



## PAIGE E MACKENZIE

License Number: PA9112556

Data As Of 7/6/2025

Profession	Physician Assistant
License	PA9112556
License Status	Clear/Active
Qualifications	Prescribing
License Expiration Date	1/31/2026
License Original Issue Date	09/18/2019
Address of Record	52 W Underwood St ORLANDO, FL 32806
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	Yes
Discipline on File	No
Public Complaint	No

## Secondary Locations

### Address

521 W. SR 434  
LONGWOOD, FL 32750

### Address

555 W. SR 434  
LONGWOOD, FL 32750

### Address

1000 W. Colonial Dr  
OCOEE, FL 34761

### Address

1000 W. Colonial Dr Ste. 282  
OCOEE, FL 34761

### Address

591 Outer Rd Ste A  
ORLANDO, FL 32814

### Address

61 Riley Rd  
KISSIMMEE, FL 34747

### Address

1900 Don Wickham Dr  
CLERMONT, FL 34711

### Address

100 N. Dean Rd Ste 202  
ORLANDO, FL 32825

### Address

17000 Porter Rd Ste 201  
WINTER GARDEN, FL 34787

### Address

725 Rodel Cove Ste 201  
LAKE MARY, FL 32746

### Address

52 W. Underwood St  
ORLANDO, FL 32806

### Address

1222 S. Orange Ave 3rd and 4th floors  
ORLANDO, FL 32806

[Address](#)

9400 Turkey Lake Rd  
ORLANDO, FL 32819

[Address](#)

7236 Stonerock Cir  
ORLANDO, FL 32819

[Address](#)

1001 East Osceola Pkwy  
KISSIMMEE, FL 34744

[Address](#)

1000 W. Broadway St. Ste 105A  
OVIEDO, FL 32765

[Address](#)

7234 Della Drive ste B  
ORLANDO, FL 32819

## 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.

## Supervising Practitioners

Name	Relationship	Profession	License	Effective Date
COVELLI, CHRISTINA RUTH	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	109150	04/29/2024

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

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