STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11911156	C **03/04/2019**
NAME OF PROVIDER OR SUPPLIER **VISIONARY LIVING, INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **923 NORTH 77TH AVENUE** **PENSACOLA, FL 32506**	

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

0000 - Initial Comments

A complaint survey CCR# 2019000397 was conducted at Visionary Living Inc on February 28, 2019 and additional survey information obtained on March 4, 2019. At the time of the survey, no deficient practice was found.