Florida HEALTH Department of Health

AMY SIMON ROSS

License Number: ME100102

Data As Of 11/2/2026

Profession	Medical Doctor
License	ME100102
License Status	Clear/Active
Qualifications	Dispensing Practitioner
License Expiration Date	1/31/2028
License Original Issue Date	10/03/2007
Address of Record	4197 Woodlands Pkwy PALM HARBOR, FL 34685
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	Yes
Discipline on File	No
Public Complaint	No

Secondary Locations

Address
1801 S. Osprey Ave Ste 201
SARASOTA, FL 34239

Address
11601 Sheldon Rd
TAMPA, FL 33626

Address
1022 Main St. Ste R
DUNEDIN, FL 34698

Address
1840 Mease Dr. Ste 406
SAFETY HARBOR, FL 34695

Address
600 Lakeview Rd Suite A
CLEARWATER, FL 33756

Address
3622 MADACA LN
TAMPA, FL 33618

Address
310 S MACDILL AVE SUITE 201
TAMPA, FL 33609

Address
621 MEDICAL CARE DR
BRANDON, FL 33511

Address
5310 Clark Rd Ste 201
SARASOTA, FL 34233

Address
15416 N Florida Ave
TAMPA, FL 33613

Address
1425 S. Howard Ave
TAMPA, FL 33606

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
BROOKS, JESSICA MARIE	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9118985	10/17/2024
BROOKS, JESSICA MARIE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9118985	10/17/2024
FORD, AUDREY FRIEDLAND	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9105042	7/1/2024
FORD, AUDREY FRIEDLAND	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9105042	8/1/2024
JORDAN, MICHELLE LYNNE PA-C	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9104461	3/27/2024
JORDAN, MICHELLE LYNNE PA-C	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9104461	3/27/2024
KIRKLAND, ASHLEE FAYE	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9105051	10/7/2024
KIRKLAND, ASHLEE FAYE	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9105051	10/7/2024
MCILVAINE, KELLEY MULFINGER	DISPENSING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9111274	7/1/2024
MCILVAINE, KELLEY MULFINGER	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9111274	7/1/2024

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

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