STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11969148	R **03/20/2019**
NAME OF PROVIDER OR SUPPLIER **OAKMONTE VILLAGE OF DAVIE**	STREET ADDRESS, CITY, STATE, ZIP CODE **8201 STIRLING RD** **DAVIE, FL 33328**	

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

0000 - Initial Comments

An unannounced Relicensure revisit survey was conducted on 03/20/2019 at Oakmonte Village of Davie, License #12960. Previously cited deficiencies were found corrected at the time of the survey.