STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968726	**08/10/2018**
NAME OF PROVIDER OR SUPPLIER **SPRING PINE LLC**	STREET ADDRESS, CITY, STATE, ZIP CODE **1324 MILL SLOUGH RD** **KISSIMMEE, FL 34744**	

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

0000 - Initial Comments

An unannounced monitoring visit related to emergency environmental assessment was conducted at Spring Pine Assisted Living Facility (license 12586), 1324 Mill Slough Road, Kissimmee, Florida, on 8/10/2018. At the time of the monitoring visit no deficient practices were found.