



WHITNEY HANNA BALMERT

License Number: PA9105724

Data As Of 7/26/2025

Profession	Physician Assistant
License	PA9105724
License Status	Clear/Active
Qualifications	Prescribing
License Expiration Date	1/31/2026
License Original Issue Date	10/11/2010
Address of Record	5900 South John Young Parkway ORLANDO, FL 32839
Controlled Substance Prescriber (for the Treatment of Chronic Non- malignant Pain)	No
Discipline on File	No
Public Complaint	No

Secondary Locations

Address

13750 W. Colonial Drive Night Life Pediatrics- Winter Garden
WINTER GARDEN, FL 34787

Address

3801 W. Lake Mary Blvd Pediatrix-Lake Mary
LAKE MARY, FL 32746

Address

1267 W. Oseola Parkway Pediatrix - Kississimmee
KISSIMMEE, FL 34741

Address

1500 Alafaya Trail Pediatrix - Oviedo
OVIEDO, FL 32765

Address

620 HUNT CLUB BLVD. Pediatrix-APOPKA
APOPKA, FL 32703

Address

7556 SAND LAKE RD. Pediatrix -SAND LAKE
ORLANDO, FL 32819

Address

***** *** CONFIDENTIAL *** *** CONFIDENTIAL *** *** CONFIDENTIAL ***
*** CONFIDENTIAL *** , ** *****

Address

620 S. HUNT CLUB BLVD. Pediatrix - Apopka
APOPKA, FL 32703

Address

145 PALM BAY RD., STE#110 Pediatrix -MELBOURNE
WEST MELBOURNE, FL 32904

Address

11325 Lake Underhill Road Pediatrix- East Orl
ALAFAYA, FL 32825

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
DENNEMEYER, JAMES ERIC	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	115575	02/03/2016
LEVINE, ANN MARIE	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	94546	02/03/2016
SOREMI, OLUDAPO FOLARIN	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	73889	05/07/2025
WASSERMAN, LEWIS MD	SUPERVISING PRESCRIBING PRACTITIONER	MEDICAL DOCTOR	53446	02/03/2016

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