

**IN THE CIRCUIT COURT OF THE SIXTH JUDICIAL CIRCUIT  
IN AND FOR PINELLAS COUNTY, FLORIDA  
FAMILY LAW DIVISION**

**IN RE: THE MARRIAGE OF:**

**ANDREW CABEZUDO,**  
Petitioner,

v.

**GERALDINE CABEZUDO,**  
Respondent.

**Case No.: 25-2342-FD-12**

**NOTICE OF FILING EXHIBITS**

COMES NOW Respondent, GERALDINE CABEZUDO, and hereby gives notice of filing the following exhibits in support of her Amended Motion for Sanctions and to Hold Petitioner in Contempt:

Exhibit A – Talking Parents message dated August 5, 2025 (Andrew’s vaccine claim).

Exhibit B – North Pinellas Children’s Medical Center (NPCMC) School Health Form dated April 29, 2025 (showing no updated vaccines) yet submitted on the NPCMC patient portal as a “new” school form on 9/18/25.

Exhibit C – Talking Parents message dated September 19, 2025 (Andrew failing to provide health updates).

Exhibit D – Talking Parents messages dated 9/4/25 reflecting exclusion from the August 13, 2025 Pinellas County IEP/IFSP meeting.

Exhibit E – Notarized Affidavit of Witness of Geraldine Cabezudo.

Exhibit F – Video recording of August 17, 2025 call (child unbelted, endangerment observed):

<https://mega.nz/file/iEI>

Exhibit G – Video upload link/acknowledgment from Pinellas County Sheriff’s Office regarding August 17, 2025 incident.

Exhibit H – Video recording of August 12, 2025 Z.J.C.C.’s Marion County Individualized Education Plan/Individualized Family Service Plan (IEP/IFSP) transition meeting where Petitioner disclosed Z.J.C.C.’s Pinellas County IEP/IFSP August 13, 2025 meeting and confirming Respondent’s request to attend same 8/13/25 meeting: <https://drive.google.com/file/d/>

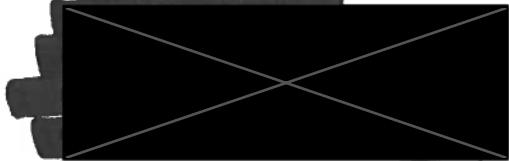
Exhibit I - Talking Parents message dated 9/12/25 when Respondent asked Petitioner for A.K.C.C.’s teacher contact information.

Dated: 9/22/25

Respectfully submitted,



**GERALDINE CABEZUDO, Pro Se Respondent**

A large black rectangular redaction box with a white 'X' drawn through it.

## **CERTIFICATE OF SERVICE**

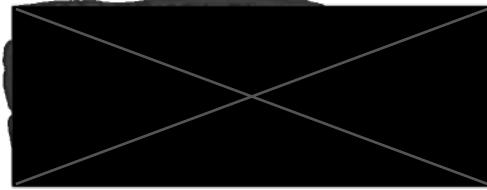
I HEREBY CERTIFY that a true and correct copy of the foregoing Notice of Serving Subpoena Duces Tecum on Non-Party, together with a copy of the attached subpoena, was served via e-service and/or U.S. Mail this 22<sup>nd</sup> day of September, 2025, to:

**Garth Goodman, Esq., Counsel for Petitioner**  
146 Second Street North, Suite 310  
St. Petersburg, FL 33701  
(727) 895-5858  
garth@goodmanatlaw.com

Respectfully submitted,



**GERALDINE CABEZUDO, Pro Se Respondent**

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# EXHIBIT A

Secure Messaging      Filter by            X      Phone calls

Accountable Calling      All (default)      Subjects      Messages      Attachments

Shared Calendar      Phone calls

Accountable Payments      was not given any vaccines.

Info Library      Front me      Sort by      Relevance      Newest      Oldest

Unalterable Records      Phone calls      8/4/2025      >

Personal Journal      Phone calls      8/4/2025      >

Vault File Storage      Phone calls      8/4/2025      >

Account Settings      Phone calls      8/5/2025, 9:41 AM      >

Help Center      Phone calls      8/5/2025, 9:42 AM      >

Contact Us      Phone calls      8/5/2025, 9:43 AM      >

Sign Out      Phone calls      Total: 3

**What specific types of vaccines did they receive?**

Andrew viewed on 8/5/2025, 9:37 AM

**VOLATING the order**      8/4/2025, 10:14 PM

as given DTaP, MMRV, Polio, and Varicella.

8/5/2025, 9:39 AM

was not given any vaccines.

And you know how I feel about vaccines and you take my constitutional rights as a mother away and expect me to want to have cordial relations with you?

School for 1st grade. Classes being on the 11th

enrolled in Forest Lakes Elementary

as after school soccer in wednesdays.

is seeing a day specialist twice weekly.

Type your message

Max. 50,000 characters

Add attachments

Insert files from the Vault

Send

**GC** Geraldine Cabezudo  
gabezudo@talkingparents.com  
Free Plan

Copyright © 2012 - 2023  
Montotto Software, LLC

**talking PARENTS**

« Messaging with Andrew Gabezudo ☺

New message

« Back to TalkingParents.com

# EXHIBIT B

The screenshot shows a Firefox browser window with the following details:

- Address Bar:** patientportal.intelchart.com/https://#008210121139040142130408420907215401800803254
- Page Title:** Patient Portal
- Header:** Home > Messages > SCHOOL FORMS for [REDACTED] ABEZUDO
- Message Content:**

From: Children's Medical Center  
To: [REDACTED] ABEZUDO  
Thursday, September 18, 2025 - 3:31:51 PM

A new document has arrived from your provider. Please navigate to the documents section of the portal for review.
- Bottom Right:** GeraldineCabezudo (GC)
- Bottom Left:** New message

# EXHIBIT B



## FLORIDA CERTIFICATION OF IMMUNIZATION

Legal Authority: Sections 1003.22, 402.305, 402.313, Florida Statutes; Rule 64D-3.046, Florida Administrative Code

CABEZUDO  
LAST NAME  FIRST NAME  MI  DOB (MM/DD/YY)

GERALDINE CABEZUDO  
PARENT OR GUARDIAN  CHILD'S SS# (optional)  STATE IMMUNIZATION ID# (optional)

**Directions:**

- Enter all appropriate doses and dates below.
- Sign and date appropriate certificate (A, B, or C) on form.
- See DH Form 150-615, Immunization Guidelines - Florida Schools, Childcare Facilities and Family Daycare Homes (July 2010) for information and instructions on form completion. Guidelines are available at: [www.immunizeflorida.org/schoolguide.pdf](http://www.immunizeflorida.org/schoolguide.pdf).

VACCINE	DOE CODE	Dose 1 MM/DD/YY	Dose 2 MM/DD/YY	Dose 3 MM/DD/YY	Dose 4 MM/DD/YY	Dose 5 MM/DD/YY
DTaP/DTP	A	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>
DT	B	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>
Tdap	P	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>
Td	Q	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>
Polio	D	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>
Hib	E	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>
MMR (Combined) (Separate)	F G, H	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>	<span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>
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### FLORIDA CERTIFICATION OF IMMUNIZATION

Legal Authority: Sections 1003.22, 402.305, 402.313, Florida Statutes; Rule 64D-3.046, Florida Administrative Code

CABEZUDO  
LAST NAME LAST NAME MI DOB (MM/DD/YY)

GERALDINE CABEZUDO  
PARENT OR GUARDIAN CHILD'S SS# (optional) STATE IMMUNIZATION ID# (optional)

**Directions:**

- Enter all appropriate doses and dates below.
- Sign and date appropriate certificate (A, B, or C) on form.
- See DH Form 150-615, Immunization Guidelines - Florida Schools, Childcare Facilities and Family Daycare Homes (July 2010) for information and instructions on form completion. Guidelines are available at: [www.immunizeflorida.org/schoolguide.pdf](http://www.immunizeflorida.org/schoolguide.pdf).

VACCINE	DOE CODE	Dose 1 MM/DD/YY	Dose 2 MM/DD/YY	Dose 3 MM/DD/YY	Dose 4 MM/DD/YY	Dose 5 MM/DD/YY
DTaP/DTP	A					
DT	B					
Tdap	P					
Td	Q					
Polio	D					
Hib	E					
MMR (Combined) (Separate)	F G, H					
		Measles (dose 1)	Measles (dose 2)	Mumps (dose 1)	Mumps (dose 2)	
	I					Hep A 2/6/20-8/25/20-AG
	J					
	K					
	L					Rotavirus 3/18/19-5/20/19-7/22/19-AG
PneumoConju	N					
			Year			

#### Certificate of Immunization for K-12

Part A DOE Code 1: Immunizations are complete for K-12 (Excluding 7th grade/middle school requirements).

I have reviewed the records available, and to the best of my knowledge, the above named child has adequately been immunized for school attendance, as documented above.

Physician or Clinic Name:

Dolores Razman, MD

Physician or  
Authorized Signature:

Issued By: DR

Date: 4/29/2025

DH 880 (Jul 2010)

North Pinellas Children's Medical Center  
31860 US Hwy 19 North  
Palm Harbor, FL 34684  
PH #727-787-6335  
FAX #727-489-2519

## Preventive Exam Summary

CABEZUDO (Sex: M, DOB: [REDACTED])

Date of Visit: 07/31/2024

## Patient Demographics

Name: CABEZUDO  
Date of birth: [REDACTED] Sex: M  
Language: English  
Race: Declined to specify  
Ethnicity: Declined to specify

## Visit Information

Date/time: 07/31/2024 @ 03:10 pm  
Location: Palm Harbor  
Appointment type: WELL VISIT, NEW  
Accompanied by: GERALDINE CABEZUDO

## Interval History

5-6 year well visit:  
Parental concerns: none  
Recent injury/illness: none  
Special health care needs: none  
Visits to other health care providers/facilities: none  
Changes/stressors in family or home: none  
Observation of parent-child interaction: normal (parent and child interact appropriately with health care professional and with each other; parent has realistic expectations about child)  
No problems with previous immunizations

## ROS Findings

Well Visit: School-age: Confirms attends school in appropriate grade for age: starting kindergarten, is academically successful at school without learning concerns, is socially successful in school and community environment, is involved in school/community activities, diet is well balanced with appropriate calcium and protein intake, brushes teeth and receives regular dental care, gets appropriate amount of physical exercise, gets appropriate amount of sleep and has good sleep habits, has appropriately limited screen time with age-appropriate exposures, GI: has normal BM elimination habits, GU: nocturnal enuresis.

## Patient History

Past Medical, Family, and Social History reviewed and updated as appropriate  
Allergies Reviewed by Stephanie Goza (13475) 07/31/2024 15:10:56  
No active medication allergies or reactions

Medication List Reviewed by Stephanie Goza (13475) 07/31/2024 15:10:58

Problem List Reviewed by Dolores Razman, MD (322) 08/01/2024 00:14:48  
No active problems

Allergies Reviewed by Dolores Razman, MD (322) 08/01/2024 00:14:52

Medication List Reviewed by Dolores Razman, MD (322) 08/01/2024 00:14:57

## Risk Assessment

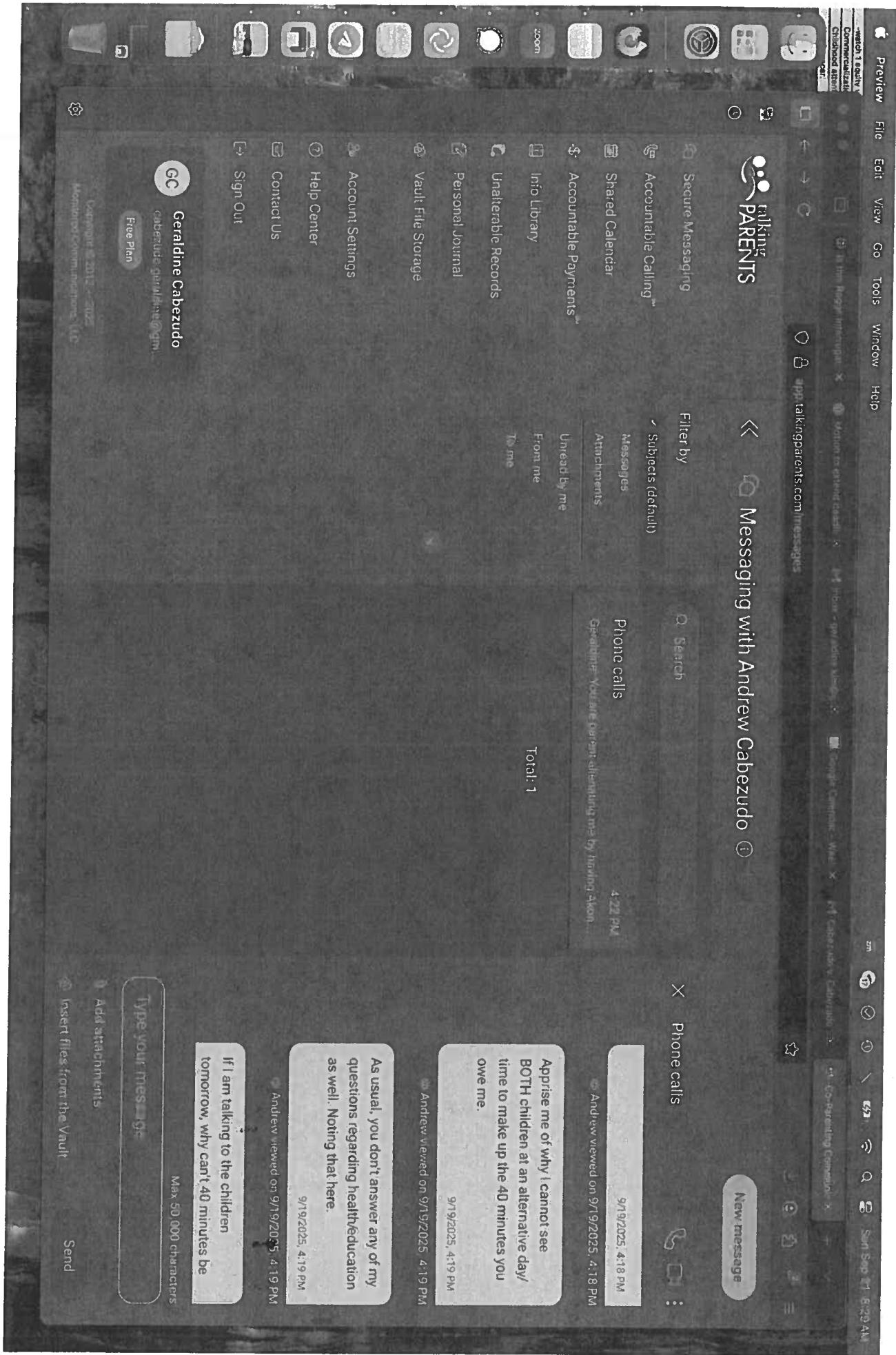
Food Insecurity: Negative Screening for Food Insecurity

## Surveys

Food Insecurity Screening:  
Diagnosis: Z59.41 Food insecurity  
PSC -17 PARENT:

NORTH PINELLAS CHILDRENS MEDICAL CENTER  
31880 US HWY 19 NORTH  
PALM HARBOR, FL 34684  
PH #727-787-6335  
FAX #727-489-2519

## EXHIBIT C





# EXHIBITE

**IN THE CIRCUIT COURT OF THE SIXTH JUDICIAL CIRCUIT  
IN AND FOR PINELLAS COUNTY, FLORIDA  
FAMILY LAW DIVISION**

**IN RE: THE MARRIAGE OF:**

**ANDREW CABEZUDO,**  
Petitioner,

v.

**GERALDINE CABEZUDO,**  
Respondent.

**Case No.: 25-2342-FD-12**

**AFFIDAVIT OF WITNESS  
STATE OF FLORIDA  
COUNTY OF PASCO**

BEFORE ME, the undersigned authority, personally appeared GERALDINE CABEZUDO, who being duly sworn, deposes and states:

1. My name is Geraldine Cabezudo. I am the Respondent in the above-styled case.
2. On August 5, 2025, Petitioner, Andrew Cabezudo, stated via Talking Parents that he had administered vaccines to A.K.C.G. (DTAP, MMRV, Polio, Varicella). The North Pinellas Children's Medical Center (NPCMC) form dated April 29, 2025 lists only vaccinations from July 31, 2024 and none from August 2025 yet was submitted on the NPCMC patient portal as a "new" document on 9/18/25.
3. I never took the children to the doctor on April 29, 2025. They were with me on that date.
4. On September 19, 2025, I asked Petitioner for updates regarding A.K.C.C.'s health. He failed to provide me with any information.
5. I requested from Petitioner the contact information of A.K.C.C.'s teacher and to be included in Z.J.C.C.'s August 13, 2025 Pinellas County Individualized Education Plan/Individualized Family Service Plan (IEP/IFSP) transition meeting. On August 12, 2025, during Z.J.C.C.'s Marion County IEP/IFSP transition meeting, I expressly requested to be included in the August 13 meeting. Petitioner refused to include me, despite my being the only signing family member for Z.J.C.C., who communicates exclusively through sign language.

6. On August 17, 2025, during a recorded video call, both children were in a moving car with Andrew and Gloria Cabezudo. A.K.C.C. was unbelted for the entire 30 minutes, engaged in self-injurious behaviors (scratching and hitting his own face) and aggressive behaviors (kicking Petitioner). I pleaded for the car to stop to calm A.K.C.C. and to improve video fidelity, but they refused. A.K.C.C. could have opened the door into traffic. I contacted the Pinellas County Sheriff and provided the recording via the sheriff's video link he directed me to use via August 17, 2025 phone call.

FURTHER AFFIANT SAYETH NAUGHT.



Geraldine Cabezudo

STATE OF FLORIDA  
COUNTY OF Pasco

Sworn to and subscribed before me this 21st day of September, 2025, by Geraldine Cabezudo, who is personally known or has produced Driver's license as identification.



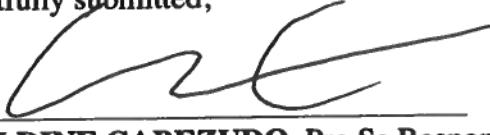
Notary Public

## CERTIFICATE OF SERVICE

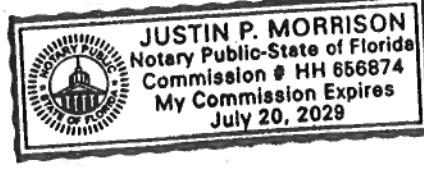
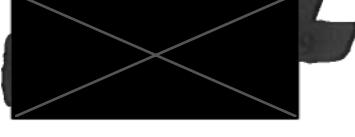
I HEREBY CERTIFY that a true and correct copy of the foregoing Notice of Serving Subpoena Duces Tecum on Non-Party, together with a copy of the attached subpoena, was served via e-service and/or U.S. Mail this 22 day of September, 2025, to:

**Garth Goodman, Esq., Counsel for Petitioner**  
146 Second Street North, Suite 310  
St. Petersburg, FL 33701  
(727) 895-5858  
garth@goodmanatlaw.com

Respectfully submitted,



**GERALDINE CABEZUDO, Pro Se Respondent**





# EXHIBIT G



Geraldine Cabezudo 

## Pinellas Sheriff link

1 message

Geraldine Cabezudo 

To: Geraldine Cabezudo 

Sun, Aug 17, 2025 at 7:57 PM

<https://pinellascountyfl.evidence.com/axon/community-request/share> 

Sent in haste with thumbs.

EXHIBIT I