



## MATT L LEAVITT

### License Number: OS5365

Data As Of 4/20/2026

Profession	Osteopathic Physician
License	OS5365
License Status	Clear/Active
Qualifications	Dispensing Practitioner
License Expiration Date	3/31/2028
License Original Issue Date	09/30/1987
Address of Record	260 LOOKOUT PLACE SUITE 103 MAITLAND, FL 32751
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	Yes
Discipline on File	No
Public Complaint	No

### Secondary Locations

#### Address

1801 Lee Road Suite 115 & 175  
WINTER PARK, FL 32789

#### Address

2915 Lakeview Drive Suite 2021  
FERN PARK, FL 32730

#### Address

851 Outer Road Suite 200  
ORLANDO, FL 32814

#### Address

9368 NARCOOSSEE ROAD SUITE 104  
ORLANDO, FL 32827

#### Address

80 W. Grant Street Suite 117  
ORLANDO, FL 32806

#### Address

1816 Salk Avenue  
TAVARES, FL 32778

#### Address

1410 W Broadway Suite 205  
OVIEDO, FL 32765

### 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
CROES, CASEY ROBERTS	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9114402	5/9/2025
CROES, CASEY ROBERTS	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9114402	5/9/2025
GARRIGUS, ROBERT PAUL	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9109653	7/15/2025
LEAVITT MEDICAL ASSOCIATES OF FLORIDA, I	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	3155	1/28/2010
LEAVITT MEDICAL ASSOCIATES OF FLORIDA, I	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	3156	1/28/2010
LEAVITT MEDICAL ASSOCIATES OF FLORIDA, I	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	3157	1/28/2010
LEAVITT MEDICAL ASSOCIATES OF FLORIDA, I	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	3173	1/28/2010
LEAVITT MEDICAL GROUP	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	3187	1/28/2010
NIEVES, BRANDON JOSHUA	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9107503	11/26/2018
SIAK, SARAH	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9101340	7/11/2025
SIAK, SARAH	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9101340	3/20/2019
TURNER, ISABELLA	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9108281	10/24/2019
WILKS, SHAUNTE RENEE	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9109978	7/11/2025
WILKS, SHAUNTE RENEE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9109978	4/12/2017

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