STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11911313	**06/01/2017**
NAME OF PROVIDER OR SUPPLIER **ALABAMA OAKS OF WINTER PARK**	STREET ADDRESS, CITY, STATE, ZIP CODE **1759 ALABAMA DRIVE** **WINTER PARK, FL 32789**	

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

0000 - Initial Comments

Complaint investigation survey #2017002794 was conducted on 06/01/2017. Alabama Oaks of Winter Park, License#37, did not have any deficiencies at the time of the visit.