# JAMIE MORGAN SCHMIDT

# License Number: PA9103108

Data As Of 9/7/2025			
Profession	Physician Assistant		
License	PA9103108		
License Status	Clear/Active		
Qualifications	Prescribing		
	Dispensing Practitioner		
License Expiration Date	1/31/2026		
License Original Issue Date	11/12/2004		
Address of Record	3301 W. Gandy Blvd		
	TAMPA, FL 33611		
Controlled Substance Prescriber	No		
(for the Treatment of Chronic Non-			
malignant Pain)			
Discipline on File	No		
Public Complaint	No		

# Secondary Locations

# Address

5504 Gateway Blvd WESLEY CHAPEL, FL 33544

## Address

11969 Sheldon Road TAMPA, FL 33626

#### Address

4505 Gunn Highway TAMPA, FL 33624

## Address

11406 US Hwy 301 S RIVERVIEW, FL 33578

### Address

303 W Palm Ave TAMPA, FL 33602

Address 7601 Seminole Blvd SEMINOLE, FL 33772

Address

3251 66th St. North SAINT PETERSBURG, FL 33710

## Address

799 W Lumsden Rd BRANDON, FL 33511

## Address

16521 US Hwy 301 S WIMAUMA, FL 33573

### Address

564 Channelside Dr TAMPA, FL 33602

## Address

5464 Lithia Pinecrest Drive LITHIA, FL 33547

## Address

40545 US Hwy 19 N Unit A TARPON SPRINGS, FL 34689

#### Address

6182 N US Highway 41 APOLLO BEACH, FL 33572

#### Address

4949 4th Street N SAINT PETERSBURG, FL 33703

#### Address

13531 State Road 54 ODESSA, FL 33556

#### Address

13856 N Dale Mabry Hwy TAMPA, FL 33618

#### Address

2810 W MLK Jr Blvd TAMPA. FL 33607

#### Address

22945 State Road 54 LUTZ, FL 33549

### Address

19027 Wingshooter Way LUTZ, FL 33558

# 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
NANDA, PAUL KALRA	SUPERVISING DISPENSING PRACTITIONER	MEDICAL DOCTOR	117861	01/24/2024
NANDA, PAUL KALRA	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	117861	01/24/2024

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.