JAY T. HOFFMAN

License Number: OS11387

Data As Of 7/17/2025

Profession Osteopathic Physician

License OS11387
License Status Null And Void/

Qualifications Dispensing Practitioner

License Expiration Date 3/31/2018
License Original Issue Date 07/08/2011

Address of Record If further information is needed, please contact the Department of Health at (850) 488-

0595.

Controlled Substance Prescriber Yes

(for the Treatment of Chronic Non-

malignant Pain)

Discipline on File No Public Complaint No

Secondary Locations

Address

206 East Brandon Blvd MedExpress Urgent Care

BRANDON, FL 33511

Address

13610 North Bruce B Downs MedExpress Urgent Care

TAMPA, FL 33613

Address

801 West M.L.K. Blvd MedExpress Urgent Care

SEFFNER, FL 33584

Address

13856 North Dale Mabry MedExpress Urgent Care

TAMPA, FL 33618

Address

22945 S.R. 54 MedExpress Urgent Care

LUTZ, FL 33549

Address

20677 Bruce B Downs MedExpress Urgent Care

TAMPA, FL 33647

Address

11985 Atlantic Blvd

JACKSONVILLE, FL 32277

Address

13005 Collier Blvd

NAPLES, FL 34116

Address

1328 North Woodland Blvd

DELAND, FL 32720

Address

2200 Tamiami Trail

PORT CHARLOTTE, FL 33948

Address

7720 Merrill Road

JACKSONVILLE, FL 32277

Address

26812 US Hwy 19N

CLEARWATER, FL 33761

Address

2810 West Martin Luther Blvd

TAMPA, FL 33607

Address

10500 Ulmerton Road Suite 202

LARGO, FL 33771

Address

8849 State Road 52 Med Express Urgent Care - Hudson

HUDSON, FL 34667

Address

5616 Tuscola Blvd MedExpress Urgent Care - North Port

NORTH PORT, FL 34287

Address

313 SW Pine Island Road Med Express Urgent Care-Cape Coral

CAPE CORAL, FL 33991

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:
- Full name and license number of the practitioner;
 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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