



## KALIE MARIE KOSEK

### License Number: PA9108019

Data As Of 1/13/2026

Profession	Physician Assistant
License	PA9108019
License Status	Clear/Active
Qualifications	Prescribing
License Expiration Date	1/31/2026
License Original Issue Date	06/26/2014
Address of Record	1370 E VENICE AVE CENTER FOR SIGHT, PL VENICE, FL 34285-9066
Controlled Substance Prescriber (for the Treatment of Chronic Non- malignant Pain)	No
Discipline on File	No
Public Complaint	No

### Secondary Locations

#### Address

2601 S Tamiami Trail CENTER FOR SIGHT, PL  
SARASOTA, FL 34239-4504

#### Address

5409 University Parkway CENTER FOR SIGHT, PL  
UNIVERSITY PARK, FL 34201

#### Address

1800 S. McCall Rd CENTER FOR SIGHT, PL  
ENGLEWOOD, FL 34223-4958

#### Address

14844 Tamiami Trail CENTER FOR SIGHT, PL  
NORTH PORT, FL 34287-2701

#### Address

8224 S Tamiami Trail  
SARASOTA, FL 34238

### 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
FEZZA, JOHN PAUL	SUPERVISING DISPENSING PRACTITIONER	MEDICAL DOCTOR	76288	01/06/2017
FEZZA, JOHN PAUL	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	76288	09/15/2016

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

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