

CAROL LIPSCOMB MIRONES

License Number: SW17338

Data As Of 9/14/2026

Profession	Licensed Clinical Social Worker
License	SW17338
License Status	Clear/Active
Qualifications	Qualified Supervisor CSW
License Expiration Date	3/31/2027
License Original Issue Date	06/09/2020
Address of Record	2601 East Oakland Park Blvd. Suite 205 FORT LAUDERDALE, FL 33306
Discipline on File	No
Public Complaint	No

Secondary Locations

Address

12505 Orange Drive Suite 901
DAVIE, FL 33330

Address

10139 NW 31st Street Suite 102
CORAL SPRINGS, FL 33065

Address

3750 Gunn Hwy Suite 101
TAMPA, FL 33618

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.

Subordinate Practitioners

Name	Relationship	Profession	License	Effective Date
BLANKENSHIP, ELIZABETH EILEEN ESCUAGE	SUBORDINATE	CLINICAL SOCIAL WORKER INTERN	21943	6/2/2025
DUDAIE, ORLI	SUBORDINATE	CLINICAL SOCIAL WORKER INTERN	23007	2/4/2026
ELDER, SIERRA STRONG	SUBORDINATE	CLINICAL SOCIAL WORKER INTERN	21942	6/2/2025
HOROWITZ DE PAOLI, RENATA	SUBORDINATE	CLINICAL SOCIAL WORKER INTERN	21966	6/5/2025
MORIN, MIA	SUBORDINATE	CLINICAL SOCIAL WORKER INTERN	23422	6/24/2026
MUDANO, MIA	SUBORDINATE	CLINICAL SOCIAL WORKER INTERN	21968	2/17/2026
PLA, KIMBERLY	SUBORDINATE	CLINICAL SOCIAL WORKER INTERN	17075	2/26/2024
ROBERSON, TONYA LYNN	SUBORDINATE	CLINICAL SOCIAL WORKER INTERN	18033	4/12/2023
ROCHA, GABRIELLA ANNA MS	SUBORDINATE	CLINICAL SOCIAL WORKER INTERN	20409	5/29/2024
SANCHEZ PADRON, SAMANTHA	SUBORDINATE	CLINICAL SOCIAL WORKER INTERN	23790	8/16/2026
SANCHEZ, CHANTAL ZOILA	SUBORDINATE	CLINICAL SOCIAL WORKER INTERN	23495	8/16/2026
STEIN, TAYLOR	SUBORDINATE	CLINICAL SOCIAL WORKER INTERN	23432	6/25/2026
VEGA, ARIANNA R	SUBORDINATE	CLINICAL SOCIAL WORKER INTERN	18333	5/21/2025

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.

Secondary Locations

Address

12505 Orange Drive Suite 901
DAVIE, FL 33330

Address

10139 NW 31st Street Suite 102
CORAL SPRINGS, FL 33065

Address

3750 Gunn Hwy Suite 101
TAMPA, FL 33618

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.

Subordinate Practitioners

Name	Relationship	Profession	License	Effective Date
BLANKENSHIP, ELIZABETH EILEEN ESCUAGE	SUBORDINATE	CLINICAL SOCIAL WORKER INTERN	21943	6/2/2025
DUDAIE, ORLI	SUBORDINATE	CLINICAL SOCIAL WORKER INTERN	23007	2/4/2026
ELDER, SIERRA STRONG	SUBORDINATE	CLINICAL SOCIAL WORKER INTERN	21942	6/2/2025
HOROWITZ DE PAOLI, RENATA	SUBORDINATE	CLINICAL SOCIAL WORKER INTERN	21966	6/5/2025
MORIN, MIA	SUBORDINATE	CLINICAL SOCIAL WORKER INTERN	23422	6/24/2026
MUDANO, MIA	SUBORDINATE	CLINICAL SOCIAL WORKER INTERN	21968	2/17/2026
PLA, KIMBERLY	SUBORDINATE	CLINICAL SOCIAL WORKER INTERN	17075	2/26/2024
ROBERSON, TONYA LYNN	SUBORDINATE	CLINICAL SOCIAL WORKER INTERN	18033	4/12/2023
ROCHA, GABRIELLA ANNA MS	SUBORDINATE	CLINICAL SOCIAL WORKER INTERN	20409	5/29/2024
SANCHEZ PADRON, SAMANTHA	SUBORDINATE	CLINICAL SOCIAL WORKER INTERN	23790	8/16/2026
SANCHEZ, CHANTAL ZOILA	SUBORDINATE	CLINICAL SOCIAL WORKER INTERN	23495	8/16/2026
STEIN, TAYLOR	SUBORDINATE	CLINICAL SOCIAL WORKER INTERN	23432	6/25/2026
VEGA, ARIANNA R	SUBORDINATE	CLINICAL SOCIAL WORKER INTERN	18333	5/21/2025

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.