



NIKKI BELL GLENNON

License Number: PA9110503

Data As Of 4/20/2026

Profession	Physician Assistant
License	PA9110503
License Status	Clear/Active
Qualifications	Prescribing Dispensing Practitioner
License Expiration Date	1/31/2028
License Original Issue Date	07/24/2017
Address of Record	512 E Altamonte Dr Suite:1000 ALTAMONTE SPRINGS, FL 32701
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint	No

Secondary Locations

[Address](#)

3581 SW Archer Road/Suite 40 Shands/Solantic JV, LLC dba
GAINESVILLE, FL 32608

[Address](#)

115 East Park Drive Suite 300
BRENTWOOD, TN 37027

[Address](#)

720 SW 2nd Avenue/Suite 160A
GAINESVILLE, FL 32601

[Address](#)

2415 SW College Road
OCALA, FL 34471

[Address](#)

512 East Almonte Drive Ste:1000
ALTAMONTE SPRINGS, FL 32701

[Address](#)

3840 East State Rd Suite: 100
APOPKA, FL 32703

[Address](#)

7751 Kingspointe Pkwy Ste 114
ORLANDO, FL 32819

[Address](#)

1414 E Osceola Parkway
KISSIMMEE, FL 34744

[Address](#)

136 Parliamont Loop Suite 114
LAKE MARY, FL 32746

[Address](#)

2555 S Kiman Road
ORLANDO, FL 32811

[Address](#)

2323 South Orange Avenue/Ste A
ORLANDO, FL 32806

[Address](#)

5355 Red Bug Lake Rd
WINTER SPRINGS, FL 32708

[Address](#)

10959 West Colonial Drive Unit 6 & 8
OVIDO, FL 32765

[Address](#)

968 W Mitchell Hammock Rd Ste 1050
OVIDO, FL 32765

[Address](#)

8132 Lee Vista Blvd Unit B
ORLANDO, FL 32829

[Address](#)

1615 East State Highway 50
CLERMONT, FL 34711

[Address](#)

720 SW 2nd Ave. Suite 160A
GAINESVILLE, FL 32601

[Address](#)

5355 Red Bug Lake Rd.
WINTER SPRINGS, FL 32708

[Address](#)

2555 S. Kirkman Road
ORLANDO, FL 32811

[Address](#)

2323 South Orange Ave, Suite A
ORLANDO, FL 32811

[Address](#)

136 Parliament Loop, Suite 102
ORLANDO, FL 32811

[Address](#)

3840 E. State Road 436 Suite:1000
APOPKA, FL 32703

[Address](#)

2415 SW College Road
OCALA, FL 34471

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ORLANDO, FL 32819

[Address](#)

512 E. Altamonte Drive
ALTAMONTE SPRINGS, FL 32701

[Address](#)

3925 NW 43rd St.
GAINESVILLE, FL 32606

[Address](#)

3581 SW Archer Road Suite 40
GAINESVILLE, FL 32608

[Address](#)

1414 E. Osceola Parkway
KISSIMMEE, FL 34744

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
LAMBIASO, MARLENE K MD	SUPERVISING DISPENSING PRACTITIONER	MEDICAL DOCTOR	41781	09/22/2020
LAMBIASO, MARLENE K MD	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	41781	09/28/2020
MIRARCHI, VINCENT JOSEPH	SUPERVISING PRESCRIBING PRACTITIONER	OSTEOPATHIC PHYSICIAN	12615	07/12/2018

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

The information on this page is a secure, primary source for license verification provided by the Florida Department of Health, Division of Medical Quality Assurance. This website is maintained by Division staff and is updated immediately upon a change to our licensing and enforcement database.

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