STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968653	R **06/11/2019**
NAME OF PROVIDER OR SUPPLIER **SOUTHERN LIVING OF TITUSVILLE**	STREET ADDRESS, CITY, STATE, ZIP CODE **2375 JAY JAY RD** **TITUSVILLE, FL 32796**	

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

0000 - Initial Comments

A revisit survey was conducted on 6/11/2019 at Southern Living of Titusville. No deficiencies were found at the time of the visit.