

**AGENCY FOR HEALTH CARE  
ADMINISTRATION**

PRINTED: 10/02/2018  
FORM APPROVED

|                                                                                                                                                                                                                                                    |                                                                                                      |                                                                     |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|
| STATEMENT OF DEFICIENCIES                                                                                                                                                                                                                          | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br><b>AL11968474</b>                          | (X3) DATE SURVEY COMPLETED<br><br><b>R</b><br><br><b>09/05/2018</b> |
| NAME OF PROVIDER OR SUPPLIER<br><b>OAKMONTE VILLAGE OF LAKE MARY-CORDOVA</b>                                                                                                                                                                       | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>1001 ROYAL GARDENS CIR</b><br><b>LAKE MARY, FL 32746</b> |                                                                     |
| SUMMARY STATEMENT OF DEFICIENCIES<br>(FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)                                                                                                                                            |                                                                                                      |                                                                     |
| <p><b>0000 - Initial Comments</b></p> <p>A revisit to Complaint Investigation #2018005009 was conducted on 9/5/18. Oakmont Village of Lake Mary-Cordova license #12350 had no deficiencies at the time of the visit pertaining to the revisit.</p> |                                                                                                      |                                                                     |