

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 02/06/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11968334	(X3) DATE SURVEY COMPLETED 01/09/2018
NAME OF PROVIDER OR SUPPLIER SUMTER PLACE IN THE VILLAGES	STREET ADDRESS, CITY, STATE, ZIP CODE 1550 KILLINGSWORTH WAY THE VILLAGES, FL 32162	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		

0000 - Initial Comments

Revised 2/6/18

An unannounced change of ownership (CHOW) licensure survey was conducted on 01/09/2018 at Sumter Place in The Villages (License #12227), The Villages, FL. No deficient practice was identified at the time of the survey.