Florida HEALTH Department of Health

JAMIE RENE KINSEY

License Number: PA9106162

Data As Of 10/29/2026

Profession	Physician Assistant
License	PA9106162
License Status	Clear/Active
Qualifications	Prescribing Dispensing Practitioner
License Expiration Date	1/31/2028
License Original Issue Date	09/15/2011
Address of Record	12105 W Linebaugh Ave Unit 207 TAMPA, FL 33626
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint	No

Secondary Locations

Address
10500 Ulmerton Road Suite 202
LARGO, FL 33771

Address
26812 North Hwy 19
CLEARWATER, FL 33761

Address
3030 4th Street N
SAINT PETERSBURG, FL 33704

Address
7321 Park Blvd N
PINELLAS PARK, FL 33781

Address
2420 Gulf To Bay Blvd Suite 5
CLEARWATER, FL 33765

Address
8849 State Road 52
HUDSON, FL 34667

Address
2404 US Highway 19
HOLIDAY, FL 34691

Address
34621 US Highway 19
PALM HARBOR, FL 34684

Address
13256 State Road 54
ODESSA, FL 33556

Address
3700 US Hwy 98 N Suite 101
LAKELAND, FL 33809

Address
13610 Bruce B Downs Blvd
TAMPA, FL 33613

Address
408 East Brandon Blvd
BRANDON, FL 33511
Address
2102 S Dale Mabry Hwy
TAMPA, FL 33629
Address
10943 Causeway Blvd
BRANDON, FL 33511

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	License	Effective Date
DAVIS, RANDAL LEE	SUPERVISING DISPENSING PRACTITIONER	MEDICAL DOCTOR	110579	07/20/2026
LEE, SIN PING	SUPERVISING DISPENSING PRACTITIONER	MEDICAL DOCTOR	91558	08/14/2025
LEE, SIN PING	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	91558	08/14/2025

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

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