



ANA LORENA CASTORO

License Number: ME110515

Data As Of 8/10/2025

Profession	Medical Doctor
License	ME110515
License Status	Clear/Active
Qualifications	Dispensing Practitioner
License Expiration Date	1/31/2027
License Original Issue Date	07/07/2011
Address of Record	2600 Westhall Lane MAITLAND, FL 32751
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint	No

Secondary Locations

Address

440 W Hwy 436
ALTAMONTE SPRINGS, FL 32714

Address

855 S US Hwy 17-92
LONGWOOD, FL 32750

Address

19015 US 441
MOUNT DORA, FL 32757

Address

8010 Red Bug Lake Road
OVIEDO, FL 32765

Address

4451 West 1st Street
SANFORD, FL 32771

Address

2293 S. Woodland Blvd
DELAND, FL 32720

Address

1360 Saxon Blvd
ORANGE CITY, FL 32763

Discipline/Admin Action

Emergency Actions

No Emergency Actions Found

Discipline Cases

No Discipline Found

Public Complaints

No Public Complaint Found

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.

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