



## SRINIVAS ATTANTI

License Number: ME90705

Data As Of 4/30/2026

Profession	Medical Doctor
License	ME90705
License Status	Clear/Active
License Expiration Date	1/31/2028
License Original Issue Date	06/19/2004
Address of Record	910 OLD CAMP RD BLDG 210 THE VILLAGES, FL 32162
Controlled Substance Prescriber (for the Treatment of Chronic Non- malignant Pain)	No
Discipline on File	No
Public Complaint	No

## Secondary Locations

### Address

5575 E SR 44  
WILDWOOD, FL 34785

### Address

308 W Highland Blvd  
INVERNESS, FL 34452

### Address

801 E Dixie Ave., Ste. 107  
LEESBURG, FL 34748

## 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.

## Subordinate Practitioners

Name	Relationship	Profession	License	Effective Date
CITRUS CARDIOLOGY CONSULTANTS PA	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	1452	1/21/2009
CITRUS CARDIOLOGY CONSULTANTS PA	HCCE	HEALTH CARE CLINIC ESTABLISHMENT PERMIT	1453	1/21/2009

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

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