



MICHAEL SHANE TULGETSKE

License Number: PA9107744

Data As Of 8/25/2025

Profession	Physician Assistant
License	PA9107744
License Status	Clear/Active
Qualifications	Prescribing
License Expiration Date	1/31/2026
License Original Issue Date	01/07/2014
Address of Record	5964 NORMANDY BLVD. SOLANTIC OF JACKSONVILLE, LLC JACKSONVILLE, FL 32205
Controlled Substance Prescriber (for the Treatment of Chronic Non- malignant Pain)	No
Discipline on File	No
Public Complaint	No

Secondary Locations

Address

13460 BEACH BLVD., UNIT 1 SOLANTIC OF JACKSONVILLE, LLC
JACKSONVILLE, FL 32224

Address

410 ATLANTIC BLVD., SOLANTIC OF JACKSONVILLE, LLC
NEPTUNE BEACH, FL 32266

Address

2401 MONUMENT RD. SOLANTIC OF JACKSONVILLE, LLC
JACKSONVILLE, FL 32225

Address

2032 DUNN AVE. SOLANTIC OF JACKSONVILLE, LLC
JACKSONVILLE, FL 32218

Address

8705-2 PERIMETER PARK BLVD. SOLANTIC OF JACKSONVILLE, LLC
JACKSONVILLE, FL 32216

Address

2095 US HIGHWAY 1 SOUTH SOLANTIC OF JACKSONVILLE, LLC
ST AUGUSTINE, FL 32086

Address

1021 CESERY BLVD. SOLANTIC OF JACKSONVILLE, LLC
JACKSONVILLE, FL 32211

Address

4498 HENDRICKS AVE. SOLANTIC OF JACKSONVILLE, LLC
JACKSONVILLE, FL 32207

Address

2140 KINGSLEY AVE. SOLANTIC OF JACKSONVILLE, LLC
ORANGE PARK, FL 32073

Address

463941 SR 200 SOLANTIC OF JACKSONVILLE, LLC
YULEE, FL 32097

Address

1708 BLANDING BLVD. SOLANTIC OF JACKSONVILLE, LLC
MIDDLEBURG, FL 32068

Address

12303 SAN JOSE BLVD. SOLANTIC OF JACKSONVILLE, LLC
JACKSONVILLE, FL 32223

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. 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
PERIN, JAMES CHRISTOPHER	SUPERVISING DISPENSING PRACTITIONER	MEDICAL DOCTOR	120432	08/22/2018
PERIN, JAMES CHRISTOPHER	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	120432	08/22/2018

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

The information on this page is a secure, primary source for license verification provided by the Florida Department of Health, Division of Medical Quality Assurance. This website is maintained by Division staff and is updated immediately upon a change to our licensing and enforcement database.