# ANNETTE SUZANNE MURPHY

# License Number: PA9106337

Data As Of 7/8/2025

Profession Physician Assistant

License PA9106337
License Status Clear/Active
Qualifications Prescribing
License Expiration Date 1/31/2026
License Original Issue Date 11/21/2011

Address of Record 106 BOSTON AVENUE STE 100
ALTAMONTE SPRINGS, FL 32701

Controlled Substance Prescriber No

(for the Treatment of Chronic Non-

malignant Pain)

Discipline on File No Public Complaint No

# **Secondary Locations**

### Address

3900 Lake Center Dr Unit A ASSOCIATES IN DERMATOLOGY MOUNT DORA, FL 32757

### Address

530 OCOEE COMMERCE PKWY ASSOCIATES IN DERMATOLOGY

OCOEE, FL 34761

### Address

1118 CYPRESS GLEN CIRCLE ASSOCIATES IN DERMATOLOGY CLERMONT, FL 34714

# Address

339 CYPRESS PARKWAY STE 110 ASSOCIATES IN DERMATOLOGY

POINCIANA, FL 34758

## Address

725 E OAK ST ASSOCIATES IN DERMATOLOGY

KISSIMMEE, FL 34744

# Address

531 WEKIVA COMMONS CIRCLE ASSOCIATES IN DERMATOLOGY APOPKA, FL 32712

# Address

1655 E STATE RD 50 STE 201 ASSOCIATES IN DERMATOLOGY KISSIMMEE, FL 34744

### Addross

2205 N. BOULEVARD WEST ASSOCIATES IN DERMATOLOGY DAVENPORT, FL 33837

### Address

106 BOSTON AVE STE 100 ASSOCIATES IN DERMATOLOGY ALTAMONTE SPRINGS, FL 32701

### Address

1389 U.S. 301 ASSOCIATES IN DERMATOLOGY SUMTERVILLE, FL 33585

# Address

3106 17TH ST ASSOCIATES IN DERMATOLOGY SAINT CLOUD, FL 34769

Address

400 CELEBRATION PL STE A-120 ASSOCIATES IN DERMATOLOGY CELEBRATION, FL 34747

### Address

2425 South Park Avenue Associates In Dermatology

SANFORD, FL 32771

#### Address

7932 W. SAND LAKE RD STE 202 ASSOCIATES IN DERMATOLOGY

ORLANDO, FL 32819

### Address

7824 Lake Underhill Blvd. ASSOCIATES IN DERMATOLOGY

ORLANDO, FL 32822

# 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
GELIKMAN, GRIGORY	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	85172	04/25/2016

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

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