



## ADAM FRANKLIN JESTER M.D.

### License Number: ME124140

Data As Of 7/17/2025

Profession	Medical Doctor
License	ME124140
License Status	Clear/Active
Qualifications	Dispensing Practitioner
License Expiration Date	1/31/2027
License Original Issue Date	05/12/2015
Address of Record	13837 Circa Crossing Dr LITHIA, FL 33547
Controlled Substance Prescriber (for the Treatment of Chronic Non- malignant Pain)	No
Discipline on File	No
Public Complaint	No

### Secondary Locations

#### Address

400 Avenue K SE Building #4 ORTHOPAEDIC MEDICAL GROUP OF TAMPA BAY  
WINTER HAVEN, FL 33880

#### Address

6901 SIMMONS LOOP ORTHOPAEDIC MEDICAL GROUP OF TAMPA BAY  
RIVERVIEW, FL 33578

#### Address

420 N PLANT AVE ORTHOPAEDIC MEDICAL GROUP OF TAMPA BAY  
PLANT CITY, FL 33563

#### Address

4541 S. DALE MABRY, #200  
TAMPA, FL 33611

#### Address

2805 54th Ave N Suite 100  
SAINT PETERSBURG, FL 33714

#### Address

10740 PALM RIVER ROAD #310  
TAMPA, FL 33619

### 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.

Subordinate Practitioners

Name	Relationship	Profession	License	Effective Date
CHAMBERS, COLIN ROBERT	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9108739	3/22/2018
HARRIS, LUCY MAE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9113590	10/4/2020

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.