STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11964951	**06/06/2017**
NAME OF PROVIDER OR SUPPLIER **ARDEN COURTS OF LARGO**	STREET ADDRESS, CITY, STATE, ZIP CODE **300 HIGHLAND AVENUE, NE** **LARGO, FL 33770**	

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

0000 - Initial Comments

Assisted Living Facility

A complaint investigation, (CCR# 2017005709), was conducted at Arden Courts of Largo, assisted living facility, on 6/6/2017. There were no deficiencies identified at the time of the visit.

(License # 9403)