STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966400	**11/21/2018**
NAME OF PROVIDER OR SUPPLIER **PHOENIX SENIOR LIVING II, INC.**	STREET ADDRESS, CITY, STATE, ZIP CODE **5882 NW 73RD COURT** **PARKLAND, FL 33067**	

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

0000 - Initial Comments

An unannounced licensure complaint survey, CCR #2018013657, was conducted on 11/21/2018 at Phoenix Senior Living II Inc., License #10598. The facility had no deficiencies identified at the time of the survey.

(An unannounced Abbreviated Relicensure survey was conducted in conjunction with the above licensure complaint survey. Please see separate report for findings.)