STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965516	**04/13/2017**
NAME OF PROVIDER OR SUPPLIER **SONATA DELRAY BEACH**	STREET ADDRESS, CITY, STATE, ZIP CODE **8020 W. ATLANTIC AVENUE** **DELRAY BEACH, FL 33446**	

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

0000 - Initial Comments

An unannounced Change of Ownership survey was conducted at Sonata Delay(License#9881) on 4/13/2017. The facility had no deficiencies found during the time of the survey.