NORTH FLORIDA PHARMACY OF CHIEFLAND, INC.

License Number: PH18651

Data As Of 8/21/2025

Profession Pharmacy
License PH18651
License Status Clear/

Qualifications Community Pharmacy

Schedule II & III

License Expiration Date

License Original Issue

Date

07/12/2002

2/28/2027

Address of Record

1100 N YOUNG BLVD CHIEFLAND, FL 32626

Discipline on File No Public Complaint No

Secondary Locations

No secondary locations found.

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

Tallahassee, FL 32399-3251

Please include the following:

- 1. Full name and license number of the practitioner;
- $2. \ \mbox{Name}$ 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.

Supervising Practitioners

Name	Relationship	Profession	License	Effective Date
KATWARU, RAMPRATAP	RX DPT MGR/COR/POR	PHARMACIST	50262	08/01/2025
MIDDLETON, JAMES SCOTT	PHARMACY AFFILIATE	PHARMACY AFFILIATE		03/08/2012
NORTH FLORIDA PHARMACY, INC	PHARMACY CORPORATE ENTITY	PHARMACY ADMINISTRATOR ACCOUNT		02/29/2012

			Effective
Name	Relationship	Profession	License Date
ROSENFELD, JOEL ERIC	PHARMACY AFFILIATE	PHARMACY AFFILIATE	03/08/2012

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

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