



MARC JOHN INGLESE

License Number: ME103501

Data As Of 5/22/2026

Profession	Medical Doctor
License	ME103501
License Status	Clear/Active
Qualifications	Dispensing Practitioner
License Expiration Date	1/31/2027
License Original Issue Date	01/07/2009
Address of Record	1704 RIGGINS ROAD TALLAHASSEE, FL 32308
Controlled Substance Prescriber (for the Treatment of Chronic Non- malignant Pain)	Yes
Discipline on File	No
Public Complaint	No

Secondary Locations

Address

6298 Linton Blvd Suite 100
DELRAY BEACH, FL 33484

Address

1702 Riggins Rd
TALLAHASSEE, FL 32308

Address

248 NE Hancock Ave
MADISON, FL 32340

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
GIVENS, SARA KAYE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9113990	2/1/2021
NOWAK, MILLICENT KATHLEEN	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9113954	3/8/2023
REVELL, MONTE	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9119907	2/26/2025
REVELL, MONTE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9119907	2/6/2025
ROBERTS, SARA HOLIFIELD	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9109275	6/19/2019
SANDER, JESSICA ANN	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9113150	6/2/2023
ZIMMERMAN, MAYRA	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9107998	9/20/2017

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.

Secondary Locations

Address

6298 Linton Blvd Suite 100
DELRAY BEACH, FL 33484

Address

1702 Riggins Rd
TALLAHASSEE, FL 32308

Address

248 NE Hancock Ave
MADISON, FL 32340

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
GIVENS, SARA KAYE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9113990	2/1/2021
NOWAK, MILLICENT KATHLEEN	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9113954	3/8/2023

Name	Relationship	Profession	License	Effective Date
REVELL, MONTE	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9119907	2/26/2025
REVELL, MONTE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9119907	2/6/2025
ROBERTS, SARA HOLIFIELD	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9109275	6/19/2019
SANDER, JESSICA ANN	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9113150	6/2/2023
ZIMMERMAN, MAYRA	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9107998	9/20/2017

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.