



## CHERYL STEELE NEWCOMB

License Number: RN9181339

Data As Of 7/18/2025

Profession	Registered Nurse
License	RN9181339
License Status	Null And Void/
Qualifications	Single-state License
License Expiration Date	4/30/2019
License Original Issue Date	08/14/2001
Address of Record	If further information is needed, please contact the Department of Health at (850) 488-0595.
Discipline on File	No
Public Complaint	No

## Secondary Locations

### Address

5504 5504 Gateway Blvd  
WESLEY CHAPEL, FL 33544

### Address

11969 Sheldon Road  
WESTCHASE, FL 33626

### Address

4505 4505 Gunn Highway  
TAMPA, FL 33624

### Address

11406 US 301 S  
RIVERVIEW, FL 33578

### Address

303 W Palm Ave  
TAMPA, FL 33602

### Address

7601 Seminole Blvd  
SEMINOLE, FL 33772

### Address

3251 66th St N  
SAINT PETERSBURG, FL 33710

## 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

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	9181339	10/19/2018

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

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