WILLIAM ALEXANDER MAHONEY

License Number: ME160726

Data As Of 7/27/2025

Profession Medical Doctor
License ME160726
License Status Clear/Active

Qualifications Dispensing Practitioner

License Expiration Date 1/31/2027 License Original Issue Date 01/30/2023

Address of Record 5985 Silver Falls Run

Suite 101

SARASOTA, FL 34202

Controlled Substance Prescriber

(for the Treatment of Chronic Non-

malignant Pain)

Discipline on File No Public Complaint No

Secondary Locations

Address

5504 Pinebrook Rd Suite 201 NORTH VENICE, FL 34275

Address

5741 Bee Ridge Rd Suite 450 SARASOTA SARASOTA, FL 34233

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

Talianassee, FL 32399-325

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
LAMBERT, CHASE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9111810	9/27/2023
THOMPSON, MEGAN	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9111631	9/27/2023

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

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