

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 11/29/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11967835	(X3) DATE SURVEY COMPLETED 06/21/2018
NAME OF PROVIDER OR SUPPLIER PENDRY ESTATES	STREET ADDRESS, CITY, STATE, ZIP CODE 36120 HUFF ROAD EUSTIS, FL 32736	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments On June 21, 2018, an unannounced complaint investigation (CCR #2018008477) survey was conducted at Pendry Estates Assisted Living Facility (License #11806), Eustis, FL. No deficient practice was identified at the time of the survey.		