

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 10/11/2017
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11922285	(X3) DATE SURVEY COMPLETED 09/28/2017
NAME OF PROVIDER OR SUPPLIER PRINCETON VILLAGE OF LARGO	STREET ADDRESS, CITY, STATE, ZIP CODE 333 16TH AVENUE SOUTHEAST LARGO, FL 33771	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments Assisted Living Facility An unannounced complaint investigation, (CCR# 2017007199), was conducted on 9/28/17. The Princeton Village of Largo, Assisted Living Facility, (License #7933), had no deficiencies at the time of this visit.		