STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968333	**11/29/2018**
NAME OF PROVIDER OR SUPPLIER **ALLEGRO AT ABACOA, (THE)**	STREET ADDRESS, CITY, STATE, ZIP CODE **1031 COMMUNITY DRIVE** **JUPITER, FL 33458**	

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

0000 - Initial Comments

An unannounced licensure complaint survey, CCR #2018013028, was conducted on 11/28/2018 through 11/29/2018 at The Allegro At Abacoa, License #12270. The facility had no deficiencies at the time of the survey.

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