ALAN M FREEDMAN

License Number: ME35395

Data As Of 7/17/2025

Profession Medical Doctor License ME35395 License Status Clear/Active

Qualifications Dispensing Practitioner

License Expiration Date 1/31/2027 License Original Issue Date 10/11/1979

Address of Record SUNCOAST EYE CENTER, P.A. 14003 LAKESHORE BLVD.

HUDSON, FL 34667

Controlled Substance Prescriber

(for the Treatment of Chronic Non-

malignant Pain)

Discipline on File Yes **Public Complaint** Yes

Secondary Locations

SUNCOAST EYE CENTER 221 NE US HIGHWAY 19 CRYSTAL RIVER, FL 34429

Discipline/Admin Action

Emergency Actions

No Emergency Actions Found

Discipline Cases

Name	License	Profession	City	State	Case#	Action Taken
FREEDMAN, ALAN M	35395	MEDICAL DOCTOR	HUDSON	FL	200425388	OBLIGATION(S) SATISFIED

Public Complaints

Name	License	Profession	City	State	Case#	Action Taken
FREEDMAN, ALAN M	35395	MEDICAL DOCTOR	HUDSON	FL	200425388	AC FILED

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.

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