# SCOTT ERIC GOLDSMITH

# License Number: ME100084

Data As Of 6/9/2025

Profession Medical Doctor
License ME100084
License Status CLEAR/Active

Qualifications Dispensing Practitioner

License Expiration Date 1/31/2026
License Original Issue Date 09/27/2007

Address of Record 420 NORTH PLANT AVE PLANT CITY, FL 33563

Controlled Substance Prescriber No

(for the Treatment of Chronic Non-

malignant Pain)

Discipline on File No Public Complaint No

# **Secondary Locations**

#### Address

10740 PALM RIVER ROAD SUITE 310

TAMPA, FL 33619

### Address

6901 SIMMONS LOOP SUITE 201

RIVERVIEW, FL 33578

#### Address

4541 S DALE MABRY HWY #200

TAMPA, FL 33611

## Address

400 Avenue K SE Building #4 WINTER HAVEN, FL 33880

#### Address

13837 Circa Crossing Dr

LITHIA, FL 33547

# 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.

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