

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 07/18/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11953671	(X3) DATE SURVEY COMPLETED R 06/28/2018
NAME OF PROVIDER OR SUPPLIER LIVEWELL AT GRAND COURT LAKES, LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 280 SIERRA DRIVE NORTH MIAMI BEACH, FL 33179	

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

0000 - Initial Comments

A Change of Ownership survey was conducted on 6/28/18 at Livewell At Grand Court Lakes, LLC, License# 8390, had no deficiencies identified at the time of the survey.