

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 07/12/2017
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11966162	(X3) DATE SURVEY COMPLETED 05/30/2017
NAME OF PROVIDER OR SUPPLIER JOY OF LIVING II	STREET ADDRESS, CITY, STATE, ZIP CODE 8548 ALAM AVENUE VENICE, FL 34287	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments An unannounced biennial survey was conducted 5/30/17 at Joy of Living II, an assisted living facility (license #10410) located in North Port, Florida. No deficiencies were found at time of survey.		