CARRIE MAE STONEKING D.O.

License Number: OS12096

Data As Of 8/24/2025			
Profession	Osteopathic Physician		
License	OS12096		
License Status	Clear/Active		
Qualifications	Dispensing Practitioner		
License Expiration Date	3/31/2026		
License Original Issue Date	03/20/2013		
Address of Record	3301 w gandy blvd		
	TAMPA, FL 33611		
Controlled Substance Prescriber	No		
(for the Treatment of Chronic Non-			
malignant Pain)			
Discipline on File	No		
Public Complaint	No		

Secondary Locations

Address

40545 us 19th N TARPON SPRINGS, FL 34689 Address

Audiess

5464 Lithia Pinecrest Rd LITHIA, FL 33547

Address

7601 Seminole Blvd SEMINOLE, FL 33772

Address

6182 N US Hwy 41 APOLLO BEACH, FL 33572

Address

303 W Palm Ave TAMPA, FL 33602

Address

3251 66th St N SAINT PETERSBURG, FL 33710

Address

5504 Gateway Blvd WESLEY CHAPEL, FL 33544 Address 564 Channel Side Drive

Discipline/Admin Action

Emergency Actions

No Emergency Actions Found

Discipline Cases

No Discipline Found

TAMPA, FL 33602

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.

Subordinate Practitioners

Name	Relationship	Profession	License	Effective Date
FROMMANN, NICOLE	PRESCRIBING PHYSICIAN ASSISTANT	MEDICAL DOCTOR	81429	6/15/2021
FROMMANN, NICOLE	SUBORDINATE	MEDICAL DOCTOR	81429	6/15/2021

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

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