## JOHN FRANCIS VILLA

### License Number: ME72523

Data As Of 9/9/2025

Profession Medical Doctor
License ME72523
License Status Clear/Active

Qualifications Dispensing Practitioner

License Expiration Date 1/31/2026
License Original Issue Date 02/27/1997

Address of Record 7240 7TH PLACE NORTH WEST PALM BEACH, FL 33411

Controlled Substance Prescriber Yes

(for the Treatment of Chronic Non-

malignant Pain)

Discipline on File No Public Complaint No

# **Secondary Locations**

#### Address

3228 SW Martin Downs Blvd. PALM CITY, FL 34990

#### Address

1500 North University Drive Suites 108,110, & 112 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

1050 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.

# **Subordinate Practitioners**

Name	Relationship	Profession	License	Effective Date
SMITH, MEGAN EILEEN	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9102296	8/29/2017

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

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