Florida HEALTH Department of Health

ANTHONY JAMES HALL MD

License Number: ME67040

Data As Of 11/16/2026

Profession	Medical Doctor
License	ME67040
License Status	Clear/Active
Qualifications	Dispensing Practitioner
License Expiration Date	1/31/2028
License Original Issue Date	09/08/1994
Address of Record	1685 South State Rd 7 Unit 4 HOLLYWOOD, FL 33023
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	Yes
Authorized to Order (Medical and Low-THC Cannabis)	Yes
Discipline on File	Yes
Public Complaint	Yes

Secondary Locations

Address
9774 SW 24th Street
WESTCHESTER, FL 33165

Address
1150 NW 72nd Avenue Suite 305
MIAMI, FL 33126

Address
817 S. University Drive Suite 105
PLANTATION, FL 33324

Address
232 SW 8th Street
MIAMI, FL 33130

Discipline/Admin Action

Emergency Actions

No Emergency Actions Found

Discipline Cases

Name	License	Profession	City	State	Case #	Action Taken
HALL, ANTHONY JAMES	67040	MEDICAL DOCTOR	HOLLYWOOD	FL	200816818	OBLIGATION(S) SATISFIED

Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
HALL, ANTHONY JAMES	67040	MEDICAL DOCTOR	HOLLYWOOD	FL	200816818	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.

Subordinate Practitioners

Name	Relationship	Profession	License	Effective Date
ANDRADE, DENISE LYNN	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9100997	10/27/2026
SETTLE, JAMES MICHAEL	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9105439	7/29/2025

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

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