

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 05/08/2019
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11969003	(X3) DATE SURVEY COMPLETED 04/11/2019
NAME OF PROVIDER OR SUPPLIER MERRILL GARDENS AT SOLVITA MARKETPLACE	STREET ADDRESS, CITY, STATE, ZIP CODE 4600 MARIGOLD AVE KISSIMMEE, FL 34758	

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

0000 - Initial Comments

A complaint investigation #2019001130 was conducted at Merrill Gardens at Solivita Marketplace on 04/10/2019 and 04/11/2019. The facility had no deficiencies related to the complaint at the time of the survey.