



LYNDON LAGUNZAD CUTILLAR

License Number: PA9103647

Data As Of 5/22/2026

Profession	Physician Assistant
License	PA9103647
License Status	Clear/Active
Qualifications	Dispensing Practitioner Prescribing
License Expiration Date	1/31/2028
License Original Issue Date	01/27/2006
Address of Record	851 West State Road 436 Ste 1039 ALTAMONTE SPRINGS, FL 32714
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	Yes
Public Complaint	Yes

Secondary Locations

No secondary locations found.

Discipline/Admin Action

Emergency Actions

No Emergency Actions Found

Discipline Cases

Name	License	Profession	City	State	Case #	Action Taken
CUTILLAR, LYNDON LAGUNZAD	9103647	PHYSICIAN ASSIS	ALTAMONTE SPRINGS	FL	200924756	OBLIGATION(S) SATISFIED

Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
CUTILLAR, LYNDON LAGUNZAD	9103647	PHYSICIAN ASSISTANT	ALTAMONTE SPRINGS	FL	200924756	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.

Supervising Practitioners

Name	Relationship	Profession	License	Effective Date
MARQUES, ANDRE SCOFIELD M D	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	121125	04/01/2026
WEINSTOCK, BARRY SETH	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	63334	04/21/2026

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.

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