



Lehigh Acres Fire Control and Rescue District

License Number: ALS3604

Data As Of 7/26/2025

Profession	EMS Service Provider (ALS)
License	ALS3604
License Status	Clear/
Qualifications	Transport
License Expiration Date	5/26/2027
License Original Issue Date	05/27/1993
Address of Record	11 Homestead Road South LEHIGH, FL 33936
Discipline on File	Yes

Secondary Locations

Address

1000 Joel Blvd.
LEHIGH ACRES, FL 33936

Address

636 Thomas Sherwin Ave S HQ
LEHIGH ACRES, FL 33974

Address

11 Homestead Rd. S
LEHIGH ACRES, FL 33936

Address

3102 16th Street SW
LEHIGH ACRES, FL 33976

Address

5105 Leonard Blvd. S.
LEHIGH ACRES, FL 33973

Address

44 Homestead Rd. S
LEHIGH ACRES, FL 33936

Address

308 Gunnery Rdoad South
LEHIGH ACRES, FL 33973

Address

2501 49th Street West
LEHIGH ACRES, FL 33971

Discipline/Admin Action

Emergency Actions

No Emergency Actions Found

Discipline Cases

Name	License	Profession	City	State	Case #	Action Taken
LEHIGH ACRES FIRE CONTROL AND RESCUE DISTRICT	3604	ALS - EMS	LEHIGH	FL	201208902	FINE

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
AUGUSTINE, JAMES JEROME	PRIMIARY MEDICAL DIRECTOR	MEDICAL DOCTOR	111185	03/06/2024

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

Subordinate Practitioners

Name	Relationship	Profession	License	Effective Date
1FDUF4FT8FEC84038	PERMIT	VEHICLE PERMIT (ALS)	25580	11/7/2023
1FDUF4FT8FEC84038	PERMIT	VEHICLE PERMITS (BLS)	7192	11/7/2023
1FDUF5GT8RDA10323	PERMIT	VEHICLE PERMIT (ALS)	27080	5/21/2025
1FDUF5GT8RDA10323	PERMIT	VEHICLE PERMITS (BLS)	7838	5/21/2025
1FVACWDT0HHJF6345	PERMIT	VEHICLE PERMIT (ALS)	20822	7/27/2017
1FVACWDT0HHJF6345	PERMIT	VEHICLE PERMITS (BLS)	6689	1/10/2023
1FVACWDT3GHHF9162	PERMIT	VEHICLE PERMIT (ALS)	19907	5/3/2016
1FVACWDT3GHHF9162	PERMIT	VEHICLE PERMITS (BLS)	6690	1/10/2023
1FVACWDT9HHJF6344	PERMIT	VEHICLE PERMIT (ALS)	20821	7/27/2017
1FVACWDT9HHJF6344	PERMIT	VEHICLE PERMITS (BLS)	6688	1/10/2023
1FVACWFC1NHNL4718	PERMIT	VEHICLE PERMIT (ALS)	24322	5/24/2022
1FVACWFC1NHNL4718	PERMIT	VEHICLE PERMITS (BLS)	6684	1/10/2023
1FVACWFC3NHNL4719	PERMIT	VEHICLE PERMIT (ALS)	24323	5/24/2022
1FVACWFC3NHNL4719	PERMIT	VEHICLE PERMITS (BLS)	6685	1/10/2023
1FVACWFC5MHMR4528	PERMIT	VEHICLE PERMIT (ALS)	23775	7/1/2021
1FVACWFC5MHMR4528	PERMIT	VEHICLE PERMITS (BLS)	6686	1/10/2023
1FVACWFC7MHMR4529	PERMIT	VEHICLE PERMIT (ALS)	23776	7/1/2021
1FVACWFC7MHMR4529	PERMIT	VEHICLE PERMITS (BLS)	6687	1/10/2023
1FVACWFCXNHNL4720	PERMIT	VEHICLE PERMITS (BLS)	6683	1/10/2023
1FVACWFCXVHNL4720	PERMIT	VEHICLE PERMIT (ALS)	24321	5/24/2022
1GT49LE72LF192036	PERMIT	VEHICLE PERMIT (ALS)	23128	8/19/2020
1S9A1HND5R3003023	PERMIT	VEHICLE PERMIT (ALS)	26053	5/24/2024
1S9A1HND7K3003188	PERMIT	VEHICLE PERMIT (ALS)	22728	1/23/2020
1S9A1HND7N3003065	PERMIT	VEHICLE PERMIT (ALS)	24858	12/27/2022
1S9A1HND7R3003024	PERMIT	VEHICLE PERMIT (ALS)	26054	5/24/2024
1S9A1HND9K3003189	PERMIT	VEHICLE PERMIT (ALS)	22727	1/23/2020
4ENGAAA82H1000606	PERMIT	VEHICLE PERMIT (ALS)	20557	3/31/2017
4ENGAAA84H1000607	PERMIT	VEHICLE PERMIT (ALS)	20558	3/31/2017
4P1BAAFF3SA027852	PERMIT	VEHICLE PERMIT (ALS)	27077	5/21/2025
4P1BAAFF5SA027853	PERMIT	VEHICLE PERMIT (ALS)	27078	5/21/2025

Name	Relationship	Profession	License	Effective Date
4P1BCAGF0NA024906	PERMIT	VEHICLE PERMIT (ALS)	25501	10/4/2023
4P1BCAGFORA026452	PERMIT	VEHICLE PERMIT (ALS)	26055	5/24/2024
4P1CEO1A76A006300	PERMIT	VEHICLE PERMIT (ALS)	13790	8/9/2006
4P1CT02W23A003686	PERMIT	VEHICLE PERMIT (ALS)	27079	5/21/2025
4P1CV01A57A007902	PERMIT	VEHICLE PERMIT (ALS)	14647	12/7/2007

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.