



## BILL BYRD MD

### License Number: ME43323

Data As Of 1/12/2026

Profession	Medical Doctor
License	ME43323
License Status	Clear/Active
Qualifications	Dispensing Practitioner
License Expiration Date	1/31/2026
License Original Issue Date	12/13/1983
Address of Record	1013 N State Rd 434 Ste 1060 ALTAMONTE SPRINGS, FL 32714
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	Yes
Discipline on File	Yes
Public Complaint	Yes

### Secondary Locations

#### Address

3385 S US Highway 17/92 Ste 285  
CASSELBERRY, FL 32707

### Discipline/Admin Action

#### Emergency Actions

No Emergency Actions Found

#### Discipline Cases

Name	License	Profession	City	State	Case #	Action Taken
BYRD, BILL	43323	MEDICAL DOCTOR	ALTAMONTE SPRINGS	FL	199601029	OBLIGATIONS IMPOSED-OTHR PENAL
BYRD, BILL	43323	MEDICAL DOCTOR	ALTAMONTE SPRINGS	FL	200001524	OBLIGATIONS IMPOSED
BYRD, BILL	43323	MEDICAL DOCTOR	ALTAMONTE SPRINGS	FL	200227864	PROBATION SATISFIED

#### Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
BYRD, BILL	43323	MEDICAL DOCTOR	ALTAMONTE SPRINGS	FL	200227864	AC FILED

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.

Subordinate Practitioners

Name	Relationship	Profession	License	Effective Date
CHEN, STEPHANIE ANDREA	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9117566	10/29/2025
FAMILY PHYSICIANS OF WINTER PARK, PA	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	2737	11/20/2009

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

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