STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11969003	**12/21/2017**
NAME OF PROVIDER OR SUPPLIER **VOLTERRA AT SOLIVITA MARKETPLACE**	STREET ADDRESS, CITY, STATE, ZIP CODE **4600 MARIGOLD AVE** **KISSIMMEE, FL 34758**	

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

0000 - Initial Comments

An unannounced complaint investigation (CCR 2017010960) was conducted at Volterra at Solivita (license 12834) in Kissimmee, Florida from 12/20/2017 to 12/21/2017. No deficient practice was found at the time of the complaint investigation.