STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11963950	**11/05/2018**
NAME OF PROVIDER OR SUPPLIER **BENEVA LAKES ASSISTED LIVING CENTER**	STREET ADDRESS, CITY, STATE, ZIP CODE **743 S. BENEVA ROAD** **SARASOTA, FL 34232**	

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

0000 - Initial Comments

An unannounced complaint survey for CCR# 2018012617 & CCR#2018013949 was conducted 11/5/18 at Beneva Lakes Assisted Living Center, an assisted living facility (license #6563) in Sarasota, Florida.

Complaint #2018012617 contained two allegations, all of which were unsubstantiated.
Complaint #2018013949 contained three allegations, all of which were unsubstantiated.

No deficiencies were found at the time of the visit.