



MICHAEL VINCENT GREENBERG

License Number: PA9103824

Data As Of 4/22/2025

Profession	Physician Assistant
License	PA9103824
License Status	CLEAR/Active
Qualifications	Dispensing Practitioner Prescribing
License Expiration Date	1/31/2026
License Original Issue Date	08/03/2006
Address of Record	206 2ND ST. EAST MANATEE MEMORIAL HOSPITAL BRADENTON, FL 34208
Controlled Substance Prescriber (for the Treatment of Chronic Non- malignant Pain)	No
Discipline on File	No
Public Complaint	No

Secondary Locations

Address

8330 LAKEWOOD RANCH BLVD. LAKEWOOD RANCH MEDICAL CENTER
BRADENTON, FL 34202

Address

4065 Tamiami Trl, Grappin Clinic
PORT CHARLOTTE, FL 33952

Address

12511 Tamiami Trl S Grappin Clinic
NORTH PORT, FL 34287

Address

347 6th Ave W, Grappin Clinic
BRADENTON, FL 34204

Address

301 N Brevard Ave Grappin Clinic
ARCADIA, FL 34266

Address

13117 Elk Mountain D Grappin Clinic
RIVERVIEW, FL 33568

Address

5506 14th Street West Satellite ER for MMH
BAYSHORE GARDENS, FL 34207

Address

1501 Laurel St, Sarasota, Grappin Clinic
SARASOTA, FL 34236

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	Effective	
			License	Date
BRANSCOMB, NICHOLAS TIMOTHY	SUPERVISING DISPENSING PRACTITIONER	OSTEOPATHIC PHYSICIAN	12337	07/24/2024
HIERHOLZER, DANNY MICHAEL DO	SUPERVISING PRESCRIBING PRACTITIONER	OSTEOPATHIC PHYSICIAN	11234	06/14/2022

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

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