



MARK EDWARD FARMER

License Number: ME64459

Data As Of 8/16/2025

Profession	Medical Doctor
License	ME64459
License Status	Clear/Active
Qualifications	Dispensing Practitioner
License Expiration Date	1/31/2027
License Original Issue Date	07/08/1993
Address of Record	12670 CREEKSIDE LANE SUITE 202 FORT MYERS, FL 33919
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
FARMER, MARK EDWARD	64459	MEDICAL DOCTOR	FORT MYERS	FL	200438161	OBLIGATION(S) SATISFIED

Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
FARMER, MARK EDWARD	64459	MEDICAL DOCTOR	FORT MYERS	FL	200438161	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	Effective License Date	
EISENBERG, ERIC SCOTT	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9108735	8/27/2024
JONES, NICOLE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9114537	8/27/2024
ORTHOPEDIC CENTER OF FLORIDA	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	788	12/31/2008

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

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