



JOCK M SNEDDON

License Number: ME22541

Data As Of 4/20/2026

Profession	Medical Doctor
License	ME22541
License Status	Clear/Active
Qualifications	Dispensing Practitioner
License Expiration Date	1/31/2027
License Original Issue Date	08/28/1974
Address of Record	7751 KINGSPONTE PARKWAY STE. 114 ORLANDO, FL 32819
Controlled Substance Prescriber (for the Treatment of Chronic Non- malignant Pain)	No
Discipline on File	No
Public Complaint	No

Secondary Locations

Address

2555 S KIRKMAN ROAD
ORLANDO, FL 32811

Address

968 W. Mitchell Hammock Rd. suite 1050
OVIEDO, FL 32765

Address

1414 E OSCEOLA PARKWAY
KISSIMMEE, FL 34744

Address

10959 West Colonial Dr. Units 6-8
OCOEE, FL 34761

Address

5100 S. Alafaya Trail
ORLANDO, FL 32831

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

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	Effective License	Date
HARRISON, GABRIELA DENISE	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9102367	3/14/2019
HARRISON, GABRIELA DENISE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9102367	3/14/2019
LONSDORFER, KIMMAI MAGALI	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9101310	5/16/2019
LONSDORFER, KIMMAI MAGALI	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9101310	5/16/2019
SMOOK, JASON DANIEL	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9107856	3/6/2019
SMOOK, JASON DANIEL	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9107856	3/6/2019
SOLANTIC OF ORLANDO LLC	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	3353	1/7/2010
SOLANTIC OF ORLANDO LLC	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	3354	1/7/2010
SOLANTIC OF ORLANDO LLC	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	3355	1/7/2010
SOLANTIC OF ORLANDO LLC	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	3352	1/7/2010
SOLANTIC OF SOUTH FLORIDA, LLC	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	4178	2/3/2011

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

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Division of Medical Quality Assurance
Public Records
4052 Bald Cypress Way, Bin C01
Tallahassee, FL 32399-3251

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