



CHRISTOPHER DAVID EWANOWSKI

License Number: ME100378

Data As Of 4/30/2026

Profession	Medical Doctor
License	ME100378
License Status	Clear/Active
Qualifications	Dispensing Practitioner
License Expiration Date	1/31/2028
License Original Issue Date	11/14/2007
Address of Record	519 Bartow Rd LAKELAND, FL 33801
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint	No

Secondary Locations

[Address](#)

500 Vonderburg Dr Ste 202E
BRANDON, FL 33511

[Address](#)

525 N Dacie Point
LECANTO, FL 34461

[Address](#)

4651 Van Dyke Rd
LUTZ, FL 33558

[Address](#)

11200 Seminole Blvd Ste 205
LARGO, FL 33778

[Address](#)

5200 Seminole Blvd.
ST. PETERSBURG, FL 33778

[Address](#)

8787 Bryan Dairy Rd Ste 360
LARGO, FL 33777

[Address](#)

500 Vonderburg Dr. Ste 206E
BRANDON, FL 33511

[Address](#)

608 S 9th St Sute C
LEESBURG, FL 34748

[Address](#)

14095 Cortez Blvd.
BROOKSVILLE, FL 34613

[Address](#)

14407 N Dale Mabry Hwy
TAMPA, FL 33618

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
BURKE, MARTIN GREGORY	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9106669	2/10/2026
ESQUINALDO, JULIE ANN	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	3722	3/9/2026
SOOKHOO, AARON ALEXANDER	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9108769	2/10/2026

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.

Secondary Locations

Address

500 Vonderburg Dr Ste 202E
BRANDON, FL 33511

Address

525 N Dacie Point
LECANTO, FL 34461

Address

4651 Van Dyke Rd
LUTZ, FL 33558

Address

11200 Seminole Blvd Ste 205
LARGO, FL 33778

Address

5200 Seminole Blvd.
ST. PETERSBURG, FL 33778

Address

8787 Bryan Dairy Rd Ste 360
LARGO, FL 33777

Address

500 Vonderburg Dr. Ste 206E
BRANDON, FL 33511

Address

608 S 9th St Sute C

LEESBURG, FL 34748

[Address](#)

14095 Cortez Blvd.

BROOKSVILLE, FL 34613

[Address](#)

14407 N Dale Mabry Hwy

TAMPA, FL 33618

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
BURKE, MARTIN GREGORY	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9106669	2/10/2026
ESQUINALDO, JULIE ANN	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	3722	3/9/2026
SOOKHOO, AARON ALEXANDER	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9108769	2/10/2026

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.