### MATHEW MCCUNE

## License Number: ME105881

Data As Of 7/18/2025

Profession Medical Doctor
License ME105881
License Status Clear/Active

Qualifications Dispensing Practitioner

License Expiration Date 1/31/2026
License Original Issue Date 11/23/2009

Address of Record 930 MAR WALT DRIVE

SUITE C

Yes

FORT WALTON BEACH, FL 32547

Controlled Substance Prescriber (for the Treatment of Chronic Non-

malignant Pain)

Discipline on File No Public Complaint No

# **Secondary Locations**

#### Address

2110 W 23rd Street Ste A PANAMA CITY, FL 32405

#### Address

6044 Doctors Park MILTON, FL 32570

## Address

210 S Main St

CRESTVIEW, FL 32536

#### Address

325 John Knox Rd Bldg 200 TALLAHASSEE, FL 32303

#### Address

5111 N 12th Ave.

PENSACOLA, FL 32504

# Discipline/Admin Action

### **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.

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