

Intermediate Care Facilities-Persons with Intellectual Disability (15 Beds or |

DHEC Regulation 61-13

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
ACADEMY STREET COMMUNITY RESIDENCE 241 ACADEMY ST WILLISTON, SC 29853 FACILITY #:803-259-7472 WASHINGTON MARY L PH#: 803-266-7833 Facility Email: BPARKER@BARNWELLSC.COM Fac. Cont. Email: No Facility Contact Email on Record	MR15-0177 / 06/30/2018 Barnwell / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS

Total Number of Licensed Beds 8

ARCHIE DRIVE GROUP HOME 33 ARCHIE DR COLUMBIA, SC 29223-5813 FACILITY #:803-799-1970 BOATWRIGHT ADRIAN PH#: 803-788-7804 Facility Email: JJOHNSON@BABCOCKCENTER.ORG Fac. Cont. Email: ADAVIS@BABCOCKCENTER.ORG	MR15-0178 / 06/30/2018 Richland / State PO BOX 4706, CO-DEPT OF DISABILITIES & SPECIAL NEEDS COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
--	--

Total Number of Licensed Beds 8

ATKINSON EAST COMMUNITY RESIDENCE 13 KENDRICK ST SUMTER, SC 29150-5224 FACILITY #:803-778-1669 YOUNG LAKEILAD PH#: 803-778-1669 Facility Email: TWARREN@SCDSNB.ORG Fac. Cont. Email: No Facility Contact Email on Record	MR15-0179 / 06/30/2018 Sumter / State PO BOX 4706, CO-DEPT OF DISABILITIES & SPECIAL NEEDS COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
--	--

Total Number of Licensed Beds 9

ATKINSON WEST COMMUNITY RESIDENCE 162 COMMUNITY ST SUMTER, SC 29150-3316 FACILITY #:803-778-1669 YOUNG LAKEILAD PH#: 803-778-1669 Facility Email: TWARREN@SCDSNB.ORG Fac. Cont. Email: No Facility Contact Email on Record	MR15-0180 / 06/30/2018 Sumter / State DDSN C/O DAVID GOODELL, PO BOX 4706 COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
--	---

Total Number of Licensed Beds 9

BATESBURG GROUP HOME 132 PINEWOOD DR BATESBURG, SC 29006-2329 FACILITY #:803-799-1970 WILLIAMS GILDA PH#: 803-799-1970 Facility Email: JJOHNSON@BABCOCKCENTER.ORG Fac. Cont. Email: JJOHNSON@BABOCKCENTER.ORG	MR15-0181 / 06/30/2018 Lexington / State PO BOX 4706, CO-DEPT OF DISABILITIES & SPECIAL NEEDS COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
---	---

Total Number of Licensed Beds 8

Intermediate Care Facilities-Persons with Intellectual Disability (15 Beds or |

DHEC Regulation 61-13

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
BENCHMARK HOMES-COWPENS 204 GOFORTH ST COWPENS, SC 29330-9277 FACILITY #:864-562-2222 LAWSON ALICE PH#: 864-585-0322 Facility Email: JBERNARD@CHARLESLEA.ORG Fac. Cont. Email: No Facility Contact Email on Record	MR15-0182 / 06/30/2018 Spartanburg / State PO BOX 4706, CO-DEPT OF DISABILITIES & SPECIAL NEEDS COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS

Total Number of Licensed Beds 2

BRUTON SMITH ROAD GROUP HOME 139 BRUTON SMITH RD LEXINGTON, SC 29072 FACILITY #:803-359-1350 WARD DELORIS PH#: 803-359-1350 Facility Email: JBURTON@BURTONCENTER.ORG Fac. Cont. Email: No Facility Contact Email on Record	MR15-0185 / 06/30/2018 Lexington / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
--	--

Total Number of Licensed Beds 8

CARTER STREET GROUP HOME 1203 CARTER ST COLUMBIA, SC 29204-2852 FACILITY #:803-799-1970 DAVIS ADRIAN PH#: 803-799-1970 Facility Email: JJOHNSON@BABCOCKCENTER.ORG Fac. Cont. Email: JJOHNSON@BABCOCKCENTER.ORG	MR15-0193 / 06/30/2018 Richland / State PO BOX 4706, CO-DEPT OF DISABILITIES & SPECIAL NEEDS COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
--	--

Total Number of Licensed Beds 8

CEDARS 123 W FIFTH AVE PAMPLICO, SC 29583 FACILITY #:843-667-5007 HAYES ASHLEY PH#: 843-667-5007 Facility Email: DJOHNSON@FCDSN.ORG Fac. Cont. Email: DJOHNSON@FCDSN.ORG	MR15-0127 / 08/31/2018 Florence / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
--	---

Total Number of Licensed Beds 8

CIVITAN COMMUNITY RESIDENCE 1820 RIDGE RD GREENVILLE, SC 29607-4704 FACILITY #:864-679-0220 EDMOND NORIKA D PH#: 864-679-0220 Facility Email: AL.HILL@THRIVEUPSTATE.ORG Fac. Cont. Email: NORIKA.EDMOND@THRIVEUPSTATE.ORG	MR15-0113 / 12/31/2018 Greenville / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
---	---

Total Number of Licensed Beds 8

Intermediate Care Facilities-Persons with Intellectual Disability (15 Beds or |

DHEC Regulation 61-13

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
CLINTON MANOR COMMUNITY RESIDENCE 101 CLINTON MANOR DR CLINTON, SC 29325 FACILITY #:864-682-2314 WISE KIM PH#: 864-683-5625 Facility Email: KWISE@LCDSNB.ORG Fac. Cont. Email: KWISE@LCDSNB.ORG	MR15-0194 / 06/30/2018 Laurens / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS

Total Number of Licensed Beds 8

CONIFER I COMMUNITY RESIDENCE 110 RESINWOOD DR MONCKS CORNER, SC 29461 FACILITY #:843-761-0311 WILSON SUSAN PH#: 843-761-0311 Facility Email: ASHOOK@BCISERVICES.ORG Fac. Cont. Email: ASHOOK@BCISERVICES.ORG	MR15-0119 / 05/31/2018 Berkeley / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
---	---

Total Number of Licensed Beds 8

CONIFER II COMMUNITY RESIDENCE 114 RESINWOOD DR MONCKS CORNER, SC 29461 FACILITY #:843-761-0311 WILSON SUSAN PH#: 843-761-0311 Facility Email: ASHOOK@BCISERVICES.ORG Fac. Cont. Email: ASHOOK@BCISERVICES.ORG	MR15-0120 / 05/31/2018 Berkeley / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
--	---

Total Number of Licensed Beds 8

DILLS BLUFF COMMUNITY RESIDENCE 936 DILLS BLUFF RD CHARLESTON, SC 29412-5316 FACILITY #:843-805-5800 TURNER EVELYN ASH PH#: 843-805-5800 Facility Email: ETURNER@DSNCC.COM Fac. Cont. Email: ETURNER@DSNCC.COM	MR15-0131 / 10/31/2018 Charleston / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
--	---

Total Number of Licensed Beds 8

DUPONT I HABILITATION CENTER 127 DUPONT DR AIKEN, SC 29801 FACILITY #:803-642-8800 HALL MICHAEL B PH#: 803-642-8800 Facility Email: RCOURTNEY@AIKENTDC.ORG Fac. Cont. Email: RCOURTNEY@AIKENTDC.ORG	MR15-0141 / 07/31/2018 Aiken / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
---	--

Total Number of Licensed Beds 8

Intermediate Care Facilities-Persons with Intellectual Disability (15 Beds or |

DHEC Regulation 61-13

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
DUPONT II HABILITATION CENTER 129 DUPONT DR AIKEN, SC 29801 FACILITY #:803-642-8800 HALL MICHAEL B PH#: 803-642-8800 Facility Email: RCOURTNEY@AIKENTDC.ORG Fac. Cont. Email: RCOURTNEY@AIKENTDC.ORG	MR15-0142 / 07/31/2018 Aiken / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS

Total Number of Licensed Beds 8

EDGEFIELD COMMUNITY RESIDENCE 1305 HILLCREST DR EDGEFIELD, SC 29824 FACILITY #:864-445-8178 SMITH OMEGA PH#: 864-445-8178 Facility Email: JBURTON@BURTONCENTER.ORG Fac. Cont. Email: JBURTON@BURTONCENTER.ORG	MR15-0139 / 07/31/2018 Edgefield / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
---	--

Total Number of Licensed Beds 8

FLORENCE COMMUNITY RESIDENCE 511 CLYDE ST FLORENCE, SC 29506-3011 FACILITY #:843-667-5007 ROBINSON JAMES DAVID PH#: 843-667-5007 Facility Email: DJOHNSON@FCDSN.ORG Fac. Cont. Email: No Facility Contact Email on Record	MR15-0025 / 03/31/2018 Florence / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
---	---

Total Number of Licensed Beds 8

FLORENCE GRESSETTE RESIDENCE 402 MILLIGAN CIR SAINT MATTHEWS, SC 29135-9422 FACILITY #:803-874-2664 MOSS R PIKE PH#: 803-874-2664 Facility Email: PMOSS@CALHOUNDSNB.ORG Fac. Cont. Email: PMOSS@CALHOUNDSNB.ORG	MR15-0196 / 06/30/2018 Calhoun / State PO BOX 4706, CO-DEPT OF DISABILITIES & SPECIAL NEEDS COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
---	---

Total Number of Licensed Beds 8

FOUNTAIN INN COMMUNITY RESIDENCE 105 OLD FAIRVIEW RD FOUNTAIN INN, SC 29644-1822 FACILITY #:864-288-1907 BYRD-CHIRINOUS NIELA PH#: 864-288-1907 Facility Email: JCOCCIOLONE@THRIVEUPSTATE.ORG Fac. Cont. Email: JCOCCIOLONE@THRIVEUPSTATE.ORG	MR15-0197 / 06/30/2018 Greenville / State PO BOX 4706, CO-DEPT OF DISABILITIES & SPECIAL NEEDS COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
---	--

Total Number of Licensed Beds 12

Intermediate Care Facilities-Persons with Intellectual Disability (15 Beds or |

DHEC Regulation 61-13

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
H A MCCULLOUGH COMMUNITY RESIDENCE 2600 HOLLOWAY ST NEWBERRY, SC 29108-4500 FACILITY #:803-276-1542 JONES ROBERT S PH#: 803-276-1542 Facility Email: BJONES@NCDSNB.ORG Fac. Cont. Email: BJONES@NCDSNB.ORG	MR15-0102 / 03/31/2018 Newberry / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS

Total Number of Licensed Beds 2

HARLEY ROAD COMMUNITY RESIDENCE 226 HARLEY RD WILLISTON, SC 29853 FACILITY #:803-259-7472 WASHINGTON MARY L PH#: 803-259-7472 Facility Email: BPARKER@BARNWELLSC.COM Fac. Cont. Email: BPARKER@BARNWELLSC.COM	MR15-0198 / 06/30/2018 Barnwell / State PO BOX 4706, CO-DEPT OF DISABILITIES & SPECIAL NEEDS COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
---	--

Total Number of Licensed Beds 8

HENDRIX STREET GROUP HOME 425 HENDRIX ST LEXINGTON, SC 29072 FACILITY #:803-359-4888 WARD DELORIS PH#: 803-359-4888 Facility Email: JBURTON@BURTONCENTER.ORG Fac. Cont. Email: No Facility Contact Email on Record	MR15-0199 / 06/30/2018 Lexington / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
--	--

Total Number of Licensed Beds 8

HENRY & FREIDA BONDS HABILITATION CENTER 310 JENKINS SPRING RD GREENWOOD, SC 29646-8617 FACILITY #:864-942-8646 MCGRIER TAKIA N PH#: 864-942-8646 Facility Email: JBURTON@BURTONCENTER.ORG Fac. Cont. Email: JBURTON@BURTONCENTER.ORG	MR15-0111 / 08/31/2018 Greenwood / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
---	--

Total Number of Licensed Beds 8

HORRELL HILL COMMUNITY RESIDENCE 1614 RIDGE RD HOPKINS, SC 29061 FACILITY #:803-799-1970 DAVIS ADRIAN PH#: 803-783-0545 Facility Email: JJOHNSON@BABCOCKCENTER.ORG Fac. Cont. Email: ADAVIS@BABCOCKCENTER.ORG	MR15-0200 / 06/30/2018 Richland / State PO BOX 4706, CO-DEPT OF DISABILITIES & SPECIAL NEEDS COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
---	--

Total Number of Licensed Beds 8

Intermediate Care Facilities-Persons with Intellectual Disability (15 Beds or |

DHEC Regulation 61-13

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
HUGHES STREET COMMUNITY RESIDENCE 104 HUGHES ST FOUNTAIN INN, SC 29644-2110 FACILITY #:864-288-1907 BYRD-CHIRINOUS NIELA PH#: 864-288-1907 Facility Email: JCOCCIOLONE@THRIVEUPSTATE.ORG Fac. Cont. Email: JCOCCIOLONE@THRIVEUPSTATE.ORG	MR15-0201 / 06/30/2018 Greenville / State PO BOX 4706, CO-DEPT OF DISABILITIES & SPECIAL NEEDS COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS

Total Number of Licensed Beds 8

J CLAUDE FORT COMMUNITY RESIDENCE BUILDING I 816 W MONTGOMERY ST GAFFNEY, SC 29341-1753 FACILITY #:864-649-2306 THOMAS MARY H PH#: 864-487-4786 Facility Email: JWHITE@CHEROKEEDSNB.ORG Fac. Cont. Email: No Facility Contact Email on Record	MR15-0091 / 11/30/2018 Cherokee / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
---	---

Total Number of Licensed Beds 8

J CLAUDE FORT COMMUNITY RESIDENCE BUILDING II 818 W MONTGOMERY ST GAFFNEY, SC 29341-1753 FACILITY #:864-649-2306 THOMAS MARY H PH#: 864-487-4787 Facility Email: JWHITE@CHEROKEEDSNB.ORG Fac. Cont. Email: MTHOMAS@CHEROKEEDSND.ORG	MR15-0092 / 11/30/2018 Cherokee / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
---	---

Total Number of Licensed Beds 8

J FELTON BURTON COMMUNITY RESIDENCE 308 JENKINS SPRING RD GREENWOOD, SC 29646-8617 FACILITY #:864-942-8947 MCGRIER TAKIA N PH#: 864-942-8947 Facility Email: JBURTON@BURTONCENTER.ORG Fac. Cont. Email: JBURTON@BURTONCENTER.ORG	MR15-0072 / 05/31/2018 Greenwood / State PO BOX 4706, DDNS C/O DAVID GOODELL COLUMBIA, SC 29240 SOUTH CAROLINA DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
--	---

Total Number of Licensed Beds 8

JOHN A REAGAN RESIDENCE 1100 E CAROLINA AVE HARTSVILLE, SC 29550 FACILITY #:843-332-7252 BLOCKER RUTH PH#: 843-332-7252 Facility Email: RBLOCKER@DCDSNB.ORG Fac. Cont. Email: RBLOCKER@DCDSNB.ORG	MR15-0204 / 06/30/2018 Darlington / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
---	---

Total Number of Licensed Beds 8

Intermediate Care Facilities-Persons with Intellectual Disability (15 Beds or |

DHEC Regulation 61-13

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
JOHNSONVILLE HAMPTON PLACE COMMUNITY RESIDENCE 333 S HAMPTON AVE JOHNSONVILLE, SC 29555 FACILITY #:843-667-5007 MILES BRANDI S PH#: 843-667-5007 Facility Email: DJOHNSON@FCDSN.ORG Fac. Cont. Email: DJOHNSON@FCDSN.ORG	MR15-0161 / 11/30/2018 Florence / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS

Total Number of Licensed Beds 8

KINGS COMMUNITY RESIDENCE 611 KINGS RD ORANGEBURG, SC 29116 FACILITY #:803-536-1170 STEWART VONDA PH#: 803-536-1170 Facility Email: DGOLDMINTZ@OCDSNB.ORG Fac. Cont. Email: DGOLDMINTZ@OCDSNB.ORG	MR15-0152 / 02/28/2018 Orangeburg / State PO BOX 4706 COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
---	---

Total Number of Licensed Beds 8

LAURENS STREET ICF/MR 728 LAURENS ST NW AIKEN, SC 29801 FACILITY #:803-642-8800 HALL MICHAEL B PH#: 803-642-8800 Facility Email: RCOURTNEY@AIKENTDC.ORG Fac. Cont. Email: RCOURTNEY@AIKENTDC.ORG	MR15-0207 / 06/30/2018 Aiken / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
--	--

Total Number of Licensed Beds 8

LEMON PARK COMMUNITY RESIDENCE 95 LEMON PARK DR BARNWELL, SC 29812 FACILITY #:803-259-7472 WASHINGTON MARY L PH#: 803-259-7472 Facility Email: BPARKER@BARNWELLSC.COM Fac. Cont. Email: ABCDSNB@BARNWELLSC.COM	MR15-0208 / 06/30/2018 Barnwell / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
--	---

Total Number of Licensed Beds 8

LINDEN STREET ICF/MR 136 LINDEN ST AIKEN, SC 29801-3759 FACILITY #:803-642-8800 HALL MICHAEL B PH#: 803-642-8800 Facility Email: RCOURTNEY@AIKENTDC.ORG Fac. Cont. Email: RCOURTNEY@AIKENTDC.ORG	MR15-0209 / 06/30/2018 Aiken / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
--	--

Total Number of Licensed Beds 8

Intermediate Care Facilities-Persons with Intellectual Disability (15 Beds or |

DHEC Regulation 61-13

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
MAGNOLIA PLACE 514 E MAIN ST OLANTA, SC 29114 FACILITY #:843-667-5007 BRADLEY MARY PH#: 843-667-5007 Facility Email: DJOHNSON@FCDSN.ORG Fac. Cont. Email: DJOHNSON@FCDSN.ORG	MR15-0126 / 07/31/2018 Florence / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS

Total Number of Licensed Beds 8

MARIAN PARKINS COMMUNITY RESIDENCE I 103 KERNS AVE GREENVILLE, SC 29609 FACILITY #:864-288-1907 EDMOND NORIKA D PH#: 864-288-1907 Facility Email: JCOCCIOLONE@THRIVEUPSTATE.ORG Fac. Cont. Email: JCOCCIOLONE@THRIVEUPSTATE.ORG	MR15-0150 / 05/31/2018 Greenville / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
---	---

Total Number of Licensed Beds 8

MARIAN PARKINS COMMUNITY RESIDENCE II 518 PICKETT ST GREENVILLE, SC 29609 FACILITY #:864-288-1907 STONE AMANDA PH#: 864-288-1907 Facility Email: JCOCCIOLONE@THRIVEUPSTATE.ORG Fac. Cont. Email: JCOCCIOLONE@THRIVEUPSTATE.ORG	MR15-0149 / 05/31/2018 Greenville / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SOUTH CAROLINA DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
--	---

Total Number of Licensed Beds 8

MCLEOD I GROUP HOME 808 MCLEOD RD BISHOPVILLE, SC 29010-1100 FACILITY #:803-484-9473 PARNELL WENDY W PH#: 803-484-9473 Facility Email: MMACK@LCDSN.ORG Fac. Cont. Email: MMACK@LCDSN.ORG	MR15-0210 / 06/30/2018 Lee / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
--	--

Total Number of Licensed Beds 8

MCLEOD II GROUP HOME 814 MCLEOD RD BISHOPVILLE, SC 29010-1100 FACILITY #:803-484-9473 WOODS LEROY J PH#: 803-484-6995 Facility Email: MMACK@LCDSN.ORG Fac. Cont. Email: MMACK@LCDSN.ORG	MR15-0211 / 06/30/2018 Lee / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
---	--

Total Number of Licensed Beds 8

Intermediate Care Facilities-Persons with Intellectual Disability (15 Beds or |

DHEC Regulation 61-13

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
NANCE COMMUNITY RESIDENCE 980 NANCE ST ORANGEBURG, SC 29116 FACILITY #:803-536-1170 STEWART VONDA PH#: 803-536-1170 Facility Email: DGOLDMINTZ@OCDSNB.ORG Fac. Cont. Email: DGOLDMINTZ@OCDSNB.ORG	MR15-0153 / 02/28/2018 Orangeburg / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS

Total Number of Licensed Beds 8

NANCY J MCCONNELL COMMUNITY RESIDENCE 219 S PLANTATION RD LANCASTER, SC 29720-1847 FACILITY #:803-285-4368 MCWATERS SHEILA O PH#: 803-285-4368 Facility Email: SMCWATERS@CLDSN.ORG Fac. Cont. Email: SMCWATERS@CLDSN.ORG	MR15-0075 / 05/31/2018 Lancaster / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SOUTH CAROLINA DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
--	--

Total Number of Licensed Beds 8

NAZARETH ROAD COMMUNITY RESIDENCE 1118 NAZARETH RD LEXINGTON, SC 29073 FACILITY #:803-957-3484 CAUGHMAN BERNEKIA PH#: 803-957-3484 Facility Email: JBURTON@BURTONCENTER.ORG Fac. Cont. Email: JBURTON@BURTONCENTER.ORG	MR15-0213 / 06/30/2018 Lexington / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
--	--

Total Number of Licensed Beds 8

OAKS 108 N PINCKNEY ST TIMMONSVILLE, SC 29161-1449 FACILITY #:843-667-5007 ROBISON JAMES DAVID PH#: 843-667-5007 Facility Email: DJOHNSON@FCDSN.ORG Fac. Cont. Email: DJOHNSON@FCDSN.ORG	MR15-0128 / 09/30/2018 Florence / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
--	---

Total Number of Licensed Beds 8

PARSONS I GROUP HOME 711 PARSONS RD SUMMERVILLE, SC 29483-3359 FACILITY #:843-871-1285 OLDS CHRISTA PH#: 843-871-1285 Facility Email: CELESTE.RICHARDSONS@DORCHESTERDSNB.ORG Fac. Cont. Email: CELESTE.RICHARDSON@DORCHESTERDSNB.ORG	MR15-0215 / 06/30/2018 Dorchester / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
--	---

Total Number of Licensed Beds 8

Intermediate Care Facilities-Persons with Intellectual Disability (15 Beds or |

DHEC Regulation 61-13

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
PARSONS II GROUP HOME 707 PARSONS RD SUMMERVILLE, SC 29483-3359 FACILITY #:843-871-1285 OLDS CHRISTA K PH#: 843-871-1285 Facility Email: CELESTE.RICHARDSON@DORCHESTERDSNB.ORG Fac. Cont. Email: CELESTE.RICHARDSON@DORCHESTERDSNB.ORG	MR15-0216 / 06/30/2018 Dorchester / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS

Total Number of Licensed Beds 8

RABBIT RUN COMMUNITY RESIDENCE 1114 RABBIT RUN RD HOPKINS, SC 29061 FACILITY #:803-799-1970 DAVIS ADRIAN PH#: 803-799-1970 Facility Email: JJOHNSON@BABCOCKCENTER.ORG Fac. Cont. Email: JJOHNSON@BABCOCKCENTER.ORG	MR15-0217 / 06/30/2018 Richland / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
--	---

Total Number of Licensed Beds 8

RIDGE ROAD RESIDENCE 1810 RIDGE RD GREENVILLE, SC 29607-4704 FACILITY #:864-288-1907 OGUNSILE MATTHEW PH#: 864-288-1907 Facility Email: JCOCCIOLONE@THRIVEUPSTATE.ORG Fac. Cont. Email: JCOCCIOLONE@THRIVEUPSTATE.ORG	MR15-0176 / 09/30/2018 Greenville / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
---	---

Total Number of Licensed Beds 12

SIFLY COMMUNITY RESIDENCE 171 WANNAMAHER ST ORANGEBURG, SC 29115-5073 FACILITY #:803-536-1170 STEWART VONDA PH#: 803-536-1170 Facility Email: DGOLDMINTZ@OCDSNB.ORG Fac. Cont. Email: DGOLDMINTZ@OCDSNB.ORG	MR15-0219 / 06/30/2018 Orangeburg / State PO BOX 4706, DDSN CO/ DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
---	---

Total Number of Licensed Beds 8

SULLIVAN STREET COMMUNITY RESIDENCE 503 SULLIVAN ST LAURENS, SC 29360-3449 FACILITY #:864-683-5625 ANDERSON MELISSA PH#: 864-683-5625 Facility Email: MANDERSON@LCDSNB.ORG Fac. Cont. Email: MANDERSON@LCDSNB.ORG	MR15-0221 / 06/30/2018 Laurens / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
---	--

Total Number of Licensed Beds 8

Intermediate Care Facilities-Persons with Intellectual Disability (15 Beds or |

DHEC Regulation 61-13

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
THOMAS DRIVE COMMUNITY RESIDENCE 4 THOMAS DR SUMTER, SC 29150-2428 FACILITY #:803-778-1669 YOUNG LAKEILA D PH#: 803-778-1669 Facility Email: TWARREN@SCDSNB.ORG Fac. Cont. Email: TWARREN@SCDSNB.ORG	MR15-0073 / 05/31/2018 Sumter / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SOUTH CAROLINA DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS

Total Number of Licensed Beds 8

TOM MANGUM COMMUNITY RESIDENCE 223 SOUTH PLANTATION RD LANCASTER, SC 29720 FACILITY #:803-285-4368 MCWATER SHELIA PH#: 803-285-4368 Facility Email: SMCWATERS@CLDSN.ORG Fac. Cont. Email: SMCWATERS@CLDSN.ORG	MR15-0074 / 05/31/2018 Lancaster / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SOUTH CAROLINA DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
---	--

Total Number of Licensed Beds 8

TRAVELERS REST COMMUNITY RESIDENCE 252 LITTLE TEXAS RD TRAVELERS REST, SC 29690 FACILITY #:864-288-1907 STONE AMANDA PH#: 864-288-1907 Facility Email: JCOCCIOLONE@THRIVEUPSTATE.ORG Fac. Cont. Email: JCOCCIOLONE@THRIVEUPSTATE.ORG	MR15-0222 / 06/30/2018 Greenville / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
--	---

Total Number of Licensed Beds 8

WANNAMAKER STREET COMMUNITY RESIDENCE 250 WANNAMAKER ST ORANGEBURG, SC 29115-5067 FACILITY #:803-536-1170 STEWART VONDA PH#: 803-536-1170 Facility Email: DGOLDMINTZ@OCDSNB.ORG Fac. Cont. Email: DGOLDMINTZ@OCDSNB.ORG	MR15-0223 / 06/30/2018 Orangeburg / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
---	---

Total Number of Licensed Beds 8

WARE SHOALS HABILITATION CENTER I 3 GRIFFIN DR WARE SHOALS, SC 29692 FACILITY #:864-942-8914 TOLSON TINA PH#: 864-942-8914 Facility Email: JBURTON@BURTONCENTER.ORG Fac. Cont. Email: JBURTON@BURTONCENTER.ORG	MR15-0132 / 11/30/2018 Greenwood / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
--	--

Total Number of Licensed Beds 8

Intermediate Care Facilities-Persons with Intellectual Disability (15 Beds or |

DHEC Regulation 61-13

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
WEST MAIN STREET COMMUNITY RESIDENCE 1317 W MAIN ST UNION, SC 29379-2659 FACILITY #:864-427-7700 WEST TAMMY PH#: 864-427-7700 Facility Email: TWEST@UNIONDSN.ORG Fac. Cont. Email: TWEST@UNIONDSN.ORG	MR15-0140 / 07/31/2018 Union / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS

Total Number of Licensed Beds 8

WILLIAM W BOWEN RESIDENCE 1045 STONERIDGE AVE HARTSVILLE, SC 29550 FACILITY #:843-332-7252 BLOCKER RUTH PH#: 843-332-7252 Facility Email: RBLOCKER@DCDSNB.ORG Fac. Cont. Email: RBLOCKER@DCDSNB.ORG	MR15-0224 / 06/30/2018 Darlington / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
---	---

Total Number of Licensed Beds 8

WIRE ROAD COMMUNITY RESIDENCE I 935-A WIRE RD GILBERT, SC 29054 FACILITY #:803-874-2664 MOSS R PIKE PH#: 803-874-2664 Facility Email: PMOSS@CALHOUNDSNB.ORG Fac. Cont. Email: PMOSS@CALHOUNDSNB.ORG	MR15-0225 / 06/30/2018 Lexington / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
---	--

Total Number of Licensed Beds 8

WIRE ROAD COMMUNITY RESIDENCE II 935-B WIRE RD GILBERT, SC 29054 FACILITY #:803-874-2664 MOSS PIKE PH#: 803-874-2664 Facility Email: PMOSS@CALHOUNDSNB.ORG Fac. Cont. Email: PMOSS@CALHOUNDSNB.ORG	MR15-0226 / 06/30/2018 Lexington / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
--	--

Total Number of Licensed Beds 8

WOODLAWN GROUP HOME 1400 WOODLAWN DR COLUMBIA, SC 29209 FACILITY #:803-799-1970 DAVIS ADRIA PH#: 803-799-1970 Facility Email: JJOHNSON@BABCOCKCENTER.ORG Fac. Cont. Email: JJOHNSON@BABCOCKCENTER.ORG	MR15-0227 / 06/30/2018 Richland / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS
---	---

Total Number of Licensed Beds 8

Intermediate Care Facilities-Persons with Intellectual Disability (15 Beds or |

DHEC Regulation 61-13

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
<p>WYLIE BRUNSON RESIDENCE 88 SUNFLOWER RD SAINT MATTHEWS, SC 29135-8423 FACILITY #:803-874-2664 MOSS PIKE PH#: 803-874-2664 Facility Email: PMOSS@CALHOUNDSNB.ORG Fac. Cont. Email: PMOSS@CALHOUNDSNB.ORG</p>	<p>MR15-0228 / 06/30/2018 Calhoun / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS</p>

Total Number of Licensed Beds 8

Total Number of Facilities: 61

Total Number of Licensed Beds: 506