### **DEBORAH A LYNCH**

## License Number: APRN11007436

Profession Advanced Practice Registered Nurse

License Status Null And Void/
Year Began Practicing Not Provided
License Expiration 04/30/2022

Date

# **General Information**

This profile is not publishable pending confirmation by the practitioner.

## **Primary Practice Address**

DEBORAH A LYNCH 1115 LAKE SHORE DRIVE, APT 102 LAKE PARK, FL 33403

#### **Email Address**

Please contact at: lynchdal@aol.com