



FERNANDO JOSE ARZOLA

License Number: ACN552

Data As Of 5/30/2025

Profession	Area of Critical Need Medical Doctor
License	ACN552
License Status	CLEAR/Active
Qualifications	Dispensing Practitioner
License Expiration Date	1/31/2026
License Original Issue Date	03/25/2014
Address of Record	406 PALMETTO ST STE A&B NEW SMYRNA BEACH, FL 32168
Controlled Substance Prescriber (for the Treatment of Chronic Non- malignant Pain)	Yes
Discipline on File	No
Public Complaint	No

Secondary Locations

Address

901 S Dixie Freeway Ste 905
NEW SMYRNA BEACH, FL 32168

Address

644 W Plymouth Avenue
DELAND, FL 32720

Address

1023 ST JOHNS AVENUE
PALATKA, FL 32177

Address

1668 S VOLUSIA AVENUE
ORANGE CITY, FL 32763

Address

4982 PALM COAST PARKWAY NE SUITE 1-3
PALM COAST, FL 32137

Address

106 N. Old Kings Road Suite B
ORMOND BEACH, FL 32174

Address

2984 S. Ridgewood Avenue Suite 1
EDGEWATER, FL 32141

Address

729 Beville Road East
S DAYTONA, FL 32119

Address

811 N. Summit Street
CRESCENT CITY, FL 32112

Address

4110 E. SR 44 Suite 507
WILDWOOD, FL 34785

Address

1375 Cassatt Avenue
JACKSONVILLE, FL 32205

[Address](#)

8011 Merrill Road Suite 11
JACKSONVILLE, FL 32277

[Address](#)

1542 Kingsley Avenue #146
ORANGE PARK, FL 32073

[Address](#)

2 McCormick Drive
PALM COAST, FL 32164

[Address](#)

747 Fawn Ridge Drive Suite 200
ORANGE CITY, FL 32763

[Address](#)

308 N 2nd Street
FLAGLER BEACH, FL 32136

[Address](#)

4542 Alba Street
PACE, FL 32571

[Address](#)

461 E. Ten Mile Road
PENSACOLA, FL 32534

[Address](#)

507 N. Navy Blvd
PENSACOLA, FL 32507

[Address](#)

925 N Stone Street
DELAND, FL 32720

[Address](#)

927 N. Spring Garden Avenue
DELAND, FL 32720

[Address](#)

700 Sterthaus Drive
ORMOND BEACH, FL 32174

[Address](#)

308 N. 2nd Street
FLAGLER BEACH, FL 32136

[Address](#)

21815 S.E. 71st Avenue
HAWTHORNE, FL 32640

[Address](#)

2460 Old Moultrie Road Suite 5
SAINT AUGUSTINE, FL 32086

[Address](#)

406 Palmetto Street Suite A & B
NEW SMYRNA BEACH, FL 32168

[Address](#)

1737 N. Clyde Morris Blvd Suite 150
DAYTONA BEACH, FL 32117

[Address](#)

1500 Beville Road
DAYTONA BEACH, FL 32114

[Address](#)

264 Palm Coast Parkway NE Unit A
PALM COAST, FL 32137

[Address](#)

21 Hospital Drive Suite 240
PALM COAST, FL 32164

[Address](#)

1114 SR 20

INTERLACHEN, FL 32148

[Address](#)

530 Zeagler Drive Suite A

PALATKA, FL 32177

[Address](#)

199 US Hwy 17 South Suite A

EAST PALATKA, FL 32131

[Address](#)

467 N St Suite A

GREEN COVE SPRINGS, FL 32043

[Address](#)

1037 W US Hwy 90 Suite 9

PORT CHARLOTTE, FL 33954

[Address](#)

18700 Veterans Blvd Suite 9

PORT CHARLOTTE, FL 33954

[Address](#)

2336 Surfside Blvd D103

CAPE CORAL, FL 33991

[Address](#)

810 NW 16th Avenue

GAINESVILLE, FL 32601

[Address](#)

7109 NW 11th Place Suite E

GAINESVILLE, FL 32605

[Address](#)

62 Spring Vista Dr Suite 100

DEBARY, FL 32713

[Address](#)

245 N Causeway

NEW SMYRNA BEACH, FL 32168

Discipline/Admin Action

Emergency Actions

No Emergency Actions Found

Discipline Cases

No Discipline Found

Public Complaints

No Public Complaint Found

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.

Supervising Practitioners

Name	Relationship	Profession	Effective License Date
AMERICAN CARE OF SOUTH FLORIDA, INC	AREA OF CRITICAL NEED FACILITY	MEDICAL RELATED PROCESS ENTITY	02/03/2014
ISLAND DOCTORS	AREA OF CRITICAL NEED FACILITY	MEDICAL RELATED PROCESS ENTITY	09/29/2023

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

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