STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968796	R **02/28/2017**
NAME OF PROVIDER OR SUPPLIER **SUPERIOR RESIDENCES OF PANAMA CITY BEACH**	STREET ADDRESS, CITY, STATE, ZIP CODE **95 GRAND HERON DR** **PANAMA CITY, FL 32407**	

SUMMARY STATEMENT OF DEFICIENCIES
(FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)

0000 - Initial Comments

An unannounced revisit survey to (CCR#2016011974) in conjunction with the biennial survey was conducted at Superior Residences of Panama City Beach, license number 12646, from 2/27/17 through 2/28/17. At the time of survey the deficiencies were found to be corrected.