STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11964934	R **10/17/2018**
NAME OF PROVIDER OR SUPPLIER **CABOT RESERVE ON THE GREEN**	STREET ADDRESS, CITY, STATE, ZIP CODE **4450 8TH STREET** **SARASOTA, FL 34232**	

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

0000 - Initial Comments

An unannounced revisit survey was conducted on 10/17/18 at Cabot Reserve on the Green, an assisted living facility (license #9381) in Sarasota, Florida.

This was a follow-up to the complaint #2018006219 survey completed on 6/18/18.

The previous deficiencies were found corrected and no new deficiencies were identified.