



AMANDA ELIZABETH HAFER

License Number: OS14465

Data As Of 8/4/2025

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|--|---|
| Profession | Osteopathic Physician |
| License | OS14465 |
| License Status | Clear/Active |
| Qualifications | Dispensing Practitioner |
| License Expiration Date | 3/31/2026 |
| License Original Issue Date | 02/14/2017 |
| Address of Record | 5360 University Parkway SARASOTA, FL 34243 |
| Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain) | No |
| Discipline on File | No |
| Public Complaint | No |

Secondary Locations

Address

997 U.S. 41 Bypass N
VENICE, FL 34285

Address

6331 S Tamiami Trail
SARASOTA, FL 34231

Address

5590 Bee Ridge Blvd Bldg A
SARASOTA, FL 34233

Address

500 John Ringling Blvd
SARASOTA, FL 34236

Address

1040 River Heritage Blvd
BRADENTON, FL 34212

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

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 |
|-----------------------|--------------|----------------|---------|----------------|
| DAVIS, RANDAL LEE | SUBORDINATE | MEDICAL DOCTOR | 110579 | 2/21/2020 |
| GERBER, JOEL LAWRENCE | SUBORDINATE | MEDICAL DOCTOR | 84098 | 10/1/2020 |
| WILLIAMS, BRETT TUROS | SUBORDINATE | MEDICAL DOCTOR | 101891 | 10/1/2020 |

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

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