



SAMUEL M ROSATI

License Number: ME103357

Data As Of 11/22/2024

Profession	Medical Doctor
License	ME103357
License Status	CLEAR/Active
Qualifications	Dispensing Practitioner
License Expiration Date	1/31/2025
License Original Issue Date	12/10/2008
Address of Record	424 LUNA BELLA LN APT 235 NEW SMYRNA BEACH, FL 32168
Controlled Substance Prescriber (for the Treatment of Chronic Non- malignant Pain)	Yes
Discipline on File	No
Public Complaint	No

Secondary Locations

Address

940 Centre Circle Central Florida Injury & Recovery Ctr Suite 1018
ALTAMONTE SPRINGS, FL 32714

Address

2415 South Volusia Avenue Complete Welless Center of Orange City
ORANGE CITY, FL 32763

Address

701 Ridgewood Avenue Unit B Coastal Spine & Injury Center
HOLLY HILL, FL 32117

Address

5425 S Semoran Blvd Ste 11
ORLANDO, FL 32822

Address

800 Virginia Ave Ste 7
FORT PIERCE, FL 34982

Discipline/Admin Action

Emergency Actions

No Emergency Actions Found

Discipline Cases

No Discipline Found

Public Complaints

No Public Complaint Found

If a link does not appear for the case number, we do not have a scanned copy of the final order available in our database. To obtain a paper copy, please contact Public Records by clicking the link below:

[Discipline Public Records Request](#)

You may also contact Public Records by telephone at (850) 245-4252, option 4 or by written correspondence at:
Division of Medical Quality Assurance
Public Records
4052 Bald Cypress Way, Bin C01

Please include the following:

1. Full name and license number of the practitioner;
2. Name and address where documents are to be sent; and
3. If you require certification of the documents, a \$25 fee will be charged, in addition to the duplicating charges. Certification of the requested records will not be done unless specifically requested. An invoice will be sent to you and payment will be expected within thirty days. Upon receipt of payment, material will be sent to you.

Subordinate Practitioners

Name	Relationship	Profession	License	Effective Date
45TH ST. HEALTH MANAGEMENT, LLC.	PAIN MANAGEMENT CLINIC	PAIN MANAGEMENT CLINIC	1626	8/29/2023
45TH ST. HEALTH MANAGEMENT, LLC.	PAIN MANAGEMENT CLINIC	PAIN MANAGEMENT CLINIC	1626	12/7/2022
CLARK, KEVIN SHANE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9108797	6/9/2016
DRAKE, DANIEL EARL	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9101408	2/6/2019
HULL, MARC BRYAN	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9104001	9/7/2016
MOHNEY, CYNTHIA SUZANNE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9105466	8/16/2016
ORLANDO PAIN MANAGEMENT CENTER, LLC	PAIN MANAGEMENT CLINIC	PAIN MANAGEMENT CLINIC	252	2/28/2024
PARSELL, JANET MARIE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9106056	7/25/2016
RICCI, ANGELA LYNN	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9105845	8/15/2016
SHAPIRO, KIMBERLY MILLIGAN	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9106846	2/6/2019
SLOAN, ERIN C	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9101118	8/22/2016
WRIGHT, JEREMY MICHAEL	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9108266	1/31/2019

Click on the License Number to view License Details for that Practitioner

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