STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968334	C **04/18/2018**
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

An unannounced complaint survey (CCR#20180001769) was conducted on 04.18.2018 at Sumter Place in The Villages (License #12227), The Villages, FL. No deficient practice was identified at the time of the survey.