STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966055	**06/30/2017**
NAME OF PROVIDER OR SUPPLIER **ALLEGRO AT EAST LAKE LLC (THE)**	STREET ADDRESS, CITY, STATE, ZIP CODE **1755 EAST LAKE ROAD** **TARPON SPRINGS, FL 34688**	

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

0000 - Initial Comments

Assisted Living Facility

On June 30, 2017, a capacity increase survey was conducted at The Allegro at East Lake. No deficiencies were identified at the time of the visit. A recommendation for a capacity increase is being made at this time.

(License # 10331)