



## CAROL ANN REIVE

License Number: RN2986772

Data As Of 7/17/2025

Profession	Registered Nurse
License	RN2986772
License Status	Clear/Active
Qualifications	Single-state License
License Expiration Date	4/30/2027
License Original Issue Date	10/03/1995
Address of Record	1021 N. State Rd ROYAL PALM BEACH, FL 33411
Discipline on File	No
Public Complaint	No

## Secondary Locations

### [Address](#)

10081 W OAKLAND PARK  
SUNRISE, FL 33351

### [Address](#)

7007 W BROWARD BLVD  
PLANTATION, FL 33317

### [Address](#)

9650 PINES BLVD  
PEMBROKE PINES, FL 33024

### [Address](#)

1770 NE MIAMI GARDENS DR UNIT 1  
NORTH MIAMI BEACH, FL 33179

### [Address](#)

6868 FOREST HILL BLVD  
GREEN ACRES, FL 33413

### [Address](#)

4036 HILLSBORO BLVD MD NOW MEDICAL CENTERS, INC  
DEERFIELD BEACH, FL 33442

### [Address](#)

6240 CORAL RIDGE DRIVE SUITE 105 MD NOW MEDICAL CENTERS  
CORAL SPRINGS, FL 33076

### [Address](#)

7035 BERACASA WAY  
BOCA RATON, FL 33433

### [Address](#)

2007 PALM BEACH LAKES BLVD  
WEST PALM BEACH, FL 33409

### [Address](#)

2272 N. CONGRESS AVE  
BOYNTON BEACH, FL 33426

### [Address](#)

9060 N. MILITARY TRAIL  
PALM BEACH GARDENS, FL 33410

### [Address](#)

7593 Boynton Beach Boulevard Suite 190  
BOYNTON BEACH, FL 33437

Address

4520 Donald Ross Road Suite 100  
PALM BEACH GARDENS, FL 33418

Address

1809 N. University Drive  
CORAL SPRINGS, FL 33071

Address

1021 North State Road 7  
ROYAL PALM BEACH, FL 33411

Address

19090 State Road 7  
BOCA RATON, FL 33498

Discipline/Admin Action

Please also check the Discipline/Admin action of the other license by clicking on the "Other License" tab.

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.

Other License

Name	Relationship	Profession	License	Effective Date
	APRN CONVERSION	ADVANCED PRACTICE REGISTERED NURSE	2986772	10/19/2018

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

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