STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11969506	C **04/05/2019**
NAME OF PROVIDER OR SUPPLIER **PADDOCK RIDGE**	STREET ADDRESS, CITY, STATE, ZIP CODE **4001 SW 33RD COURT** **OCALA, FL 34474**	

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

0000 - Initial Comments

An announced initial licensure survey was conducted at Paddock Ridge on , , . . No deficiencies were identified at the time of the survey.