Florida HEALTH Department of Health

# STEVEN MICHAEL VALENTINE

## License Number: PA9112470

*Data As Of 11/23/2026*

| | |
|---|---|
| Profession | Physician Assistant |
| License | PA9112470 |
| License Status | Clear/Active |
| Qualifications | Prescribing |
| License Expiration Date | 1/31/2028 |
| License Original Issue Date | 09/05/2019 |
| Address of Record | ORMC<br>52 West Underwood Street<br>ORLANDO, FL 32806 |
| Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain) | No |
| Discipline on File | No |
| Public Complaint | No |

## Secondary Locations

Address
380 Rinhart Rd Lake Mary ED
LAKE MARY, FL 32746

Address
17430 Bali Blvd Fours Corners
WINTER GARDEN, FL 34787

Address
Osceola Tupperware FSED 1001 E. Osceola Parkway
KISSIMMEE, FL 34744

Address
South Seminole Hospital 555 W. SR 434
LONGWOOD, FL 32750

Address
Arnold Palmer Hospital 92 West Miller Street
ORLANDO, FL 32806

Address
Dr. P. Phillips Hospital 9400 Turkey Lake Road
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 |
|---|---|---|---|---|
| BARTON, J BENJAMIN | SUPERVISING PRESCRIBING PRACTITIONER | MEDICAL DOCTOR | 135735 | 12/06/2019 |
| BLUE, REBECCA SUZANNE | SUPERVISING PRESCRIBING PRACTITIONER | MEDICAL DOCTOR | 136335 | 11/26/2019 |
| BROWN, RICHARD | SUPERVISING PRESCRIBING PRACTITIONER | MEDICAL DOCTOR | 132286 | 12/06/2019 |
| CHAVEZ, SILVIO HORACIO | SUPERVISING PRESCRIBING PRACTITIONER | MEDICAL DOCTOR | 72616 | 11/26/2019 |
| GULENAY, GEORGE | SUPERVISING PRESCRIBING PRACTITIONER | MEDICAL DOCTOR | 144767 | 08/05/2020 |

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

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