



FRANK RAPHEAL COLLIER JR

License Number: ME69991

Data As Of 8/4/2025

Profession	Medical Doctor
License	ME69991
License Status	Clear/Active
Qualifications	Dispensing Practitioner
License Expiration Date	1/31/2027
License Original Issue Date	02/23/1996
Address of Record	10475 Centurion Pkwy N Suite 301 JACKSONVILLE, FL 32256
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	Yes
Discipline on File	Yes
Public Complaint	Yes

Secondary Locations

Address

232 Ponte Vedra Park Drive
PONTE VEDRA BEACH, FL 32082

Address

2300 Park Ave. SUITE 203
ORANGE PARK, FL 32073

Discipline/Admin Action

Emergency Actions

No Emergency Actions Found

Discipline Cases

Name	License	Profession	City	State	Case #	Action Taken
COLLIER, FRANK RAPHEAL	69991	MEDICAL DOCTOR	JACKSONVILLE	FL	202108974	OBLIGATION(S) SATISFIED

Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
COLLIER, FRANK RAPHEAL	69991	MEDICAL DOCTOR	JACKSONVILLE	FL	202108974	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
FRANK R COLLIER JR MD PA	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	2478	10/16/2009
STEINKE, PAUL CHRISTOPHER	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9107814	6/17/2022
STEINKE, PAUL CHRISTOPHER	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9107814	6/17/2022

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

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