STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11969083	R **11/01/2018**
NAME OF PROVIDER OR SUPPLIER **HC GOLDEN AGE ALF, CORP**	STREET ADDRESS, CITY, STATE, ZIP CODE **15295 PALMETTO LAKE DR** **MIAMI, FL 33157**	

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

0000 - Initial Comments

A Complaint Revisit Survey was conducted on 11/01/2018. HC Golden Age ALF Corp. License 12915 had no deficiencies identified at the time of survey.