



JULIE MICHELLE BROOKINS

License Number: RN9231382

Data As Of 7/17/2025

Profession	Registered Nurse
License	RN9231382
License Status	DELINQUENT/
Qualifications	Single-state License
License Expiration Date	4/30/2025
License Original Issue Date	07/11/2005
Address of Record	10808 Rosecroft Path Ct TAMPA, FL 33626
Discipline on File	Yes
Public Complaint	Yes

Secondary Locations

No secondary locations found.

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

Name	License	Profession	City	State	Case #	Action Taken
BROOKINS, JULIE MICHELLE	9231382	REGISTERED NURS	TAMPA	FL	202348088	OBLIGATIONS IMPOSED

Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
BROOKINS, JULIE MICHELLE	9231382	REGISTERED NURSE	TAMPA	FL	202348088	AC FILED

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	9231382	10/19/2018

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

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