



## RONNIE DEAN BAUGH

License Number: PA9101871

Data As Of 4/27/2025

Profession	Physician Assistant
License	PA9101871
License Status	DECEASED/
Qualifications	Prescribing
License Expiration Date	1/31/2026
License Original Issue Date	01/14/2002
Address of Record	If further information is needed, please contact the Department of Health at (850) 488-0595.
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint	No

## Secondary Locations

### Address

280 DUNDAS DRIVE COASTAL SPINE PAIN CENTER  
JAX, FL 32218

### Address

11555 Central Parkway #304 Coastal Spine Pain Center  
JACKSONVILLE, FL 32224

### Address

1865 LIME ST. #101  
FERNANDINA BEACH, FL 32034

### Address

1821 BLANDING BLVD #1 COASTAL SPINE & PAIN  
MIDDLEBURG, FL 32068

### Address

4085 UNIVERSITY BLVD S #3 NEUROLOGY PARTNERS  
JACKSONVILLE, FL 32216

### Address

1564 KINGSLEY AVE #300 COASTAL SPINE & PINE  
ORANGE PARK, FL 32073

### Address

2700 RIVERSIDE AVE #2 COASTAL SPINE & PAIN  
JACKSONVILLE, FL 32205

## Discipline/Admin Action

### Emergency Actions

No Emergency Actions Found

### Discipline Cases

No Discipline Found

### Public Complaints

No Public Complaint Found

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.

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