STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11969264	**09/29/2017**
NAME OF PROVIDER OR SUPPLIER **PARKSIDE ASSISTED LIVING AND MEMORY COTTAGE LLC**	STREET ADDRESS, CITY, STATE, ZIP CODE **2595 HARBOR BLVD** **PORT CHARLOTTE, FL 33952**	

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

0000 - Initial Comments

An announced initial licensure survey was conducted 9/20/17 through 9/29/17 at Parkside Assisted Living and Memory Cottage LLC., an assisted living facility (license #pending) located in Port Charlotte, Florida.

No deficiencies were found at the time of the visit. Recommend standard license with Limited Nursing Services, with a capacity of 94 beds as requested.