



## RODERICK NEAL BENNETT

### License Number: ME98577

Data As Of 1/25/2026

Profession	Medical Doctor
License	ME98577
License Status	Clear/Active
License Expiration Date	1/31/2027
License Original Issue Date	05/03/2007
Address of Record	15010 Longs Lane PUNTA GORDA, FL 33982
Controlled Substance Prescriber (for the Treatment of Chronic Non- malignant Pain)	No
Discipline on File	No
Public Complaint	No

## Secondary Locations

### **Address**

9252 Spring Hill Drive  
SPRING HILL, FL 34608

### **Address**

7300 Winter Street  
BROOKSVILLE, FL 34613

### **Address**

3445 Bob Hartung Ct  
SPRING HILL, FL 34606

### **Address**

6388 Barclay Ave  
SPRING HILL, FL 34609

### **Address**

60 Veterans Ave  
BROOKSVILLE, FL 34601

### **Address**

890 S. Oak Crest Path  
LECANTO, FL 34461

### **Address**

2703 Forest Rd  
SPRING HILL, FL 34606

### **Address**

1520 N Meadowcrest Blvd  
CRYSTAL RIVER, FL 34429

## 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, Box 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
CITRUS COUNTY FIRE RESCUE	SERVICE PROVIDER	EMS SERVICE PROVIDER ALS	10021	1/8/2020
POST, CYNTHIA SUE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	3617	9/13/2017
QAYYUM, MOHAMMAD SOHAIB	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9109803	10/11/2024
UDANI, SARA ELIZABETH	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9115320	4/21/2022

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

The information on this page is a secure, primary source for license verification provided by the Florida Department of Health, Division of Medical Quality Assurance. This website is maintained by Division staff and is updated immediately upon a change to our licensing and enforcement database.