



## Liberty Ambulance Service, Inc.

### License Number: ALS1606

Data As Of 12/14/2025

Profession	EMS Service Provider (ALS)
License	ALS1606
License Status	Clear/
Qualifications	Transport
License Expiration Date	5/23/2026
License Original Issue Date	05/24/1992
Address of Record	1626 Atlantic University Circl JACKSONVILLE, FL 32207
Discipline on File	Yes

### Secondary Locations

#### Address

3600 Peoria Road, Suite 104  
ORANGE PARK, FL 32065

#### Address

1169 South 6th Street  
MACCLENNY, FL 32063

#### Address

1626 Atlantic-University Circle  
JACKSONVILLE, FL 32207

### Discipline/Admin Action

#### Emergency Actions

No Emergency Actions Found

#### Discipline Cases

Name	License	Profession	City	State	Case #	Action Taken
LIBERTY AMBULANCE SERVICE	1606	ALS - EMS	JACKSONVILLE	FL	8025010013	FINE
LIBERTY AMBULANCE SERVICE, INC	1606	ALS - EMS	JACKSONVILLE	FL	8025010017	FINE
LIBERTY AMBULANCE SERVICE	1606	ALS - EMS	JACKSONVILLE	FL	200559022	FINE AND REPRIMAND
LIBERTY AMBULANCE SERVICE, INC.	1606	ALS - EMS	JACKSONVILLE	FL	200909689	FINE

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
WARD, JILL ANGELA	PRIMARY MEDICAL DIRECTOR	MEDICAL DOCTOR	110689	03/03/2022

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

Subordinate Practitioners

Name	Relationship	Profession	License	Effective Date
1FDBR1CG0PKA88068	PERMIT	VEHICLE PERMIT (ALS)	26413	10/3/2024
1FDBR1CG0PKA88068	PERMIT	VEHICLE PERMITS (BLS)	7547	10/3/2024
1FDBR1CG3PKA84029	PERMIT	VEHICLE PERMIT (ALS)	25298	8/24/2023
1FDBR1CG3PKA84029	PERMIT	VEHICLE PERMITS (BLS)	7056	8/24/2023
1FDBR1CG6PUA75292	PERMIT	VEHICLE PERMIT (ALS)	25299	8/24/2023
1FDBR1CG6PUA75292	PERMIT	VEHICLE PERMITS (BLS)	7057	8/24/2023
1FDBR1CG8KA41728	PERMIT	VEHICLE PERMIT (ALS)	26506	11/12/2024
1FDBR1CG8KA41728	PERMIT	VEHICLE PERMITS (BLS)	7583	11/12/2024
1FDSS3EL7EDB14628	PERMIT	VEHICLE PERMIT (ALS)	22716	1/21/2020
1FDSS3EL7EDB14628	PERMIT	VEHICLE PERMITS (BLS)	5999	1/21/2020
1FDSS3EL9EDB06997	PERMIT	VEHICLE PERMIT (ALS)	20901	8/24/2017
1FDSS3ET9EDB06997	PERMIT	VEHICLE PERMITS (BLS)	4802	1/20/2015
1FDWE3FS1CDA90659	PERMIT	VEHICLE PERMIT (ALS)	17753	1/9/2013
1FDWE3FS1CDA90659	PERMIT	VEHICLE PERMITS (BLS)	5241	8/24/2017
1FDWE3FS8BDA01975	PERMIT	VEHICLE PERMIT (ALS)	16593	4/27/2011
1FDWE3FS8BDA01975	PERMIT	VEHICLE PERMITS (BLS)	5238	8/24/2017
1FDYR2CM3HKB35701	PERMIT	VEHICLE PERMIT (ALS)	20914	8/30/2017
1FDYR2CM3HKB35701	PERMIT	VEHICLE PERMITS (BLS)	5248	8/30/2017
1FDYR2CM5JKA07160	PERMIT	VEHICLE PERMIT (ALS)	22418	8/5/2019
1FDYR2CM5JKA07160	PERMIT	VEHICLE PERMITS (BLS)	5886	8/5/2019
1FDYR2CM6GKA96584	PERMIT	VEHICLE PERMIT (ALS)	20905	8/24/2017
1FDYR2CM6GKA96584	PERMIT	VEHICLE PERMITS (BLS)	5005	7/11/2016
1FDYR2CM7KKN86562	PERMIT	VEHICLE PERMIT (ALS)	23655	5/4/2021
1FDYR2CM7KKN86562	PERMIT	VEHICLE PERMITS (BLS)	6346	5/4/2021
1FDYR2CMOJKA48327	PERMIT	VEHICLE PERMIT (ALS)	22270	6/19/2019
1FDYR2CMOJKA48327	PERMIT	VEHICLE PERMITS (BLS)	5835	6/19/2019
1HA6GUCG8JN000091	PERMIT	VEHICLE PERMIT (ALS)	21323	3/8/2018
1HA6GUCG8JN000091	PERMIT	VEHICLE PERMITS (BLS)	5496	3/8/2018

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

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