

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 12/08/2017
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11967095	(X3) DATE SURVEY COMPLETED R 11/28/2017
NAME OF PROVIDER OR SUPPLIER THORNTON GARDENS II	STREET ADDRESS, CITY, STATE, ZIP CODE 1516 MONTCALM STREET ORLANDO, FL 32806	

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

0000 - Initial Comments

11/28/17 Desk review completed to Relicensure survey. Thornton Gardens II, license # 11184, had no deficiencies at the time of the review.