GEOFFREY LAKE RISLEY

License Number: ME83348

Data As Of 8/4/2025	
Profession	Medical Doctor
License	ME83348
License Status	Clear/Active
License Expiration Date	1/31/2026
License Original Issue Date	09/05/2001
Address of Record	1032 Mar Walt Drive
	Suite 250
	FT WALTON BEACH, FL 32547
Controlled Substance Prescriber	No
(for the Treatment of Chronic Non-	
malignant Pain)	
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
RISLEY, GEOFFREY LAKE	83348	MEDICAL DOCTOR	FT WALTON BEAC	H FL	201700917	OBLIGATION(S) SATISFIED

Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
RISLEY, GEOFFREY LAKE	83348	MEDICAL DOCTOR	FT WALTON BEAC	H FL	201700917	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	Relationshi	p Profession	License	Effective Date
CARDIOTHORACIC & VASCULAR SURGICAL ASSOC	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	1581	2/20/2009

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

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