Florida HEALTH Department of Health

PEGGY FREDERIQUE-BELL

License Number: PA9101972

Data As Of 11/2/2026

Profession	Physician Assistant
License	PA9101972
License Status	Clear/Active
Qualifications	Prescribing
License Expiration Date	1/31/2028
License Original Issue Date	05/13/2002
Address of Record	13800 veterans way ORLANDO, FL 32827
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint	No

Secondary Locations

Address
1404 W. Seminole Blvd
SANFORD, FL 32771

Address
325 Cypress Pkwy
KISSIMMEE, FL 34759

Address
449 W. 23rd St
PANAMA CITY, FL 32405

Address
2190 Highway 85N
NICEVILLE, FL 32578

Address
8300 Red Bug Lake Rd
OVIEDO, FL 32765

Address
4056 MILLENIA BLVD
ORLANDO, FL 32839

Address
1350 S Hickory Street Holmes Regional Medical Center
MELBOURNE, FL 32901

Address
1425 Malabar Road NE Palm Bay Hospital
PALM BAY, FL 32907

Address
1404 W. SEMINOLE BLVD CENTRAL FLORIDA REGIONAL HOSPITAL
SANFORD, FL 32771

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.

Supervising Practitioners

Name	Relationship	Profession	License	Effective Date
LIN, EDWARD C	SUPERVISING PRESCRIBING PRACTITIONER	OSTEOPATHIC PHYSICIAN	11547	07/01/2021

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

Subordinate Practitioners

Name	Relationship	Profession	License	Effective Date
APPEL, RACHEL	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9102351	6/4/2024
BIGGS, FREDERICK SCOTT	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9103660	8/1/2021
VOGT, JASON M	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9107868	8/1/2021

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

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.

Secondary Locations

Address
1404 W. Seminole Blvd
SANFORD, FL 32771
Address
325 Cypress Pkwy
KISSIMMEE, FL 34759
Address
449 W. 23rd St
PANAMA CITY, FL 32405
Address
2190 Highway 85N
NICEVILLE, FL 32578
Address
8300 Red Bug Lake Rd
OVIEDO, FL 32765
Address
4056 MILLENIA BLVD
ORLANDO, FL 32839
Address
1350 S Hickory Street Holmes Regional Medical Center

MELBOURNE, FL 32901

Address

1425 Malabar Road NE Palm Bay Hospital

PALM BAY, FL 32907

Address

1404 W. SEMINOLE BLVD CENTRAL FLORIDA REGIONAL HOSPITAL

SANFORD, FL 32771

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.

Supervising Practitioners

Name	Relationship	Profession	License	Effective Date
LIN, EDWARD C	SUPERVISING PRESCRIBING PRACTITIONER	OSTEOPATHIC PHYSICIAN	11547	07/01/2021

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

Subordinate Practitioners

Name	Relationship	Profession	License	Effective Date
APPEL, RACHEL	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9102351	6/4/2024
BIGGS, FREDERICK SCOTT	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9103660	8/1/2021
VOGT, JASON M	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9107868	8/1/2021

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

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.