

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 02/21/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11967795	(X3) DATE SURVEY COMPLETED R 07/03/2017
NAME OF PROVIDER OR SUPPLIER ANGUILLA CAY SENIOR LIVING	STREET ADDRESS, CITY, STATE, ZIP CODE 1021 NORTH RIDGE ROAD LANTANA, FL 33462	

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

0000 - Initial Comments

A desk review revisit to the Complaint Survey CCR# 2017000312 & #2017000509 was conducted on 06/26/2017 and 07/03/2017 at Anguilla Cay Senior Living located in Lantana, FL License # 11772. The facility had no deficiencies at the time of the visit.