

APPEARANCE BOND

SEND ALL COURT NOTICES TO:

POWER # PC25-01504730
ARREST # 012024CF003934A

<u>Lee Cachon</u>
TRANSFER BOND EXECUTED FOR:
FOR FURTHER ACTION ON THIS BOND CONTACT C.E. PARISH GENERAL AGENCY, INC. P.O. Box 1747 • 1452 West CR 48 Bushnell, FL 33513-0090 (352) 793-7775 • (352) 793-9572 Email: courtdocs@ceparish.com

STATE OF FLORIDA
VS

Simon Flores
Court Room Thru
Time Thru

IN THE Circuit Court
Alachua County
STATE OF FLORIDA

KNOW ALL MEN BY THESE PRESENTS: That we, the above-cautioned defendant, as principals, and CONTINENTAL HERITAGE INSURANCE COMPANY, a Florida Corporation, as surety, are held and firmly bound unto the Governor of the State of Florida, and his successors in office, the said principal, in the sum of \$ 50,000 and the said surety for a like amount, for the payment whereof well and truly to be made we bind ourselves, our heirs, executors, administrators and assigns firmly by these presents.

Signed and sealed this 30 day of 11 A.D., 20 24

The condition of this obligation is such that if the said principal shall appear on Thru 20 24 at the next Regular or Special term of the above court and shall submit to the said court to answer a charge of Obscene Material Poss - Poss Cont with def Child Porn and shall submit to orders and process of said Court and not depart the same without leave, then this obligation to be void, else to remain in full force and virtue.

TAKEN BEFORE ME AND APPROVED BY ME:
EMERY A. GAINERY Sheriff
By [Signature] D. S.



x Dimon Stone (L.S.)
(PRINCIPAL)
CONTINENTAL HERITAGE INSURANCE COMPANY
[Signature] (ATTORNEY-IN-FACT SURETY)

CONTINENTAL HERITAGE INSURANCE COMPANY
ORANGE VILLAGE, OH 44122
(440) 995-1409 (216) 938-6952 FAX
Email: courtdocs@chicins.com

2024 DEC -3 AM 8:26
OK
FILED



CONTINENTAL HERITAGE INSURANCE COMPANY
C.E. PARISH GENERAL AGENCY, INC.
P.O. BOX 1747, BUSHNELL, FLORIDA 33513-0090
(352) 793-775 / FAX (352) 793-9572

COURT COPY

SEND TO: _____

CERTIFICATE OF DISCHARGE OF BOND

Date _____

Case Number _____ Bond Amount _____ Power No. _____

Defendant _____ court

This is to certify that on or about the _____ day of _____ 20 _____

I examined the records of _____ and found that the bond with corresponding power number has been discharged of record by reason of the following disposition _____

Person rendering decision _____

Date of Discharge _____, Witness my hand and official seal this _____

day of _____, 20 _____ Title _____

SURRENDER

THE UNDERSIGNED SURETY on the bond of _____
wished to surrender said defendant and come off bond and hereby authorizes _____
as licensed bail bond agent of said Surety of any Law Enforcement Officer having jurisdiction to take the said _____
into custody and deliver and surrender him or cause him to be surrendered into the custody of the Sheriff of _____ County,
_____ Florida. This instrument is certified to be a true and correct copy of the original bond now of record
in said case.

CONTINENTAL HERITAGE INSURANCE CO. by _____ (Attorney-in-Fact)

STATEMENT

I, _____, am a duly licensed bail bond agent pursuant to Chapter 648, Florida Statutes, and have
registered for the current year with the office of the Sheriff and Clerk of the Circuit Court of the aforesaid county, and have filed a certified copy of my
appointment by Power of Attorney for the Surety with the office of the Sheriff and Clerk of the Circuit Court of the aforementioned County. And that

Principal _____
Address _____

has given (or promised to give) the, sum of _____ (\$ _____) Dollars as
consideration for Bail Bond Number _____ filed with the Clerk of the _____ Court
located in _____, Florida, together with the (promise or receipt) of security belonging to:

Name (s): _____

Address: _____

as follows: (Provide detailed description and source of security) _____

That a duly signed receipt has been given to the said _____ (Principal)
for the consideration given and/or that the said _____ (name) has (also been) given a receipt for the
security described above.

(Bond Agent) _____

(Agency) _____

(Address) _____

Continental Heritage Insurance Co.

POWER OF ATTORNEY

POWER No. PC75-01594330

200 Park Ave., Suite 400
Orange Village, OH 44122

(440) 995-1420 • (877) 645-4871 • courtdocs@chicins.com

POWER AMOUNT 75,000.00

KNOW ALL MEN BY THESE PRESENTS that the Continental Heritage Insurance Company, a corporation duly organized and existing under the laws of the State of Florida and by the authority of the Resolution adopted by the Board of Directors by unanimous written consent on January 26, 1993, which said Resolution has not been amended or rescinded, does constitute and appoint and by these presents does make, constitute and appoint the named agent its true and lawful Attorney-in-Fact for it and in its name, place and stead, to execute, seal and deliver for and on its behalf and as its act and deed, as surety, a bail bond only. Authority of such Attorney-in-Fact is limited to appearance bonds and cannot be construed to guarantee defendant's future lawful conduct, adherence to travel limitations, fines, restitution, payments or penalties, or any other condition imposed by a court not specifically related to court appearance.

This Power-of-Attorney is for use with Bail Bonds only. Not valid if used in connection with Federal Immigration Bonds. This power is void if altered or erased, void if used with other powers of this company or in combination with powers from any other surety company, and void if used to furnish bail in excess of the stated face amount of this power, and can only be used once.

The obligation of the company shall not exceed the sum of:

SEVENTY FIVE THOUSAND DOLLARS.

and provided this Power-of-Attorney is filed with the bond and retained as a part of the court records. The said Attorney-in-Fact is hereby authorized to insert in this Power-of-Attorney the name of the person on whose behalf this bond was given.

IN WITNESS WHEREOF, THE CONTINENTAL HERITAGE INSURANCE COMPANY has caused these presents to be signed by its duly authorized officers, proper for the purpose and its

corporate seal to be hereunto affixed this 30 of 11 2021
DAY MONTH YEAR

Bond Amount \$ 5,000

Defendant Simon Flores

Charges OBSC MATER FALS, POSSE CONT VIOLE DEF Child POW

Court Circuit

Case No. 012024CFD03924A

City Gainesville State FL

If rewrite, original No. _____

Attorney-in-Fact [Signature] (SIGNATURE)
Lee Cochran (PRINT NAME)



By: [Signature]
Sean T. O'Brien, President

By: [Signature]
Jennifer Liotta-Harris CFO & Treasurer

VOID IF NOT ISSUED BY:

10/31/2025

FOR STATE USE ONLY
NOT VALID IF ISSUED IN FEDERAL COURT

COPY FOR COURT