STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11911311	**07/11/2018**
NAME OF PROVIDER OR SUPPLIER **FLORIDA SHORES OF MELBOURNE 1 ALF**	STREET ADDRESS, CITY, STATE, ZIP CODE **2155 KEYSTONE AVENUE** **MELBOURNE, FL 32904**	

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

0000 - Initial Comments

A re-licensure survey was conducted on 07/11/2018. Florida Shores of Melbourne I ALF, license #7324, had no deficiencies at the time of the visit.