



## Port Orange Department of Fire Rescue

### License Number: ALS6406

Data As Of 9/8/2025

|                             |   |
|-----------------------------|---|
| Profession                  | EMS Service Provider (ALS)                          |
| License                     | ALS6406   |
| License Status              | Clear/  |
| Qualifications              | Non - Transport                                     |
| License Expiration Date     | 4/24/2026   |
| License Original Issue Date | 04/25/1992  |
| Address of Record           | 1090 City Center Boulevard<br>PORT ORANGE, FL 32129 |
| Discipline on File          | No  |

### Secondary Locations

#### Address

1701 Town West Boulevard  
PORT ORANGE, FL 32129

#### Address

1090 City Center Boulevard  
PORT ORANGE, FL 32129

#### Address

4200 South Ridgewood Avenue  
PORT ORANGE, FL 32129

#### Address

6027 Central Park Boulevard  
PORT ORANGE, FL 32127

#### Address

6701 Airport Road  
PORT ORANGE, FL 32128

### Discipline/Admin Action

#### Emergency Actions

No Emergency Actions Found

#### Discipline Cases

No Discipline 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 |
|-----------------------|--------------------------|----------------|---------|----------------|
| GERSHEN, JESSICA BETH | PRIMARY MEDICAL DIRECTOR | MEDICAL DOCTOR | 123153  | 07/01/2022     |

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

### Subordinate Practitioners

| Name              | Relationship | Profession           | License | Effective Date |
|-------------------|--------------|----------------------|---------|----------------|
| 1FDUF5HT6NED19033 | PERMIT       | VEHICLE PERMIT (ALS) | 25966   | 4/23/2024      |
| 1HTMNAAM15H688953 | PERMIT       | VEHICLE PERMIT (ALS) | 24283   | 4/13/2022      |
| 3C7WRKCL4GG251615 | PERMIT       | VEHICLE PERMIT (ALS) | 21985   | 1/8/2019       |
| 4P1BAAFF1KA019653 | PERMIT       | VEHICLE PERMIT (ALS) | 21986   | 1/8/2019       |
| 4P1BAAFFXGA015933 | PERMIT       | VEHICLE PERMIT (ALS) | 19730   | 3/3/2016       |
| 4P1BCAFF2JA018214 | PERMIT       | VEHICLE PERMIT (ALS) | 21987   | 1/8/2019       |
| 4P1CC01M69A010391 | PERMIT       | VEHICLE PERMIT (ALS) | 15878   | 1/4/2010       |
| 4P1CJ01A2EA014539 | PERMIT       | VEHICLE PERMIT (ALS) | 18518   | 7/28/2014      |
| 4P1CS01A8EA014106 | PERMIT       | VEHICLE PERMIT (ALS) | 18271   | 2/28/2014      |
| 4P1CS01M0CA013152 | PERMIT       | VEHICLE PERMIT (ALS) | 17578   | 11/27/2012     |
| 4P1CT02U04A004027 | PERMIT       | VEHICLE PERMIT (ALS) | 14286   | 4/16/2007      |

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