



LESLIE R SANDLER

License Number: ME49734

Data As Of 4/20/2026

| | |
|-----------------------------|-------------------------|
| Profession | Medical Doctor |
| License | ME49734 |
| License Status | Clear/Active |
| Qualifications | Dispensing Practitioner |
| License Expiration Date | 1/31/2028 |
| License Original Issue Date | 12/10/1986 |

| | |
|--|---|
| Address of Record | This practitioner does not have an address of record on file with the department. If you have any questions, please contact the department at (850) 488-0595. |
| Address of Record | NOT PRACTICING |
| Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain) | No |
| Discipline on File | No |
| Public Complaint | No |

Secondary Locations

Address

1021 NORTH STATE ROAD 7
ROYAL PLM BEACH, FL 33411

Address

7593 BOYTON BEACH BLVD. SUITE 190
BOYNTON BEACH, FL 33437

Address

4520 DONALD ROAD #100
PALM BEACH GARDENS, FL 33410

Address

19090 STATE ROAD 7
BOCA RATON, FL 33498

Address

1809 UNIVERSITY DRIVE MED EXPRESS URGENT CARE - CORAL SPRINGS
HIALEAH, FL 33071

Address

206 East Brandon Blvd.
BRANDON, FL 33511

Address

13610 N. Bruce B. Downs Blvd.
TAMPA, FL 33613

Address

8849 State Rd. 52
HUDSON, FL 34667

Address

13856 N. Dale Mabry
TAMPA, FL 33618

Address

11985 Atlantic Blvd.
JACKSONVILLE, FL 32225

Address

7720 Merrill Rd.
JACKSONVILLE, FL 32277

[Address](#)

2810 W. MLK Blvd.
TAMPA, FL 33607

[Address](#)

801 W. MLK Blvd.
SEFFNER, FL 33584

[Address](#)

3700 US Hwy 98N Suite 101
LAKELAND, FL 33809

[Address](#)

1328 North Woodland Blvd. Suite TBD
DELAND, FL 32720

[Address](#)

20677 Bruce B. Downs Blvd.
TAMPA, FL 33647

[Address](#)

12375 South Cleveland Ave.
FORT MYERS, FL 33907

[Address](#)

5616 Tuscola Blvd.
NORTH PORT, FL 34287

[Address](#)

10500 Ulmerlon Rd. Suite 202
LARGO, FL 33771

[Address](#)

19985 S. Tamiami Trail
ESTERO, FL 33928

[Address](#)

960 W. Sugarland Highway
CLEWISTON, FL 33440

[Address](#)

13005 Collier Blvd.
NAPLES, FL 34117

[Address](#)

1150 US Highway 1
VERO BEACH, FL 32960

[Address](#)

22945 SR 54
LUTZ, FL 33549

[Address](#)

26812 US Highway 19N
CLEARWATER, FL 33761

[Address](#)

313 SW Pine Island Rd.
CAPE CORAL, FL 33991

[Address](#)

1120 Homestead Rd. North
LEHIGH ACRES, FL 33936

[Address](#)

2200 Tamiami TRL.
PORT CHARLOTTE, FL 33948

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.

Subordinate Practitioners

| Name | Relationship | Profession | License | Effective Date |
|----------------------|--------------------------------|---------------------|---------|----------------|
| CORPUS, DON LAWRENCE | SUBORDINATE | MEDICAL DOCTOR | 94488 | 11/20/2020 |
| SAIFMAN, KELLI ANN | DISPENSING PHYSICIAN ASSISTANT | PHYSICIAN ASSISTANT | 9109851 | 12/10/2018 |

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

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