

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 04/25/2017
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11968388	(X3) DATE SURVEY COMPLETED 04/18/2017
NAME OF PROVIDER OR SUPPLIER ANGELS SENIOR AT CONNERTON COURT LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 21021 BETEL PALM LN LAND O LAKES, FL 34638	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments Assisted Living Facility A complaint investigation, (CCR# 2017002020), was conducted at Angels Senior at Connerton Court Llc on 4/18/17. Angels Senior at Connerton Court Llc had no deficiencies at the time of the investigation. (License #12268)		