



STEPHANIE KATHERINE KINSEY

License Number: PA3558

Data As Of 11/23/2024

Profession	Physician Assistant
License	PA3558
License Status	CLEAR/Active
Qualifications	Prescribing Dispensing Practitioner
License Expiration Date	1/31/2026
License Original Issue Date	03/16/1998
Address of Record	410 Atlantic Blvd NEPTUNE BEACH, FL 32266
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint	No

Secondary Locations

[Address](#)

8705-2 Perimeter Park Blvd.
JACKSONVILLE, FL 32216

[Address](#)

2032 Dunn Ave.
JACKSONVILLE, FL 32223

[Address](#)

5805-1 Ramona Blvd.
JACKSONVILLE, FL 32205

[Address](#)

5964 NORMANDY BLVD.
JACKSONVILLE, FL 32205

[Address](#)

463941 SR 200
YULEE, FL 32097

[Address](#)

1708 BLANDING BLVD.
MIDDLEBURG, FL 32068

[Address](#)

2401 Monument Rd.
JACKSONVILLE, FL 32225

[Address](#)

1021 Cesery Blvd.
JACKSONVILLE, FL 32211

[Address](#)

4498 Hendricks Ave.
JACKSONVILLE, FL 32205

[Address](#)

2095 US Highway 1
ST AUGUSTINE, FL 32086

[Address](#)

2140 Kingsley Ave.
ORANGE PARK, FL 32073

Address

5915 Normandy Blvd.
JACKSONVILLE, FL 32205

Address

12303 San Jose Blvd.
JACKSONVILLE, FL 32223

Address

8711 Perimeter Park Blvd
JACKSONVILLE, FL 32216

Address

13460 Beach Blvd
JACKSONVILLE, FL 32224

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
THORPE, MARC W	SUPERVISING DISPENSING PRACTITIONER	MEDICAL DOCTOR	71481	07/27/2018
THORPE, MARC W	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	71481	07/27/2018

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

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