



## KYLE JACKSON KINMON DPM

### License Number: PO3007

Data As Of 6/7/2025

Profession	Podiatric Physician
License	PO3007
License Status	CLEAR/Active
Qualifications	Dispensing
License Expiration Date	3/31/2026
License Original Issue Date	06/11/2002
Address of Record	1601 CLINT MOORE RD SUITE 180 BOCA RATON, FL 33487
Controlled Substance Prescriber (for the Treatment of Chronic Non- malignant Pain)	No
Discipline on File	No
Public Complaint	No

### Secondary Locations

#### Address

7926 W Hillsborough Ave G  
TAMPA, FL 33615

#### Address

2595 Tampa Road Suite O  
PALM HARBOR, FL 34684

#### Address

2540 Winkler Ave  
FT MYERS, FL 33901

#### Address

1285 36th Street Suite 203  
VERO BEACH, FL 32960

#### Address

2300 N Commerce Pkwy Suite 321  
WESTON, FL 33326

#### Address

4879 COCONUT CREEK PKWY  
COCONUT CREEK, FL 33063

#### Address

1521 Forest Hill Blvd Suite 4  
WPB, FL 33406

#### Address

7730 West Boynton Beach Blvd Suite 7  
BOYNTON BEACH, FL 33437

#### Address

6405 N. Federal Highway Suite 405  
FORT LAUDERDALE, FL 33308

#### Address

140 Jupiter Lakes Blvd Suite A  
JUPITER, FL 33459

#### Address

817 Coral Ridge Drive  
CORAL SPRINGS, FL 33071

#### Address

4750 N Federal Highway Ste 200  
FT LAUDERDALE, FL 33308

#### Address

2664 SW Immanuel Drive  
PALM CITY, FL 34990

#### Address

669A West Lumsden Road  
BRANDON, FL 33511

#### Address

12681 New Brittany Blvd Suite 1E  
FORT MYERS, FL 33907

#### Address

7775 Lake Worth Road  
LAKE WORTH, FL 33467

#### Address

10446 Taft Street  
PEMBROKE PINES, FL 33026

#### Address

1401 16th Street N  
SAINT PETERSBURG, FL 33704

## 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.

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.