### STEFANIE ELIZABETH CRAWFORD

### License Number: RN9536514

Data As Of 12/13/2025

Profession Registered Nurse
License RN9536514
License Status Emerg Suspens/
License Expiration Date 4/30/2026
License Original Issue Date 06/05/2020
Address of Record 372 17th Street

46 Amacano Ln

ST AUGUSTINE, FL 32084

Discipline on File No
Public Complaint Yes

Alerts Enforcement Alert

8/4/2025 5:36:57 PM

Voluntary Relinquishment of License Pending Board action filed 08/04/2025. <BR>

<BR> Emergency Suspension Order filed 06/03/2025.

# **Secondary Locations**

No secondary locations found.

# Discipline/Admin Action

## **Emergency Actions**

Name	License	Profession	City	County	State	Case#	Action Taken	Action Date
CRAWFORD, STEFANIE	9536514	REGISTERED NURSE	ST AUGUSTINE	ST.JOHNS	FL	202440841	ESO ISSUED	06/03/2025

### **Discipline Cases**

No Discipline Found

### **Public Complaints**

Name	License	Profession	City	State	Case#	Action Taken
CRAWFORD, STEFANIE ELIZABETH	9536514	REGISTERED NURSE	ST AUGUSTINE	FL	202440841	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.

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