COMPLETE PAIN MANAGEMENT, P.L.

License Number: PMC100

Data As Of 9/14/2025

Profession Pain Management Clinic

License PMC100

License Status Admin Revoked/

License Expiration Date 1/1/0001

License Original Issue

Date 01/04/2010

Address of Record

4220 N. DAVIS HWY

Address of Necold 4220 N. DAVIS TW

SUITE- A100

PENSACOLA, FL 32503

Discipline on File No Public Complaint No

Secondary Locations

No secondary locations found.

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	Effective License Date
COX, JEFFERY	PAIN MANAGEMENT CLINIC OWNER	UNLICENSED FACILITY PERSONNEL	01/04/2010
GARRETT, RODGER KENNETH	MEDICAL DIRECTOR	MEDICAL DOCTOR	78069 12/31/2009

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

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