



## MARK ANTHONY MATHIAS

License Number: PA9105501

Data As Of 6/19/2025

Profession	Physician Assistant
License	PA9105501
License Status	Clear/Active
Qualifications	Prescribing Dispensing Practitioner
License Expiration Date	1/31/2026
License Original Issue Date	06/22/2010
Address of Record	2300 Park Ave Suite 206 ORANGE PARK, FL 32073
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	Yes
Discipline on File	No
Public Complaint	No

## Secondary Locations

### Address

2 SHIRCLIFF WAY SUITE#605  
JACKSONVILLE, FL 32204

### Address

15255 Max Legget Pkwy Suite 5300  
JACKSONVILLE, FL 32218

### Address

2001 County Road 210 W. Suite 200  
SAINT JOHNS, FL 32259

### Address

4565 US Highway 17 Suite 200  
FLEMING ISLAND, FL 32003

### Address

232 Ponte Vedra Park Dr.  
PONTE VEDRA BEACH, FL 32082

### Address

2627 Riverside Ave. Suite 300  
JACKSONVILLE, FL 32204

### Address

10475 Centurion Pkwy N. Suite 220  
JACKSONVILLE, FL 32256

## 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
LINCOLN, MAX C	SUPERVISING DISPENSING PRACTITIONER	MEDICAL DOCTOR	114953	06/13/2022
LINCOLN, MAX C	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	114953	11/05/2024

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

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