



MICHAEL KEVIN EDNIE

License Number: ME118264

Data As Of 5/3/2026

Profession	Medical Doctor
License	ME118264
License Status	Clear/Active
License Expiration Date	1/31/2028
License Original Issue Date	12/09/2013
Address of Record	906 Eden Dr INVERNESS, FL 34452
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint	No

Secondary Locations

[Address](#)

4961 West Atlantic Ave Studio 57
DELRAY BEACH, FL 33445

[Address](#)

3727 SE OCEAN BLVD STE 102
STUART, FL 34996

[Address](#)

10377 S US HIGHWAY 1 STE 101
PORT SAINT LUCIE, FL 34952

[Address](#)

10036 WATER WORKS LN
RIVERVIEW, FL 33578

[Address](#)

5542 S FLAMINGO RD RM 2
COOPER CITY, FL 33330

[Address](#)

2701 E ATLANTIC BLVD STE 100
POMPANO BEACH, FL 33062

[Address](#)

2970 University Pkwy, Unit 201
SARASOTA, FL 34243

[Address](#)

2800 BISCAYNE BLVD STE 303
MIAMI, FL 33137

[Address](#)

525 N PARK AVE STE 120
WINTER PARK, FL 32789

[Address](#)

358 SAN LORENZO AVE STE 3225-14
CORAL GABLES, FL 33146

[Address](#)

2200 HAVENDALE BLVD NW
WINTER HAVEN, FL 33881

[Address](#)

1845 CORDOVA RD STE 210 STUDIO 117

FORT LAUDERDALE, FL 33316

[Address](#)

421 MONTGOMERY ROAD STE 125

ALTAMONTE SPRINGS, FL 32714

[Address](#)

11601 Biscayne Blvd, Ste 209

MIAMI, FL 33181

[Address](#)

1350 N ORANGE AVE STE 236A

WINTER PARK, FL 32789

[Address](#)

2925 PGA Blvd Ste 102, Studio 14

PALM BEACH GARDENS, FL 33410

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
DUQUESNAY, DANIELLE AMANDA	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9108492	3/30/2022
INNIS, JAMIE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9111601	3/30/2022
MAITA-ZAPATA, ANGEL SALVADOR	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9121580	4/20/2026

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

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