

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

**PRINTED: 05/08/2019
FORM APPROVED**

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11969186	(X3) DATE SURVEY COMPLETED 04/17/2019
NAME OF PROVIDER OR SUPPLIER HERITAGE WATERSIDE LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 3704 CARDINAL BLVD DAYTONA BEACH, FL 32118	

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

0000 - Initial Comments

A re-licensure survey was conducted at Heritage Waterside, LLC on April 17, 2019. Deficiencies were not identified at the time of the survey.