



ROBERT B SPERRAZZA

License Number: ME94438

Data As Of 6/29/2025

Profession	Medical Doctor
License	ME94438
License Status	Probation/Active
License Expiration Date	1/31/2026
License Original Issue Date	10/04/2005
Address of Record	1135 Big Sky drive WESLEY CHAPEL, FL 33543
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	Yes
Public Complaint	Yes
Alerts	Enforcement Alert 9/13/2021 10:56:04 AM Final Order filed 12/27/2016 imposed a permanent restriction.

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
SPERRAZZA, ROBERT B	94438	MEDICAL DOCTOR	WESLEY CHAPEL	FL	201017905	SUSPENSION
SPERRAZZA, ROBERT B	94438	MEDICAL DOCTOR	WESLEY CHAPEL	FL	201109968	SUSPENSION
SPERRAZZA, ROBERT B	94438	MEDICAL DOCTOR	WESLEY CHAPEL	FL	201110201	SUSPENSION
SPERRAZZA, ROBERT B	94438	MEDICAL DOCTOR	WESLEY CHAPEL	FL	201309149	SUSPENSION

Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
SPERRAZZA, ROBERT B	94438	MEDICAL DOCTOR	WESLEY CHAPEL	FL	201109968	AC FILED
SPERRAZZA, ROBERT B	94438	MEDICAL DOCTOR	WESLEY CHAPEL	FL	201110201	AC FILED
SPERRAZZA, ROBERT B	94438	MEDICAL DOCTOR	WESLEY CHAPEL	FL	201017905	AC FILED
SPERRAZZA, ROBERT B	94438	MEDICAL DOCTOR	WESLEY CHAPEL	FL	201309149	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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