JIGNESH ATMARAM PATEL

License Number: PS36240

Data As Of 8/7/2025		
Profession	Pharmacist	
License	PS36240	
License Status	Clear/Active	
Qualifications	Certified To Administer Immunizations	
	Test and Treat Certification	
License Expiration Date	9/30/2027	
License Original Issue	10/18/2001	
Date	10/18/2001	
Address of Record	2020 NE PINE ISLAND ROAD	
	CAPE CORAL, FL 33909	
Discipline on File	No	
Public Complaint	No	

Secondary Locations

No secondary locations found.

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
DAVIS II, CEDRIC EMDEN	IA SUPERVISING PHYSICIAN	MEDICAL DOCTOR	108693	06/04/2025
DAVIS II, CEDRIC EMDEN	TTC SUPERVISING PHYSICIAN	MEDICAL DOCTOR	108693	05/25/2024

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

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Medical Quality Assurance. This website is maintained by Division staff and is updated immediately upon a change to our licensing and enforcement database.