STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11911115	R **04/27/2017**
NAME OF PROVIDER OR SUPPLIER **RULEME PLACE**	STREET ADDRESS, CITY, STATE, ZIP CODE **2808 RULEME STREET** **EUSTIS, FL 32726**	

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

0000 - Initial Comments

A desk review was conducted on 4/27/2017 as follow-up to Biennial Survey for Ruleme Place (facility license number 7151). The previously cited deficiencies were cleared as a result of the desk review.