



## JOHN THOMPSON SULLEBARGER

### License Number: ME62629

Data As Of 8/4/2025

Profession	Medical Doctor
License	ME62629
License Status	Clear/Active
License Expiration Date	1/31/2026
License Original Issue Date	07/22/1992
Address of Record	4200 N Armenia Ave Suite 5 TAMPA, FL 33607
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	Yes
Discipline on File	Yes
Public Complaint	Yes

### Secondary Locations

#### Address

4210 W Linebaugh Ave  
TAMPA, FL 33624

### Discipline/Admin Action

#### Emergency Actions

No Emergency Actions Found

#### Discipline Cases

Name	License	Profession	City	State	Case #	Action Taken
SULLEBARGER, JOHN THOMPSON	62629	MEDICAL DOCTOR	TAMPA	FL	200815284	OBLIGATION(S) SATISFIED

#### Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
SULLEBARGER, JOHN THOMPSON	62629	MEDICAL DOCTOR	TAMPA	FL	200815284	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
FLORIDA CARDIOVASCULAR INSTITUTE P.A.	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	1769	1/5/2009
FLORIDA CARDIOVASCULAR INSTITUTE, P.A.	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	1622	1/3/2009

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

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