# GARY LEE MARDER

## License Number: OS4773

Data As Of 7/23/2025	
Profession	Osteopathic Physician
License	OS4773
License Status	Disc Relinquish/
License Expiration Date	3/31/2018
License Original Issue Date	09/24/1984
Address of Record	If further information is needed, please contact the Department of Health at (850) 488- 0595.
Controlled Substance Prescriber	No
(for the Treatment of Chronic Non-	
malignant Pain)	
Discipline on File	Yes
Public Complaint	Yes
Secondary Locations	
Address	

202 NE 2nd Street #2 OKEECHOBEE, FL 34972

# Discipline/Admin Action

### **Emergency Actions**

No Emergency Actions Found

### **Discipline Cases**

Name	License	Profession	City	State	Case #	Action Taken
MARDER, GARY LEE	4773	OSTEOPATHIC PHY	PORT ST LUCIE	FL	199517768	OBLIGATIONS IMPOSED
MARDER, GARY LEE	4773	OSTEOPATHIC PHY	PORT ST LUCIE	FL	199605071	OBLIGATIONS IMPOSED
MARDER, GARY LEE	4773	OSTEOPATHIC PHY	PORT ST LUCIE	FL	199613114	OBLIGATIONS IMPOSED
MARDER, GARY LEE	4773	OSTEOPATHIC PHY	PORT ST LUCIE	FL	201628008	VOLUNTARY SURRENDER

# **Public Complaints**

Name	License	Profession	City	State	Case #	Action Taken
MARDER, GARY LEE	4773	OSTEOPATHIC PHYSICIAN	PORT ST LUCIE	FL	201628008	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.

The information on this page is a secure, primary source for license verification provided by the Florida Department of Health, Division of Medical Quality Assurance. This website is maintained by Division staff and is updated immediately upon a change to our licensing and enforcement database.