## **RODERICK NEAL BENNETT**

# License Number: ME98577

Data As Of 8/22/2025

Profession Medical Doctor
License ME98577
License Status Clear/Active
License Expiration Date 1/31/2027
License Original Issue Date 05/03/2007

Address of Record 10461 Quality Drive SPRING HILL, FL 34609

No

Controlled Substance Prescriber (for the Treatment of Chronic Non-

malignant Pain)

Discipline on File No Public Complaint No

# **Secondary Locations**

#### Address

1520 N Meadowcrest Blvd CRYSTAL RIVER, FL 34429

#### Address

2703 Forest Rd

SPRING HILL, FL 34606

### Address

890 S. Oak Crest Path LECANTO, FL 34461

#### Address

60 Veterans Ave

BROOKSVILLE, FL 34601

#### Address

6388 Barclay Ave

SPRING HILL, FL 34609

### Address

3445 Bob Hartung Ct

SPRING HILL, FL 34606

#### Address

7300 Winter Street

BROOKSVILLE, FL 34613

### Address

9252 Spring Hill Drive SPRING HILL, FL 34608

# 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.

# **Subordinate Practitioners**

Name	Relationship	Profession	License	Effective Date
CITRUS COUNTY FIRE RESCUE	SERVICE PROVIDER	EMS SERVICE PROVIDER ALS	10021	1/8/2020
POST, CYNTHIA SUE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	3617	9/13/2017
QAYYUM, MOHAMMAD SOHAIB	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9109803	10/11/2024
UDANI, SARA ELIZABETH	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9115320	4/21/2022

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

The information on this page is a secure, primary source for license verification provided by the Florida Department of Health, Division of Medical Quality Assurance. This website is maintained by Division staff and is updated immediately upon a change to our licensing and enforcement database.