

County: Anderson

Facility Type: Adult Day Care

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
HORIZON ADULT DAY CARE 3420 CLEMSON BLVD STE 17 ANDERSON, SC 29621-1324 FAC.#:864-225-3370 DOVE SANDRA PH#: 864-225-3370 Facility Email: DWRIGHT@SENIORSOLUTIONS-SC.ORG	Anderson / Non-Profit Corporation 3420 CLEMSON BLVD STE 17 ANDERSON, SC 29621-1324 SENIOR SOLUTIONS ADC-0248 / 10/31/2018	46
Number of Participants: 46		
MARKETPLACE CINEMA ADULT DAY CARE 3420 CLEMSON BLVD STE 17 ANDERSON, SC 29621-1324 FAC.#:864-225-3370 DOVE SANDRA PH#: 864-225-3370 Facility Email: DWRIGHT@SENIORSOLUTIONS-SC.ORG	Anderson / Non-Profit Corporation 3420 CLEMSON BLVD STE 17 ANDERSON, SC 29621-1324 SENIOR SOLUTIONS ADC-0246 / 01/31/2019	40
Number of Participants: 40		
NEW HOPE ADULT DAY CARE 1214 NEW HOPE RD ANDERSON, SC 29625-5460 FAC.#:864-222-2986 SIMS LARRY V PH#: 864-222-2986 Facility Email: L.SIMS13@YAHOO.COM	Anderson / Sole Proprietorship 1214 NEW HOPE RD ANDERSON, SC 29625-5460 SIMS JR LARRY V ADC-0237 / 03/31/2018 (Renewal Pending)	35
Number of Participants: 35		

Totals For Facility/License Type: <u>Adult Day Care</u>	
Number of Activities/Facilities licensed: <u> 3 </u>	Number Licensed Units: <u> 121 </u>

County: Anderson

Facility Type: Ambulatory Surgery

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
ANMED HEALTH MEDICUS SURGERY CENTER 107 PROFESSIONAL CT ANDERSON, SC 29621-2052 FAC.#:864-716-7986 EATON ANGELA R PH#: 864-716-7900 Facility Email: ANGIEKAY@MEDICUS1.COM	Anderson / Limited Liability PO BOX 1886 ANDERSON, SC 29622-1886 ANMED HEALTH MEDICUS SURGERY CENTER LLC ASF-0100 / 04/30/2019	5
Operating Rooms: 3 Procedure Rooms: 2 Endoscopy Rooms: 0		
UPSTATE ENDOSCOPY CENTER 1922 MCCONNELL SPRINGS RD STE B ANDERSON, SC 29621-2642 FAC.#:864-716-6555 ATKINS DEBORAH A PH#: 864-716-6555 Facility Email: DEBORAH.ATKINS@ANMEDHEALTH.ORG	Anderson / Ltd. Liability 1922 MCCONNELL SPRINGS RD STE B ANDERSON, SC 29621-2642 ANMED ENTERPRISES INC UPSTATE ENDOSCOPY CENTER LLC ASF-0083 / 06/30/2018	2
Operating Rooms: 0 Procedure Rooms: 0 Endoscopy Rooms: 2		

Totals For Facility/License Type: <u>Ambulatory Surgery</u>	
Number of Activities/Facilities licensed: <u>2</u>	Number Licensed Units: <u>7</u>

County: Anderson

Facility Type: Body Piercing

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
AGGRESSIVE INK III BODY PIERCING 407 HWY 28 BYP UNIT B ANDERSON, SC 29624-3044 FAC.#:864-226-3793 RICKETTS STEVE G PH#: 864-940-6552 Facility Email: AGGRESSIVEINK@GMAIL.COM	Anderson / Sole Proprietorship 407 HWY 28 BYP UNIT B ANDERSON, SC 29624-3044 RICKETTS STEVE G BP-0210 / 07/31/2018	1
PAINTED PONY PIERCING LLC 738 WHITEHALL RD ANDERSON, SC 29625-2264 FAC.#:864-314-8599 PRUITT THOMAS PH#: 864-354-8978 Facility Email: PAINTEDPONYPIERCING@YAHOO.COM	Anderson / Sole Proprietorship 738 WHITEHALL RD ANDERSON, SC 29625-2264 THOMAS PRUITT BP-0251 / 06/30/2018	1
THE EDGE 100 ELECTRIC CITY BLVD STE 60 ANDERSON, SC 29621-2306 FAC.#:864-359-2172 BROWN ASHLEY NICOLE PH#: 678-227-9973 Facility Email: ANDERSONTHEEDGE@GMAIL.COM	Anderson / 100 ELECTRIC CITY BLVD STE 60 ANDERSON, SC 29621-2306 RAINER BROWN & COMPANY LLC BP-0246 / 07/31/2018	1
XPRESSIONS TANNING SALON 112 W SHOCKLEY FERRY RD ANDERSON, SC 29624-3733 FAC.#:864-225-4806 GINN DONNA PH#: 864-225-4806 Facility Email: ANGLNURARMS@AOL.COM	Anderson / Sole Proprietorship 112 W SHOCKLEY FERRY RD ANDERSON, SC 29624-3733 GINN DONNA BP-0193 / 02/28/2019	1

Totals For Facility/License Type: <u>Body Piercing</u>	
Number of Activities/Facilities licensed: _____ 4	Number Licensed Units: _____ 4

County: Anderson

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
BROOKDALE ANDERSON 311 SIMPSON RD ANDERSON, SC 29621-2157 FAC.#:864-261-3875 JENKINS BRIAN PH#: 864-261-3875 Facility Email: BJENKINS1@BROOKDALE.COM	Anderson / Corporation 311 SIMPSON RD ANDERSON, SC 29621-2157 EMERITUS CORPORATION CRC-1303 / 03/31/2019	40
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No	Max # Beds: 0
Certifications:None		
FAITH HOPE AND CHARITY RETIREMENT 101 COE ST ANDERSON, SC 29624 FAC.#:864-226-0990 TOUCHTON MARY SIMS PH#: 864-226-0990 Facility Email: THERESTINGPLACE35@GMAIL.COM	Anderson / Sole Proprietorship PO BOX 13866 ANDERSON, SC 29624-0018 TOUCHTON MARY SIMS CRC-0760 / 04/30/2019	10
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No	Max # Beds: 0
Certifications:None		
GARDEN HOUSE LLC 201 EDGEBROOK DR ANDERSON, SC 29621-2573 FAC.#:864-964-5668 GUILBAULT KATHLEEN PH#: 864-964-5668 Facility Email: KGUILBAULT@PRINCIPALSENIORLIVING.COM	Anderson / Ltd. Liability 11175 CICERO DR STE 500 ALPHARETTA, GA 30022-0004 ARHC GHANDSC01 TRS LLC CRC-1437 / 07/31/2018	75
Alzheimer Care:Yes Max # Resident:18	Alzheimer Unit: Yes	Max # Beds: 18
Certifications:None		
LAKEVIEW ASSISTED LIVING 3420 CLEMSON BLVD STE 17 ANDERSON, SC 29621-1324 FAC.#:864-638-5212 WRIGHT DOUGLAS A PH#: 864-638-5212 Facility Email: DWRIGHT@SENIORSOLUTIONS-SC.ORG	Anderson / Non-Profit Corporation 3420 CLEMSON BLVD STE 17 ANDERSON, SC 29621-1324 LAKEVIEW ASSISTED LIVING INC CRC-0086 / 04/30/2019	19
Alzheimer Care:Yes Max # Resident:1	Alzheimer Unit: No	Max # Beds: 0
Certifications:None		
MAPLES OF HONEA PATH 224 WILDWOOD DR HONEA PATH, SC 29654-1335 FAC.#:864-369-2000 WILLIS MARK N PH#: 864-369-2000 Facility Email: WILLISFORHOUSE@GMAIL.COM	Anderson / Corporation 224 WILDWOOD DR HONEA PATH, SC 29654-1335 MAPLE MANOR INC CRC-0819 / 05/31/2018 (Renewal Pending)	74
Alzheimer Care:Yes Max # Resident:30	Alzheimer Unit: No	Max # Beds: 0
Certifications:None		

County: Anderson

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
MARCHBANKS ASSISTED LIVING AND MEMORY CARE 2203 MARCHBANKS AVE ANDERSON, SC 29621-2247 FAC.#:864-231-7786 MORRISON KENNETH S PH#: 864-231-7786 Facility Email: SCOTT@MARCHBANKSAL.COM	Anderson / Ltd. Liability 2203 MARCHBANKS AVE ANDERSON, SC 29621-2247 CAROLINA RETIREMENT SERVICES OF ANDERSON LLC CRC-1413 / 05/31/2018 (Renewal Pending)	60
Alzheimer Care:Yes Max # Resident:10	Alzheimer Unit: Yes Max # Beds: 23	
Certifications:None		
MORNINGSIDE OF ANDERSON 1304 MCLEES RD ANDERSON, SC 29621-3345 FAC.#:864-964-9088 SPEER RICHARD W PH#: 864-964-9088 Facility Email: LICENSING@5SSL.COM	Anderson / Limited Liability Limited 400 CENTRE ST NEWTON, MA 02458-2094 MORNINGSIDE OF ANDERSON LP CRC-1093 / 04/30/2019	88
Alzheimer Care:Yes Max # Resident:15	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
NORTH POINTE ASSISTED LIVING 701 SIMPSON RD ANDERSON, SC 29621-3077 FAC.#:864-226-5505 STOVALL SHARON PH#: 864-226-5505 Facility Email: SSTOVALL@CAPITALSENIORLIVING.NET	Anderson / Limited Liability 701 SIMPSON RD ANDERSON, SC 29621-3077 CSL NORTH POINTE SC LLC CRC-1454 / 10/31/2018	70
Alzheimer Care:Yes Max # Resident:28	Alzheimer Unit: Yes Max # Beds: 28	
Certifications:None		
OAKVIEW PARK 110 HOOD RD GREENVILLE, SC 29611 FAC.#:864-412-8990 WRIGHT MALEIKA N PH#: 864-412-8990 Facility Email: ADMIN@OAKVIEWPARKSC.COM	Anderson / 110 HOOD RD GREENVILLE, SC 29611 OAKVIEW PARK ALF CRC-1566 / 10/31/2018	90
Alzheimer Care:Yes Max # Resident:17	Alzheimer Unit: Yes Max # Beds: 30	
Certifications:None		
RESTING PLACE #1 207 E SHOCKLEY FERRY RD ANDERSON, SC 29624-3731 FAC.#:864-226-0990 TOUCHTON MARY S PH#: 864-226-0990 Facility Email: THERESTINGPLACE35@GMAIL.COM	Anderson / Sole Proprietorship PO BOX 13866 ANDERSON, SC 29624-0018 TOUCHTON MARY SIMS CRC-0499 / 11/30/2018	10
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		

County: Anderson

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
ROCKY RIVER BAPTIST ASSOCIATION RESIDENTIAL CARE HOME 250 UNION HIGH DR BELTON, SC 29627-2445 FAC.#:864-338-1410 TOUCHTON JORDANA M PH#: 864-338-1410 Facility Email: ROCKYRIVERRCF@YAHOO.COM	Anderson / Non-Profit Corporation 250 UNION HIGH DR BELTON, SC 29627-2445 ROCKY RIVER BAPTIST ASSOCIATION CRC-1270 / 04/30/2019	28
Alzheimer Care:Yes Max # Resident:2	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
SUMMIT PLACE OF ANDERSON 107 PERPETUAL SQ ANDERSON, SC 29621-1713 FAC.#:864-222-9880 COOLEY LARINDA PH#: 864-222-9880 Facility Email: LCOOLEY@CAPITALSENIORLIVING.NET	Anderson / Limited Liability 107 PERPETUAL SQ ANDERSON, SC 29621-1713 CSL SUMMIT PLACE SC LLC CRC-1151 / 10/31/2018	89
Alzheimer Care:Yes Max # Resident:28	Alzheimer Unit: Yes Max # Beds: 32	
Certifications:None		
UPSTATE RESIDENTIAL CARE 1302 S MCDUFFIE ST ANDERSON, SC 29624-2745 FAC.#:864-225-6901 KELLER BOBBIE J PH#: 864-225-6901 Facility Email: HORACEALEXANDER@MYLASOUNDS.COM	Anderson / Sole Proprietorship PO BOX 14922 ANDERSON, SC 29624-0036 HORACE J ALEXANDER CRC-0233 / 08/31/2018	10
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
VILLAGE COMMUNITY CARE HOME-UNIT A 1250 SALEM CHURCH RD ANDERSON, SC 29625-1310 FAC.#:864-225-4336 WILLIAMS PHYLLIS S PH#: 864-225-4336 Facility Email: VILLAGECARE365@GMAIL.COM	Anderson / Corporation PO BOX 5107 ANDERSON, SC 29623-5107 VILLAGE COMMUNITY CARE HOME INC CRC-0563 / 01/31/2019	11
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
VILLAGE COMMUNITY CARE HOME-UNIT B 1250 SALEM CHURCH RD ANDERSON, SC 29625-1310 FAC.#:864-225-4336 WILLIAMS PHYLLIS S PH#: 864-225-4336 Facility Email: VILLAGECARE365@GMAIL.COM	Anderson / Corporation PO BOX 5107 ANDERSON, SC 29623-5107 VILLAGE COMMUNITY CARE HOME INC CRC-0564 / 01/31/2019	11
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		

County: Anderson

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
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VILLAGE COMMUNITY CARE HOME-UNIT C 1250 SALEM CHURCH RD ANDERSON, SC 29625-1310 FAC.#:864-225-4336 WILLIAMS PHYLLIS S PH#: 864-225-4336 Facility Email: VILLAGECARE365@GMAIL.COM	Anderson / Corporation PO BOX 5107 ANDERSON, SC 29623-5107 VILLAGE COMMUNITY CARE HOME INC CRC-0565 / 01/31/2019	11
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Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

VILLAGE COMMUNITY CARE HOME-UNIT D 1250 SALEM CHURCH RD ANDERSON, SC 29625-1310 FAC.#:864-225-4336 WILLIAMS PHYLLIS S PH#: 864-225-4336 Facility Email: VILLAGECARE365@GMAIL.COM	Anderson / Corporation PO BOX 5107 ANDERSON, SC 29623-5107 VILLAGE COMMUNITY CARE HOME INC CRC-0566 / 01/31/2019	11
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Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

Totals For Facility/License Type: <u>Community Residential Care Facility</u>	
Number of Activities/Facilities licensed: <u>17</u>	Number Licensed Units: <u>707</u>

County: Anderson

Facility Type: Home Health

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
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ANMED HEALTH HOME HEALTH AGENCY 1926 MCCONNELL SPRINGS RD ANDERSON, SC 29621-2642 FAC.#:864-512-6410 GETSINGER CHRISTI A PH#: 864-512-6410 Facility Email: HCCREDENTIALING@ANMEDHEALTH.ORG	Anderson / Non-Profit Corporation PO BOX 195 ANDERSON, SC 29622-0195 ANMED HEALTH HHA-0068 / 02/28/2019	2
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Counties Served: Anderson, Pickens

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y
 Home Health Aid: Y Medical Supplies/Appliances/Durable Medical Equipment: N

Other:

KINDRED AT HOME-ANDERSON 1704 E GREENVILLE ST STE 2D ANDERSON, SC 29621-7914 FAC.#:864-332-8200 MERCK FRED A PH#:	Anderson / Limited Liability 12900 FOSTER ST STE 400 OVERLAND PARK, KS 66213-2696 CAPITAL CARE RESOURCES OF SOUTH CAROLINA LLC HHA-0001 / 12/31/2018	11
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Counties Served: Abbeville, Anderson, Cherokee, Greenville, Greenwood, Laurens, McCormick, Oconee,
 Pickens, Spartanburg, Union

License Restrictions:

Physical Therapy: Y Speech Therapy: Y Occupational Therapy: Y Med. Social Services: Y
 Home Health Aid: Y Medical Supplies/Appliances/Durable Medical Equipment: N

Other: REGISTERED NURSE

Totals For Facility/License Type: <u>Home Health</u>	
Number of Activities/Facilities licensed: <u>2</u>	Number Licensed Units: <u>13</u>

County: Anderson

Facility Type: Hospice Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
CALLIE & JOHN RAINEY HOSPICE HOUSE 1835 ROGERS RD ANDERSON, SC 29621-2278 FAC.#:864-224-3358 MELBOURNE PAMELA S PH#: 864-224-3358 Facility Email: PMELBOURNE@HOSPICEHOUSE.NET	Anderson / Corporation 1835 ROGERS RD ANDERSON, SC 29621-2278 HOSPICE OF THE UPSTATE INC HPF-0001 / 08/31/2018	32

Totals For Facility/License Type: <u>Hospice Facility</u>	
Number of Activities/Facilities licensed: _____ 1	Number Licensed Units: _____ 32

County: Anderson

Facility Type: Hospice Program

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
DIVINE HOSPICE 115 WHITEHALL RD ANDERSON, SC 29625 FAC.#:864-965-7660 KUMAR SANJEEV PH#: 864-375-9690 Facility Email: DHOSPICELLC@GMAIL.COM	Anderson / Limited Liability 115 WHITEHALL RD ANDERSON, SC 29625 DIVINE HOSPICE LLC HPC-0215 / 02/28/2019	3
Counties Served: Anderson, Oconee, Pickens		
HOSPICE OF THE UPSTATE 1835 ROGERS RD ANDERSON, SC 29621-2278 FAC.#:864-224-3358 MILLER ANNETTE S PH#: 864-585-6500 Facility Email: AMILLER@HOSPICEHOUSE.NET	Anderson / Corporation 1835 ROGERS RD ANDERSON, SC 29621-2278 HOSPICE OF THE UPSTATE INC HPC-0017 / 07/31/2018	5
Counties Served: Abbeville, Anderson, Greenville, Oconee, Pickens		

Totals For Facility/License Type: <u>Hospice Program</u>	
Number of Activities/Facilities licensed: <u>2</u>	Number Licensed Units: <u>8</u>

County: Anderson

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
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ANMED HEALTH MEDICAL CENTER 800 N FANT ST ANDERSON, SC 29621-5793 FAC.#:864-512-1109 MANSON WILLIAM T PH#: Facility Email: BILL.MANSON@ANMEDHEALTH.ORG	Anderson / Non-Profit Corporation 800 N FANT ST ANDERSON, SC 29621-5793 ANMED HEALTH HTL-0044 / 11/30/2018	461
Licensed Beds: General: 423 Psychiatric: 38 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:Abortions, Trauma Center Level II, JCAHO Accredited

ANMED HEALTH REHABILITATION HOSPITAL 1 SPRING BACK WAY ANDERSON, SC 29621-2676 FAC.#:864-716-2600 MURRAY DENISE R PH#: 864-716-2600 Facility Email: DENISE.MURRAY@HEALTHSOUTH.COM	Anderson / Ltd. Liability 1 SPRING BACK WAY ANDERSON, SC 29621-2676 ANMED ENTERPRISES INC/HEALTHSOUTH LLC HTL-0838 / 12/31/2018	60
Licensed Beds: General: 0 Psychiatric: 0 Rehab: 60 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:JCAHO Accredited

ANMED HEALTH WOMEN'S AND CHILDREN'S HOSPITAL 2000 E GREENVILLE ST ANDERSON, SC 29621-1580 FAC.#:864-512-4801 MANSON WILLIAM T PH#: 864-512-4801 Facility Email: TINA.JURY@ANMEDHEALTH.ORG	Anderson / Non-Profit Corporation 2000 E GREENVILLE ST, ANMED HEALTH CAMPUS ANDERSON, SC 29621-1580 ANMED HEALTH HTL-0896 / 06/30/2018	72
Licensed Beds: General: 72 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 13		

Certifications:Abortions, Perinatal Level II, JCAHO Accredited

PATRICK B HARRIS PSYCHIATRIC HOSPITAL 130 HWY 252 ANDERSON, SC 29621-5054 FAC.#:864-231-2600 MCENIRY ALLEN PH#: 864-231-2600 Facility Email: ALLEN.MCENIRY@SCDMH.ORG	Anderson / State PO BOX 2907 ANDERSON, SC 29622-2907 SC DEPARTMENT OF MENTAL HEALTH HTL-0503 / 11/30/2018	200
Licensed Beds: General: 0 Psychiatric: 200 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0		

Certifications:JCAHO Accredited

Totals For Facility/License Type: <u>Hospital or Institutional General Infirmary</u>		
Number of Activities/Facilities licensed:	4	Number Licensed Units: 793

County: Anderson

Facility Type: Inhome Care Provider

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
ASSURANCE HEALTHCARE SERVICES LLC 802 N MAIN ST ANDERSON, SC 29621-5525 FAC.#:864-642-4798 PH#: Facility Email: LASHERRIE_ASSURANCEHS@YAHOO.COM	Anderson / Limited Liability 802 N MAIN ST ANDERSON, SC 29621-5525 ASSURANCE HEALTHCARE SERVICES LLC IHCP-0512 / 03/31/2019	- 1
AT HOME QUALITY CARE 613 CELY RD EASLEY, SC 29642-9320 FAC.#:864-372-5040 MASON LARRY PH#: 864-372-5040 Facility Email: TASTE4LIFE19@YAHOO.COM	Anderson / Corporation 211 OAK LN LIBERTY, SC 29657 AT HOME QUALITY CARE INCORPORATED IHCP-0764 / 10/31/2018	- 1
BEYOND CARE HOME CARE SERVICES LLC - HONEA PATH 512-A E GREER ST HONEA PATH, SC 29654 FAC.#:864-369-0222 PH#: Facility Email: SATKIN@BEYONDCAREHC.COM	Anderson / 512-A E GREER ST HONEA PATH, SC 29654 BEYOND CARE LLC IHCP-0107 / 04/30/2019	- 1
C 3 ELDERCARE 107 N MAIN ST ANDERSON, SC 29621 FAC.#:864-934-5600 PH#: Facility Email: JCAREYJONES@AOL.COM	Anderson / Corporation 107 N MAIN ST ANDERSON, SC 29621 C3 ELDERCARE A SUBSIDIARY OF CONSOLIDATED SOUTHERN INDUSTRIES IHCP-0214 / 07/31/2018	- 1
CARING HANDS HOME CARE OF THE UPSTATE INC 1405-A PEARMAN DAIRY RD STE B ANDERSON, SC 29625 FAC.#:864-224-6953 PH#: Facility Email: CHHC@CARINGHANDSHC.COM	Anderson / Corporation 1405-A PEARMAN DAIRY RD STE B ANDERSON, SC 29625 CARING HANDS HOME CARE OF THE UPSTATE INC IHCP-0210 / 06/30/2018	- 1
COMFORT KEEPERS - ANDERSON 402 E GREENVILLE ST ANDERSON, SC 29621-5536 FAC.#:864-760-1900 PH#: Facility Email: ANDERSON@COMFORTKEEPERS.COM	Anderson / Limited Liability 402 E GREENVILLE ST ANDERSON, SC 29621-5536 JOE AND MELISA LLC IHCP-0146 / 05/31/2019	- 1
CORPORATE CARE LLC-ANDERSON 1212 N MAIN ST ANDERSON, SC 29624 FAC.#:864-261-8488 PH#: Facility Email: RR500@CORPORARE-SERVICSSC.COM	Anderson / Limited Liability PO BOX 16148 GREENVILLE, SC 29606-7148 CORPORATE CARE LLC IHCP-0277 / 08/31/2018	- 1
FAMILY CARE MANAGEMENT LLC 716 ANDERSON ST STE C BELTON, SC 29627-2148 FAC.#:864-392-1810 PH#: Facility Email: CHRYSTAL@FAMILYCAREMANAGEMENT.ORG	Anderson / Limited Liability 716 ANDERSON ST STE C BELTON, SC 29627-2148 FAMILY CARE MANAGEMENT LLC IHCP-0506 / 06/30/2018	- 1

County: Anderson

Facility Type: Inhome Care Provider

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
HOME BY CHOICE-FIRST UP INC 1405-A PEARMAN DAIRY RD STE A ANDERSON, SC 29625 FAC.#:864-224-4907 PH#: Facility Email: HOMEBYCHOICE579@BELLSOUTH.NET	Anderson / Sole Proprietorship 1405-A PEARMAN DAIRY RD STE A ANDERSON, SC 29625 HOME BY CHOICE INC IHCP-0209 / 05/31/2018 (Renewal Pending)	- 1
HOME INSTEAD SENIOR CARE - ANDERSON 716 E GREENVILLE ST ANDERSON, SC 29621-4837 FAC.#:864-642-6780 PH#: Facility Email: WMARSHBURN@HOMEINSTEAD.COM	Anderson / Corporation 716 E GREENVILLE ST ANDERSON, SC 29621-4837 UPSTATE TARHEELS INC IHCP-0043 / 01/31/2019	- 1
LOVING HANDS HOME CARE SERVICES 2318 N MAIN ST ANDERSON, SC 29621-3876 FAC.#:864-221-4917 PH#: Facility Email: WOODSWENDY@HOTMAIL.COM	Anderson / Limited Liability 2318 N MAIN ST ANDERSON, SC 29621-3876 LOVING HANDS HOME CARE SERVICES LLC IHCP-0828 / 03/31/2019	- 1
MAINSTREAM REHABILITATIVE SERVICES LLC 4124 CLEMSON BLVD STE D ANDERSON, SC 29621-1169 FAC.#:864-351-9434 PH#: Facility Email: INFO@MAINSTREAMRS.COM	Anderson / Limited Liability 206 LAKEFOREST RD GREENWOOD, SC 29649 MAINSTREAM REHABILITATIVE SERVICES LLC IHCP-0255 / 11/30/2018	- 1
NO PLACE LIKE HOME OF SOUTH CAROLINA - ANDERSON 211 E CALHOUN ST ANDERSON, SC 29621-5542 FAC.#:864-224-3430 PH#: Facility Email: JLANE@MEDICAREGIVERS.COM	Anderson / Corporation 1172 OLD SALEM RD CONYERS, GA 30094-5944 NO PLACE LIKE HOME OF SOUTH CAROLINA INC IHCP-0246 / 07/31/2018	- 1
RESCARE HOMECARE ANDERSON 1103 N FANT ST ANDERSON, SC 29621-2037 FAC.#:864-224-9121 PH#: Facility Email: SHAWN.KEITH@RESCARE.COM	Anderson / Corporation 1103 FANT ST ANDERSON, SC 29621 SOUTHERN HOME CARE SERVICES INC DBA RESCARE HOMECARE IHCP-0012 / 06/30/2018	- 1
SENIOR SOLUTIONS - IN HOME CARE 3420 CLEMSON BLVD STE 17 ANDERSON, SC 29621-1324 FAC.#:864-225-3370 PH#: Facility Email: DWRIGHT@SENIORSOLUTIONS-SC.ORG	Anderson / Corporation 3420 CLEMSON BLVD STE 17 ANDERSON, SC 29621-1324 SENIOR SOLUTIONS IHCP-0444 / 09/30/2018	- 1
SENIORS HELPERS - ANDERSON 1214 N MAIN ST STE D ANDERSON, SC 29621-4729 FAC.#:864-844-9151 PH#: Facility Email: VRICKETTS@SENIORHELPERS.COM	Anderson / Limited Liability 2435 E NORTH ST # 165 GREENVILLE, SC 29615-1491 MARIE ANTHONY COMPANY LLC IHCP-0166 / 05/31/2019	- 1

County: Anderson

Facility Type: Inhome Care Provider

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
UPSTATE HEALTHCARE SERVICES 212 E GREENVILLE ST ANDERSON, SC 29621-5509 FAC.#:864-209-8245 PH#: Facility Email: PENNELL@UHSSC.COM	Anderson / 212 E GREENVILLE ST ANDERSON, SC 29621-5509 UPSTATE MEDICAL STAFFING INC IHCP-0149 / 05/31/2018 (Renewal Pending)	- 1
WELL CARE AT HOME LLC 1209-B N FANT ST STE A ANDERSON, SC 29621 FAC.#:864-540-8005 LEE CHASTITY PH#: 864-540-8005 Facility Email: WELLCARE_ATHOME@YAHOO.COM	Anderson / Limited Liability 1209-B N FANT ST STE A ANDERSON, SC 29621 WELL CARE AT HOME LLC IHCP-0329 / 12/31/2018	- 1

Totals For Facility/License Type: <u>Inhome Care Provider</u>	
Number of Activities/Facilities licensed: <u>18</u>	Number Licensed Units: <u>- 18</u>

County: Anderson

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
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BROOKDALE ANDERSON 311 SIMPSON RD ANDERSON, SC 29621-2157 FAC.#:864-261-3875 JENKINS BRIAN PH#: 864-261-3875 Facility Email: BJENKINS1@BROOKDALE.COM	Anderson / Corporation 311 SIMPSON RD ANDERSON, SC 29621-2157 EMERICARE INC NCF-0872 / 12/31/2018	44
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Licensed Beds: Nursing Home: 44 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

ELLENBURG NURSING CENTER 611 E HAMPTON ST ANDERSON, SC 29624-2899 FAC.#:864-226-5054 ELLENBURG LYNDON W PH#: 864-226-5054 Facility Email: FUZZERONE@AOL.COM	Anderson / Corporation 611 E HAMPTON ST ANDERSON, SC 29624-2899 ELLENBURG NURSING CENTER INC NCF-0231 / 03/31/2019	181
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Licensed Beds: Nursing Home: 181 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

IVA REHABILITATION AND HEALTHCARE CENTER 406 W BROAD ST IVA, SC 29655-1119 FAC.#:864-348-7433 FIELDS ANTHONY PH#: 864-224-3898 Facility Email: AFIELDS@ORIANNA.COM	Anderson / Limited Liability 406 W BROAD ST IVA, SC 29655-1119 IVA REHABILITATION AND HEALTHCARE CENTER LLC NCF-0904 / 11/30/2018	60
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Licensed Beds: Nursing Home: 60 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

LINLEY PARK REHABILITATION AND HEALTHCARE CENTER 208 JAMES ST ANDERSON, SC 29625-2942 FAC.#:864-226-3427 HERITAGE CARLA PH#: 864-226-3427 Facility Email: CHERITAGE@ORIANNA.COM	Anderson / Limited Liability 208 JAMES ST ANDERSON, SC 29625-2942 LINLEY PARK REHABILITATION AND HEALTHCARE CENTER LLC NCF-0909 / 11/30/2018	88
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Licensed Beds: Nursing Home: 88 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

County: Anderson

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
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NHC HEALTHCARE ANDERSON 1501 E GBREENVILLE ST ANDERSON, SC 29621 FAC.#:864-226-8356 MOORHOUSE BRADLEY W PH#: 864-226-8356 Facility Email: LPENA@NHCANDERSON.COM	Anderson / Ltd. Liability PO BOX 1327 ANDERSON, SC 29622-1327 NHC HEALTHCARE/ANDERSON LLC NCF-0801 / 06/30/2018	290
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Licensed Beds: Nursing Home: 290 Institutional Nursing Home: 0

Alzheimer Care:Yes Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

RICHARD M CAMPBELL VETERANS NURSING HOME 4605 BELTON HWY ANDERSON, SC 29621-5045 FAC.#:864-261-6734 EVATT RUSSELL PH#: 864-261-6734 Facility Email: REVATT@HMRVSI.COM	Anderson / State 4605 BELTON HWY ANDERSON, SC 29621-5045 SC DEPARTMENT OF MENTAL HEALTH NCF-0549 / 02/28/2019	220
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Licensed Beds: Nursing Home: 220 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

SOUTHERN OAKS REHABILITATION AND HEALTHCARE CENTER 109 BENTZ RD PIEDMONT, SC 29673-1412 FAC.#:864-845-5177 FARTHING SHANNON PH#: Facility Email: SFARTHING@ORIANNA.COM	Anderson / Limited Liability 109 BENTZ RD PIEDMONT, SC 29673-1412 SOUTHERN OAKS REHABILITATION AND HEALTHCARE CENTER LLC NCF-0907 / 11/30/2018	88
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Licensed Beds: Nursing Home: 88 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

Totals For Facility/License Type: <u>Nursing Home</u>	
Number of Activities/Facilities licensed: <u>7</u>	Number Licensed Units: <u>971</u>

County: Anderson

Facility Type: PSAD Outpatient

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
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ADULT DRUG COURT TREATMENT 100 S MAIN ST ANDERSON, SC 29624-1619 FAC.#:864-260-4042 LINDSEY NIKKI PH#: 864-260-4042 Facility Email: NIKKI.LINDSEY@SOLICITOR10.ORG	Anderson / County PO BOX 8002 ANDERSON, SC 29622-8002 ANDERSON COUNTY 10TH CIRCUIT SOLICITOR'S OFFICE OTP-0099 / 01/31/2019	1
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Certifications:None

ANDERSON-OCONEE BEHAVIORAL HEALTH SERVICES 226 MCGEE RD ANDERSON, SC 29625-2104 FAC.#:864-260-4168 BECK RN KAREN B PH#: 864-260-4168 Facility Email: KARENBECK@AOBHS.ORG	Anderson / County 226 MCGEE RD ANDERSON, SC 29625-2104 ANDERSON-OCONEE BEHAVIORAL HEALTH SERVICES-BOARD OTP-0030 / 09/30/2018	2
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Certifications:None

SOUTHWEST CAROLINA TREATMENT CENTER 341 W BELTLINE BLVD ANDERSON, SC 29625-1505 FAC.#:864-222-9798 WHITMIRE PAM PH#: 864-222-9798 Facility Email: JOY.BAILLEY@CAROLINATREATCENTERS.COM	Anderson / Limited Liability 1200 WOODRUFF RD STE A3 GREENVILLE, SC 29607-5732 SOUTHWEST CAROLINA TREATMENT CENTER LLC OTPN-0049 / 03/01/2019	1
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Certifications:Narcotics Treatment Program, Methodone Treatment Program

Totals For Facility/License Type: PSAD Outpatient

Number of Activities/Facilities licensed: 3 Number Licensed Units: 4

County: Anderson

Facility Type: Renal Dialysis

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
FRESENIUS MEDICAL CARE ANDERSON DIALYSIS CLINIC 416 E CALHOUN ST STE A ANDERSON, SC 29621-5852 FAC.#:864-224-1678 WADSWORTH AMANDA MARLENE PH#: 864-224-1678 Facility Email: AMANDA.WADSWORTH@FMC-NA.COM	Anderson / Limited Liability 416 E CALHOUN ST STE A ANDERSON, SC 29621-5852 FRESENIUS MEDICAL CARE ANDERSON LLC ERD-0105 / 07/31/2018	48
Licensed Stations: Hemodialysis: 47 Peritoneal: 1		
FRESENIUS MEDICAL CARE BELTON-HONEA PATH 200 CHURCH ST HONEA PATH, SC 29654-2213 FAC.#:864-369-6509 LINDLEY SHARON PH#: 864-369-6509 Facility Email: SHARON.LINDLEY@FMC-NA.COM	Anderson / Corporation 200 CHURCH ST HONEA PATH, SC 29654-2213 BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC ERD-0146 / 05/31/2018 (Renewal Pending)	17
Licensed Stations: Hemodialysis: 17 Peritoneal: 0		
FRESENIUS MEDICAL CARE NORTH ANDERSON 2021 CARDINAL CIR ANDERSON, SC 29621-1503 FAC.#:864-224-0024 COOLEY LINDA C PH#: 864-224-0024 Facility Email: LINDA.C.COOLEY@FMC-NA.COM	Anderson / Limited Liability 2021 CARDINAL CIR ANDERSON, SC 29621-1503 FRESENIUS MEDICAL CARE ANDERSON LLC ERD-0217 / 02/28/2019	25
Licensed Stations: Hemodialysis: 21 Peritoneal: 2		
FRESENIUS MEDICAL CARE PENDLETON 908 S MECHANIC ST PENDLETON, SC 29670-1815 FAC.#:864-646-6607 BARNETT DEBORAH PH#: 864-646-6607 Facility Email: DEBORAH.BARNETT@FMC-NA.COM	Anderson / Corporation 908 S MECHANIC ST PENDLETON, SC 29670-1815 BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC ERD-0145 / 12/31/2018	11
Licensed Stations: Hemodialysis: 11 Peritoneal: 0		
PENDLETON DIALYSIS 7703 HWY 76 PENDLETON, SC 29670-1818 FAC.#:864-646-7715 BOWSER DEBRA L PH#: 864-227-6011 Facility Email: SCL&C@DAVITA.COM	Anderson / Limited Liability Limited 5200 VINCENNA WAY STE 400, LICENSING AND CERTIFICATION BRENTWOOD, TN 37027-7569 RENAL TREATMENT CENTERS-SOUTHEAST LP ERD-0143 / 10/31/2018	10
Licensed Stations: Hemodialysis: 10 Peritoneal: 0		

Totals For Facility/License Type: <u>Renal Dialysis</u>	
Number of Activities/Facilities licensed: _____	Number Licensed Units: _____
5	111

County: Anderson

Facility Type: Tattoo Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
AGGRESSIVE INK 3 407 HWY 28 BYP STE C ANDERSON, SC 29624-3044 FAC.#:864-226-3793 RICKETTS STEVE G PH#: 864-940-6552 Facility Email: AGGRESSIVEINK@GMAIL.COM	Anderson / Sole Proprietorship 407 HWY 28 BYP STE C ANDERSON, SC 29624-3044 RICKETTS STEVE G TF-0073 / 06/30/2018	3
AGGRESSIVE INK II 324 E SHOCKLEY FERRY RD ANDERSON, SC 29624-3824 FAC.#:864-231-9257 RICKETTS STEVE G PH#: 864-231-9257 Facility Email: AGGRESSIVEINK@GMAIL.COM	Anderson / Sole Proprietorship 324 E SHOCKLEY FERRY RD ANDERSON, SC 29624-3824 RICKETTS STEVE G TF-0031 / 12/31/2018	2
ARTISTIC INK 99 WELPINE RD PENDLETON, SC 29670-9606 FAC.#:864-226-1703 ROWLAND TERRY PH#: 843-312-7831 Facility Email: TERRYROWLAND777@YAHOO.COM	Anderson / Sole Proprietorship ROWLAND TERRY TF-0059 / 10/31/2018	4
BLVD TATTOO CO 3704 LIBERTY HWY ANDERSON, SC 29621-1309 FAC.#:864-224-7922 CHARPING STEVEN J PH#: 864-224-7922 Facility Email: BLVDTATTOOCO@YAHOO.COM	Anderson / Sole Proprietorship 3704 LIBERTY HWY ANDERSON, SC 29621-1309 CHARPING STEVEN J TF-0111 / 11/30/2018	5
CHERRY BOMB TATTOO 3 7202 HWY 76 STE C PENDLETON, SC 29670-9158 FAC.#:000-000-0000 ROACH JONATHAN PH#: 864-973-1994 Facility Email: JOHNNY.ROACH@YAHOO.COM	Anderson / Sole Proprietorship 7202 HWY 76 STE C PENDLETON, SC 29670-9158 ROACH JONATHAN AND ROACH WENDY TF-0262 / 10/31/2018	3
HAZZARD LINE TATTOO 1804 HWY 86 PIEDMONT, SC 29673 FAC.#:864-845-1700 PH#: Facility Email: HAZZARDLINE@GMAIL.COM	Anderson / Sole Proprietorship 1804 HWY 86 PIEDMONT, SC 29673 BRANDY DUNCAN TF-0279 / 08/31/2018	1
HONKY TONK TATTOO 121 VW CT ANDERSON, SC 29624-3000 FAC.#:864-328-9018 FILIPOVIC MICHAEL W PH#: 864-353-7400 Facility Email: HONKYTONK08@YAHOO.COM	Anderson / Sole Proprietorship 121 VW CT ANDERSON, SC 29624-3000 FILIPOVIC MICHAEL W TF-0084 / 11/30/2017 (Renewal Pending)	2
JUST ANOTHER HOLE IN THE WALL TATTOO 121 E WEST PKWY ANDERSON, SC 29621 FAC.#:843-685-3795 PH#: Facility Email: JUSTANOTHERHOLEINTHEWALL@GMAIL.COM	Anderson / 121 E WEST PKWY ANDERSON, SC 29621 JUST ANOTHER HOLE IN THE WALL TATTOO LLC TF-0291 / 04/30/2019	3

County: Anderson

Facility Type: Tattoo Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
LOST SAILOR STUDIO 102 CPMMUNITY PARK DR STE B ANDERSON, SC 29621 FAC.#:864-622-8300 PH#:	Anderson / Sole Proprietorship 102 COMMUNITY PARK DR STE B ANDERSON, SC 29621 FREELIN KEITH A TF-0293 / 06/30/2018	5
Facility Email: Not on File		
PAINTED PONY TATTOO-ANDERSON 734 WHITEHALL RD ANDERSON, SC 29625-2264 FAC.#:864-226-2500 BRANDT KAREN L PH#: 864-226-2500	Anderson / Sole Proprietorship BRANDT KAREN AND PRUITT THOMAS TF-0034 / 02/28/2019	5
Facility Email: PAINTEDPONYTATTOO@YAHOO.COM		
RELENTLESS TATTOO LLC 34 HALTER DR PIEDMONT, SC 29673-6741 FAC.#:864-295-2237 BARNES JR REX C PH#: 864-295-2237	Anderson / Limited Liability 34 HALTER DR PIEDMONT, SC 29673-6741 RELENTLESS TATTOO LLC TF-0120 / 04/30/2019	5
Facility Email: REXALL127@YAHOO.COM		
REVOLUTIONARY TATTOO 11011 ANDERSON RD STE B PIEDMONT, SC 29673 FAC.#:864-263-7050 POSEY BRITTANY PH#: 864-263-7050	Anderson / 11011 ANDERSON RD STE B PIEDMONT, SC 29673 DAVID K POSEY/BRITTANY POSEY TF-0308 / 03/31/2019	3
Facility Email: Not on File		
SIREN'S COVE TATTOO 3121-A HWY 153 PIEDMONT, SC 29673-7722 FAC.#:864-283-6900 ROBERSON ALYSIA PH#: 864-283-6900	Anderson / Sole Proprietorship 13D EDGEWOOD DR WILLIAMSTON, SC 29697 ALYSIA ROBERSON TF-0183 / 07/31/2018	3
Facility Email: ALYSIA_ROBERSON@YAHOO.COM		
STUDIO 22 100 ELECTRIC CITY BLVD STE 50 ANDERSON, SC 29621-2306 FAC.#:864-437-8161 WILSON TODD EVAN PH#: 864-940-9034	Anderson / Sole Proprietorship 100 ELECTRIC CITY BLVD STE 50 ANDERSON, SC 29621-2306 WILSON TODD EVAN TF-0165 / 01/31/2019	3
Facility Email: TODDSTUDIO22@GMAIL.COM		
VANGUARD STUDIO 4365 HWY 24 STE A ANDERSON, SC 29626 FAC.#:864-993-8924 ALEWINE LISA MARIE PH#: 864-993-8924	Anderson / Limited Liability 1866 BELL RD IVA, SC 29655 VANGUARD STUDIOS LLC TF-0272 / 06/30/2018	4
Facility Email: LISAMARIE8924@GMAIL.COM		

Totals For Facility/License Type: <u>Tattoo Facility</u>	
Number of Activities/Facilities licensed: _____ <u>15</u>	Number Licensed Units: _____ <u>51</u>

County: Anderson

Number of Activities/Facilities licensed in county of :	<u>Anderson</u>	# Lics: <u>83</u>
	Number Licensed Units :	<u>2,804</u>

Report Totals

Total Number of Activities/Facilities licensed: 83 Total Number Licensed Units: 2,804