



## THOMAS WILLIAM ULRICH

### License Number: PA9101550

Data As Of 7/25/2025

Profession	Physician Assistant
License	PA9101550
License Status	Clear/Active
Qualifications	Prescribing Dispensing Practitioner
License Expiration Date	1/31/2026
License Original Issue Date	01/16/2001
Address of Record	20940 Uptown Ave apt 206 BOCA RATON, FL 33428
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint	No

### Secondary Locations

#### Address

8849 State Rd 52  
HUDSON, FL 34667

#### Address

5616 Tuscola Blvd  
BRADENTON, FL 34281

#### Address

220 Tamiami Trail  
PORT CHARLOTTE, FL 33948

#### Address

1328 N. Woodland Blvd  
DELAND, FL 32720

#### Address

13005 Collier Blvd  
NAPLES, FL 34116

#### Address

7720 Merrill Rd  
JACKSONVILLE, FL 32277

#### Address

11985 Atlantic Blvd  
JACKSONVILLE, FL 32225

#### Address

19090 State Rd 7  
BOCA RATON, FL 33498

#### Address

1809 N. University Drive  
CORAL SPRINGS, FL 33071

### 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
NEZOWITZ, GREGG DAVID	SUPERVISING DISPENSING PRACTITIONER	MEDICAL DOCTOR	75671	02/21/2020
NEZOWITZ, GREGG DAVID	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	75671	02/21/2020

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

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