## JESSICA RAMONA CURRY

## License Number: ME122734

Data As Of 4/28/2025

Profession Medical Doctor
License ME122734
License Status CLEAR/Active
License Expiration Date 1/31/2027
License Original Issue Date 01/22/2015
Address of Record 2349 E Hwy 50
CLERMONT, FL 34711

No

Controlled Substance Prescriber

(for the Treatment of Chronic Non-

malignant Pain)

Discipline on File No Public Complaint No

## **Secondary Locations**

### Address

2609 S. Orange Ave Ste 110 ORLANDO, FL 32806

#### Address

5830 W. Irlo Bronson Memorial

KISSIMMEE, FL 34746

## Address

2349 E. Highway 50 CLERMONT, FL 34711

### Address

128 E. Brandon Blvd BRANDON, FL 33511

### Address

17511 Bruce B Downs Blvd

TAMPA, FL 33647

### Address

15602 N. Dale Mabry Hwy

TAMPA, FL 33618

### Address

22829 State Road 54

LAND O LAKES, FL 34639

### Address

7420 State Road 54

NEW PORT RICHEY, FL 34653

## Address

33670 US Highway 19 N. PALM HARBOR, FL 34684

## Address

11180 Spring Hill Drive SPRING HILL, FL 34609

### Address

9202 N. 56TH Street

TEMPLE TERRACE, FL 33617

#### Address

28115 Wesley Chapel Blvd

WESLEY CHAPEL, FL 33543

#### Address

8706 W. Hillsborough Ave

**TAMPA, FL 33615** 

#### Address

1080 Arletta Street

ALTAMONTE SPRINGS, FL 32714

#### Address

7385 Cypress Gardens Blvd SE

WINTER HAVEN, FL 33884

#### Address

7385 Cypress Gardens Blvd SE WINTER HAVEN, FL 33884

#### Address

3382 South US Hwy 27 CLERMONT, FL 34711

## 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.

# **Subordinate Practitioners**

Name	Relationship	Profession	License Effective Date
MENDOZA, LAURA CATHERINE	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9110816 4/2/2020
MENDOZA, LAURA CATHERINE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9110816 4/2/2020

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

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