STEPHANIE SANTOS FRANQUI

License Number: PS67989

Data As Of 8/9/2025			
Profession	Pharmacist		
License	PS67989		
License Status	Clear/Active		
Qualifications	Certified To Administer Immunizations		
	Test and Treat Certification		
License Expiration Date	9/30/2027		
License Original Issue Date	12/06/2024		
Address of Record	5800 Bee Ridge Rd		
	SARASOTA, FL 34233		
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	TTC SUPERVISING PHYSICIAN	MEDICAL DOCTOR	108693	02/26/2025

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

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