary bedroom when she told Ilia that she was tired of taking care of the dogs and his father who recently passed away. She was hysterical and stated that Ilia threw her around causing a bruise on her forehead, a bump on the back of her head, and injuries to her elbows. She stated that Ilia shoved her into the closet and strangled her while he was trying to get into the gun safe. He held her down and would not allow her to get up for some time while she struggled to get up. Danielle told Corporal Malta that while being strangled, she felt the blood draining from her head. According to Danielle, Ilia does not have the combination to the gun safe but said "If I can get in here, I'm going to kill you." At one point, Ilia left the bedroom and when he came back, she held the bedroom door shut. Ilia banged on the door several times and as they struggled with the door, he again stated "If I get inside I'm going to kill you."

I observed a bruise on Danielle's head but she refused medical attention. She also refused assistance from The Family Life Center.

While speaking with Danielle on the driveway, Ilia opened the door of the house and the garage door several times and drunkenly screamed at deputies to get off his property.

Ilia ultimately barricaded himself in the house and refused to exit even after I acted as a Crisis Negotiator and spoke to him several times over the phone and text message. Ilia refused to be persuaded to come outside to speak to me. He was angry and intoxicated.

He was advised that he was under arrest and he stated, "Come and get me."

Sworn to and subscribed before me, the undersigned, this <u>10</u> day of <u>MAY</u> , 2026.	I swear/affirm the above statements are correct and true.	Right thumb:
Name: <u>[Signature]</u>	<u>[Signature]</u> 806	
Notary Public <input type="checkbox"/> Law Enforcement Officer <input checked="" type="checkbox"/> Personally Known <input checked="" type="checkbox"/> Produced Identification <input type="checkbox"/>	OFFICER'S/COMPLAINANT'S SIGNATURE	
Type of Identification:	NAME (PRINTED) <u>JENKINS</u>	ID NUMBER <u>806</u>

707-B - COURT COPY

**Narrative 707-B  
Supplement**

Arrest  
 Affidavit  
 Notice to Appear

Adult  
 Juvenile

Court Case Number:

Page # **5** of **5**

Defendant Name: <b>ILIA JAVORONKOV</b>		Agency Case Number: <b>2026-48607</b>	
<b>CHARGES</b>	DOMESTIC VIOLENCE? YES <input type="checkbox"/>	Attachments: Affidavit(s) <input type="checkbox"/> Statement(s) <input type="checkbox"/> NTA Schedule <input type="checkbox"/> Report <input type="checkbox"/> Traffic Infraction(s) <input type="checkbox"/>	Total Charges:
#	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: Citation No: Bond:
#	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: Citation No: Bond:
#	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: Citation No: Bond:

After approximately 2.5 hours of negotiating, K9 assisted in securing Elia on his back patio.

Danielle completed all appropriate paperwork other than the narrative portion of the Victim's statement which she refused. She checked YES for the majority of the Domestic Questionnaire and was advised that she is in danger of homicide.

Danielle refused photos. She was provided with a DV Victims' Rights Brochure, Vine card, and Family Life Center pamphlet.

Ilia was transported to Advent Health Hospital with wounds inflicted to his left forearm and knee area during the K9 apprehension. He refused medical treatment and screamed and threatened law enforcement and the hospital staff. Photos were taken of his wounds and uploaded to Evidence.com.

After medical clearance he was transported to the Flagler County Inmate Facility.

All interactions were captured via Axon camera and uploaded to Evidence.com.

Case supplement reports were completed by all law enforcement officers who interacted with Ilia Javoronkov during this call for service.

Sworn to and subscribed before me, the undersigned, this <b>18</b> day of <b>MAY</b> , 2026	I swear/affirm the above statements are correct and true.	Right thumb
Name: <b>[Signature]</b>	<b>[Signature]</b>	
Notary Public <input type="checkbox"/> Law Enforcement Officer <input checked="" type="checkbox"/> Personally Known <input type="checkbox"/> Produced Identification <input type="checkbox"/>	OFFICER'S/COMPLAINANT'S SIGNATURE	
Type of Identification:	NAME (PRINTED) <b>JERGENS</b>	ID NUMBER <b>806</b>

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