

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 03/08/2019
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11965658	(X3) DATE SURVEY COMPLETED R 01/30/2019
NAME OF PROVIDER OR SUPPLIER PALM COTTAGES OF ROCKLEDGE	STREET ADDRESS, CITY, STATE, ZIP CODE 3821 SUNNYSIDE COURT ROCKLEDGE, FL 32955	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments 01/30/19 desk review conducted to Extended Congregate Care Monitoring visit. Palm Cottages of Rockledge, license #9987, had no deficiencies at the time of the review.		