

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 06/05/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11967383	(X3) DATE SURVEY COMPLETED 05/24/2018
NAME OF PROVIDER OR SUPPLIER TROPICAL LIVING CLUB 2	STREET ADDRESS, CITY, STATE, ZIP CODE 320 FORTENBERRY ROAD MERRITT ISLAND, FL 32952	

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

0000 - Initial Comments

A biennial Relicensure survey was conducted on May 24, 2018. Tropical Living Club 2, license #11392, did not have any deficiencies at the time of the survey.