



Arrest Report

OKALOOSA COUNTY SHERIFF'S OFFICE
107 STAHLMAN AVENUE
DESTIN, FL 32541

Report Date / Time 4/10/2025 01:41 AM	Report Number OCSO25ARR002862	Case Number/Cad Number OCSO25OFF004278 / OCSO25CAD066338	Reporting Officer Name MILLER, ADAM L
Originating Agency ORI FL0460000	Occur Date Time Range 04/10/2025 00:31:06 -	Jurisdiction In Jurisdiction	
OBTS Number 4601145668	Other Number	Clearance	

Location of Occurrence

County OKALOOSA	Location Type PUBLIC PLACE	Location Description COAST GUARD STATION			
Street Number 2000	Street MIRACLE STRIP PKWY	Apt/Lot/Bldg	City FORT WALTON BEACH	State FL	Zip Code 32542

Suspect

First Name MICHAEL	Middle Name CHARLES	Last Name HUBER	Suffix	Race WHITE	Sex MALE	Height 6'04"	Weight 155	Hair BRO	Eyes HAZ
MNI # OCSO02MNI019195	SSN	Date of Birth 04/27/1981	Age 43	ID Type	Drivers License or other ID	State	OCA / Agency ID 268195		
Place of Birth:	HUNTSVILLE U.S.								
Address * RESIDENCE / 226 PELHAM , FORT WALTON BEACH, FL 32548 / (850)654-7412									

Arrest Report Data

Question Domestic Violence	Answer No
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Arrest

Arrest Date/Time 4/10/2025 12:48:40 AM	Arrest Location Type PUBLIC PLACE	Arrest Location Description				
Street Number 2000	Street MIRACLE STRIP PKWY	Apt/Lot/Bldg	County OKALOOSA	City FORT WALTON BEACH	State FL	Zip Code 32542

Charge : S

Counts 1	Charge 901.15.4	Bond Amount \$0.00	<input type="checkbox"/> No Bond
Charge Degree N	Charge Level		
General Offense Code COMPLETED	Arrest Offense Code OUT-OF-COUNTY WARRANT		
Charge Description OUT-OF-COUNTY WARRANT			
Administrative Code - Description -			

Probable Cause

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On 04/10/2025 at approximately 0031 hours, the Defendant, Michael Charles Huber, was located in Okaloosa County, Florida. The Defendant is a wanted person in Walton County, Florida by the Walton County Sheriff's Office for the offense of misdemeanor failure to appear for DUI and Reckless Driving. The Defendant's wanted status was confirmed by Hit Confirmation with no bond amount set (reference NIC: W061589654). The above offense is in violation of Florida State Statute 901.15.4.

This offense occurred in Okaloosa County where I am a sworn law enforcement officer.

Jail Booking Facility

Booking Date/Time	Booking County	Booking Facility	Booking Facility Phone
Booking Facility Location			Booking Number
Booking Comments			

Court


Court County	Court Location		
Court	Court Phone	Court Apperance Date / Time	Court Fine
Comments TBA COURT DATE			

Officer Name Rank / ID #	Involvement On Report / Reporting Role	Officer Agency Org/Unit
MILLER, ADAM L DEPUTY 2041	REPORTING OFFICER	OKALOOSA COUNTY SHERIFF'S OFFICE OCSO/FSV/EAST/BD/B-SHIFT/DES
THOMPSON, REX SERGEANT 769	APPROVING SUPERVISOR	OKALOOSA COUNTY SHERIFF'S OFFICE OCSO/FSV/EAST/BD/B-SHIFT

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The undersigned certifies and swears that he/she has just and reasonable grounds to believe that the above named Defendant, committed violation(s), of law, on the below date(s) and time(s), as listed in the probable cause associated with this report:

Reporting Officer

Officer Name MILLER, ADAM L	Office Rank DEPUTY	Officer ID No 2041	Sworn and subscribed before me, the undersigned authority This the _____ day of _____, _____ DEPUTY OF THE COURT, NOTARY OR LAW ENFORCEMENT
Officer Agency OKALOOSA COUNTY SHERIFF'S OFFICE			
Officer Signature 			

<input type="radio"/> No Bill / Petition <input type="radio"/> Issue Warrant <input type="radio"/> Prosecution Approved	_____ Signature of Assistant State Attorney	_____ Date
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