

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 11/15/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11964280	(X3) DATE SURVEY COMPLETED 11/05/2018
NAME OF PROVIDER OR SUPPLIER MAGNOLIA MANOR AT DAYTONA BEACH, LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 252 FOREST LAKE BLVD DAYTONA BEACH, FL 32119	

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

0000 - Initial Comments

A complaint investigation (CCR #2018011987) was conducted at Magnolia Manor at Daytona Beach, LLC (License Number: 8869) from 11/2/18 to 11/5/18. Magnolia Manor at Daytona Beach, LLC had no deficiencies at the time of the investigation.