CHRISTOPHER LEE VENDRYES

License Number: ME130064

Data As Of 5/25/2025

Profession Medical Doctor
License ME130064
License Status CLEAR/Active
License Expiration Date 1/31/2027
License Original Issue Date 10/07/2016

Address of Record 4515 WILES Rd SUITE 101
COCONUT CREEK, FL 33073

Controlled Substance Prescriber Yes

(for the Treatment of Chronic Non-

malignant Pain)

Discipline on File No Public Complaint No

Secondary Locations

Address

5258 LINTON SUITE 203 Suite 203 DELRAY BEACH, FL 33484

Address

601 E. Sample Rd Suite 106 POMPANO BEACH, FL 33064

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;
- $2. \ \mbox{Name}$ 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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