STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968685	**10/16/2018**
NAME OF PROVIDER OR SUPPLIER **ARAVILLA**	STREET ADDRESS, CITY, STATE, ZIP CODE **3251 PROCTOR RD** **SARASOTA, FL 34231**	

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

0000 - Initial Comments

An unannounced license capacity increase survey was conducted 10/16/18 at Aravilla, an assisted living facility (license number #12551) in Sarasota, Florida.

No deficiencies were found at the time of the visit.

Recommend capacity increase to 228 beds as requested.