

AGENCY FOR HEALTH CARE
ADMINISTRATION

PRINTED: 06/11/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11968474	(X3) DATE SURVEY COMPLETED R 06/05/2018
NAME OF PROVIDER OR SUPPLIER OAKMONTE VILLAGE OF LAKE MARY-CORDOVA	STREET ADDRESS, CITY, STATE, ZIP CODE 1001 ROYAL GARDENS CIR LAKE MARY, FL 32746	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments A revisit to Complaint Investigation #2018000661 was conducted on June 5, 2018. Oakmonte Village of Lake Mary-Cordova, license #12350, had no deficiencies at the time of the revisit.		