

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 02/27/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11964825	(X3) DATE SURVEY COMPLETED 02/15/2018
NAME OF PROVIDER OR SUPPLIER SUNSET LAKE VILLAGE	STREET ADDRESS, CITY, STATE, ZIP CODE 1121 JACARANDA BLVD VENICE, FL 34292	

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

0000 - Initial Comments

An unannounced limited nursing services survey was conducted on 2/15/18 at Sunset Lake Village, an assisted living facility (license #9325) in Venice, Florida.

No deficiencies were found at the time of the visit.