GILLIS LANGSTON

License Number: PA9112995

Data As Of 8/7/2025			
Profession	Physician Assistant		
License	PA9112995		
License Status	Clear/Active		
Qualifications	Dispensing Practitioner Prescribing		
License Expiration Date	1/31/2026		
License Original Issue Date	01/30/2020		
Address of Record	3334 Capital Medical Blvd., Suite 400 TALLAHASSEE, FL 32308		
Controlled Substance Prescriber	No		
(for the Treatment of Chronic Non- malignant Pain)			
Discipline on File	No		
Public Complaint	No		

Secondary Locations

Address 803 W. Main St. PERRY, FL 32347 Address 3051 6th St. MARIANNA, FL 32446

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
PRICE, RYAN CHRISTOPHER	SUPERVISING DISPENSING PRACTITIONER	OSTEOPATHIC PHYSICIAN	15308	05/20/2024
PRICE, RYAN CHRISTOPHER	SUPERVISING PRESCRIBING PRACTITIONER	OSTEOPATHIC PHYSICIAN	15308	02/20/2020

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

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