



## CASSANDRA JOELLE OWENS

License Number: PA9116070

Data As Of 9/7/2025

Profession	Physician Assistant
License	PA9116070
License Status	Clear/Active
Qualifications	Dispensing Practitioner Prescribing
License Expiration Date	1/31/2026
License Original Issue Date	06/14/2022
Address of Record	6117 Gunn Highway TAMPA, CITRUS PARK, FL 33625
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	Yes
Discipline on File	No
Public Complaint	No

## Secondary Locations

### Address

11969 Sheldon Rd  
TAMPA, FL 33626

### Address

4505 Gunn Hwy  
TAMPA, FL 33624

### Address

5504 Gateway Blvd  
WESLEY CHAPEL, FL 33544

### Address

11406 S. US Highway US-301  
RIVERVIEW, FL 33578

### Address

799 W Lumsden Rd.  
BRANDON, FL 33511

### Address

16521 US-301  
WIMAUMA, FL 33598

### Address

5464 Lithia Pinecrest Dr  
LITHIA, FL 33547

### Address

303 W. Palm Ave  
TAMPA, FL 33602

### Address

564 Channelside Dr  
TAMPA, FL 33602

### Address

3301 W. Gandy Blvd  
TAMPA, FL 33611

### Address

3251 66th Street North  
SAINT PETERSBURG, FL 33710

Address

7601 Seminole Blvd  
SEMINOLE, FL 33772

Address

40545 US Hwy. 19 N  
TARPON SPRINGS, FL 34689

Address

6182 N US Hwy 41  
APOLLO BEACH, FL 33572

Address

2810 W Martin Luther King Jr.  
TAMPA, FL 33607

Address

13856 N Dale Mabry Hwy  
TAMPA, FL 33618

Address

4949 4th Street N  
SAINT PETERSBURG, FL 33703

Address

22945 State Rd 54  
LUTZ, FL 33549

Address

13531 State Rd 54  
ODESSA, FL 33556

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
EPTING, TIMOTHY CHARLES	SUPERVISING PRESCRIBING PRACTITIONER	OSTEOPATHIC PHYSICIAN	11197	07/01/2022
NANDA, PAUL KALRA	SUPERVISING DISPENSING PRACTITIONER	MEDICAL DOCTOR	117861	06/17/2025
NANDA, PAUL KALRA	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	117861	06/17/2025

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

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