



## ANTOINETTE LOUISE LLOYD

License Number: ME58238

Data As Of 11/24/2024

Profession	Medical Doctor
License	ME58238
License Status	CLEAR/Active
License Expiration Date	1/31/2025
License Original Issue Date	08/17/1990
Address of Record	2701 51st St West LEHIGH ACRES, FL 33972
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	Yes
Discipline on File	Yes
Public Complaint	Yes

### Secondary Locations

No secondary locations found.

### Discipline/Admin Action

#### Emergency Actions

No Emergency Actions Found

#### Discipline Cases

Name	License	Profession	City	State	Case #	Action Taken
LLOYD, ANTOINETTE LOUISE	58238	MEDICAL DOCTOR	LEHIGH ACRES	FL	200915096	SUSPENSION SATISFIED

#### Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
LLOYD, ANTOINETTE LOUISE	58238	MEDICAL DOCTOR	LEHIGH ACRES	FL	200915096	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.

### Subordinate Practitioners

Name	Relationship	Profession	License	Effective Date
WILCOX, KAREN MARIE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9103500	3/24/2023

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

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