STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11910312	**05/22/2018**
NAME OF PROVIDER OR SUPPLIER **DAYSPRING VILLAGE, INC.**	STREET ADDRESS, CITY, STATE, ZIP CODE **542301 US HIGHWAY #1** **HILLIARD, FL 32046**	

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

0000 - Initial Comments

A capacity increase survey and a complaint investigation (CCR #2018002808) were conducted at Dayspring Village (license #12509) on 5/17/2018. No deficiencies were identified at the time of the investigation.