



REBECCA KAITLIN DOUGLAS

License Number: PA9116143

Data As Of 4/20/2026

Profession	Physician Assistant
License	PA9116143
License Status	DELINQUENT/
Qualifications	Prescribing Dispensing Practitioner
License Expiration Date	1/31/2026
License Original Issue Date	07/05/2022
Address of Record	2615 N. Monroe Street Suite #1 TALLAHASSEE, FL 32303
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint	No

Secondary Locations

[Address](#)

1702 Ohio Ave. N
LIVE OAK, FL 32064

[Address](#)

5861 Dogwood Drive
MILTON, FL 32570

[Address](#)

14044 SE 48th Avenue
STARKE, FL 32091

[Address](#)

2261 Northwest 43rd Street
GAINESVILLE, FL 32605

[Address](#)

16314 Northwest US Highway 441
ALACHUA, FL 32615

[Address](#)

19545 S State Road 228
MACCLENNY, FL 32063

[Address](#)

542435 US Highway 1
CALLAHAN, FL 32011

[Address](#)

1730 Pat Thomas Parkway
QUINCY, FL 32351-8681

[Address](#)

16 Bahia Avenue Place
OCALA, FL 34472

[Address](#)

10251 Sorrento Rd
PENSACOLA, FL 32507

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
LEE, MATTHEW CHRISTOPHER	SUPERVISING DISPENSING PRACTITIONER	MEDICAL DOCTOR	112458	05/20/2024
LEE, MATTHEW CHRISTOPHER	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	112458	08/01/2022
PARK, THOMAS MATTHEW	SUPERVISING DISPENSING PRACTITIONER	MEDICAL DOCTOR	85708	05/23/2024
PARK, THOMAS MATTHEW	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	85708	08/02/2022
PATEL, NICK ROHIT	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	113883	05/26/2025

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

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