STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11910662	R **01/19/2018**
NAME OF PROVIDER OR SUPPLIER **COVENANT VILLAGE OF FLORIDA, INC.**	STREET ADDRESS, CITY, STATE, ZIP CODE **9211 WEST BROWARD BLVD** **PLANTATION, FL 33324**	

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

0000 - Initial Comments

A relicensure survey revisit was conducted by desk review on 01/19/2018 for Covenant Village of Florida, Inc (License #5941). All previously cited deficiencies were found corrected.