# CHERYL STEELE NEWCOMB

## License Number: APRN9181339

Data As Of 7/18/2025			
Profession	Advanced Practice Registered Nurse		
License	APRN9181339		
License Status	Clear/Active		
Qualifications	Nurse Practitioner		
	Dispensing Practitioner		
License Expiration Date	4/30/2027		
License Original Issue Date	10/28/2014		
Address of Record	2810 Manatee Avenue East		
	BRADENTON, FL 34208		
Controlled Substance Prescriber	No		
(for the Treatment of Chronic Non-			
malignant Pain)			
Discipline on File	No		
Public Complaint	No		

# Secondary Locations

### Address

4728 North Habana Avenue Suite 101B TAMPA, FL 33614

#### Address

2055 Wood Street Suite 202 SARASOTA, FL 34237

### Address

401 Corbett St Suite 300 CLEARWATER, FL 33756

#### Address

25 West Kaley Street Suite 301 ORLANDO, FL 32806

#### Address

205 South Moon Avenue Suite 105 BRANDON, FL 33511

## **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:

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	REGISTERED NURSE	9181339	10/19/2018

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.