STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11911313	R **04/05/2019**
NAME OF PROVIDER OR SUPPLIER **ALABAMA OAKS OF WINTER PARK**	STREET ADDRESS, CITY, STATE, ZIP CODE **1759 ALABAMA DRIVE** **WINTER PARK, FL 32789**	

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

0000 - Initial Comments

Desk review to Complaint investigation #2019000888 was conducted on . . . . . Alabama Oaks of Winter Park, license #37, had no deficiencies at the time.