



## MARK ALLEN STEINER

### License Number: ME82743

Data As Of 1/26/2026

|  |   |
|--|---|
| Professional   | Medical Doctor  |
| License  | ME82743   |
| License Status   | Clear/Active  |
| License Expiration Date  | 1/31/2028   |
| License Original Issue Date  | 06/19/2001  |
| Address of Record  | 7483 Sand Lake Commons Blvd<br>Suite 100<br>ORLANDO, FL 32819 |
| Controlled Substance Prescriber<br>(for the Treatment of Chronic Non-<br>malignant Pain) | No  |
| Discipline on File   | No  |
| Public Complaint   | No  |

## Secondary Locations

### Address

1711 Amazing Way Suite 206 & 207  
OCOEE, FL 34761

### Address

7148 Curry Ford Road Suite 200  
ORLANDO, FL 32822

### Address

805 Oakley Seaver Dr Suite A  
CLERMONT, FL 34711

### Address

795 Primera Blvd Suite 1021 & 1031  
LAKE MARY, FL 32746

### Address

207 Park Place Blvd Suite 3  
KISSIMMEE, FL 34741

### Address

2859 Delaney Ave Suite 100  
ORLANDO, FL 32806

## 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.

## Subordinate Practitioners

| Name                             | Relationship                    | Profession                                  | License | Effective Date |
|----------------------------------|---------------------------------|---|---------|----------------|
| CARDIOLOGY ASSOCIATES OF ORLANDO | HCCE                            | HEALTH CARE CLINIC ESTABLISHMENT 631 PERMIT |         | 12/29/2008     |
| COOK, CASSANDRA M                | PRESCRIBING PHYSICIAN ASSISTANT | PHYSICIAN ASSISTANT                         | 9116555 | 1/22/2025      |
| GUNASEKERA, LUSHANTHA SAJOTHA    | SUBORDINATE                     | MEDICAL DOCTOR                              | 90665   | 8/10/2020      |
| MAK, SOPHIE LOK YAN              | PRESCRIBING PHYSICIAN ASSISTANT | PHYSICIAN ASSISTANT                         | 9109602 | 10/3/2016      |

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

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