Florida HEALTH Department of Health

ELIZABETH KATELYN CURTIS

License Number: PA9116140

Data As Of 10/30/2026

Profession	Physician Assistant
License	PA9116140
License Status	DELINQUENT/
Qualifications	Prescribing
License Expiration Date	1/31/2026
License Original Issue Date	07/05/2022
Address of Record	35 Harbor Oaks Cir SAFETY HARBOR, FL 34695
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint	No

Secondary Locations

Address
549 SKY HARBOUR DR HARBOURWOOD CARE CENTER
CLEARWATER, FL 33759

Address
100 24TH ST N APOLLO HEALTH AND REHABILITIATION CENTER
SAINT PETERSBURG, FL 33713

Address
7501 38TH AVE N ALHAMBRA HEALTH AND REHABILITATION CENTE
SAINT PETERSBURG, FL 33710

Address
521 ATWOOD AVE N ST PETERSBURG NURSING AND REHABILITATION
SAINT PETERSBURG, FL 33702

Address
7101 DR MLK JR ST N ABBEY REHABILITATION AND NURSING CENTER
SAINT PETERSBURG, FL 33702

Address
6300 46TH AVE N LEXINGTON HEALTH AND REHABILITATION CENT
KENNETH CITY, FL 33709

Address
9035 BRYAN DAIRY RD BARDMOOR OAKS HEALTHCARE AND REHAB CENTE
LARGO, FL 33777

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
DAVILA-RIVERA, ALFREDO	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	121326	09/25/2023
PALUMBO, BRIAN THOMAS	SUPERVISING DISPENSING PRACTITIONER	MEDICAL DOCTOR	115727	04/20/2023

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.

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