Holiday CVS, L.L.C.

CVS PHARMACY #01807

License Number: PH20742

Data As Of 5/21/2025

Profession Pharmacy
License PH20742
License Status CLEAR/

Qualifications Community Pharmacy

Schedule II & III

License Expiration Date 2/28/2027

License Original Issue

Date 07/30/2004

Address of Record 1350 LEE BLVD

LEHIGH ACRES, FL 33936

Discipline on File No Public Complaint No

Secondary Locations

No secondary locations found.

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
CIMBRON, LINDA M	PHARMACY AFFILIATE	PHARMACY AFFILIATE	01/27/2012
DENALE, CAROL A	PHARMACY AFFILIATE	PHARMACY AFFILIATE	01/27/2012
HOLIDAY CVS, LLC	PHARMACY CORPORATE ENTITY	PHARMACY ADMINISTRATOR ACCOUNT	01/27/2012

Name	Relationship	Profession	License	Effective Date
MOFFATT, THOMAS S	PHARMACY AFFILIATE	PHARMACY AFFILIATE		01/27/2012
NULMAN, MICHAEL B	PHARMACY AFFILIATE	PHARMACY AFFILIATE		01/27/2012
RAMDEO, RUBEN SIMEON	RX DPT MGR/COR/POR	PHARMACIST	68064	02/27/2025
ST ANGELO, MELANIE K	PHARMACY AFFILIATE	PHARMACY AFFILIATE		01/27/2012

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

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