

County: Beaufort

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
MEMORY MATTERS 117 WILLIAM HILTON PKWY STE A HILTON HEAD ISLAND, SC 29926-5207 FAC.#:843-842-6688 STRAND SHEILA PH#: 843-842-6688 Facility Email: SHEILA@MYMEMORYMATTERS.ORG	Beaufort / Charitable PO BOX 22330 HILTON HEAD ISLAND, SC 29925-2330 ALZHEIMER'S RESPITE & RESOURCE ADC-0291 / 12/31/2018	60
Number of Participants:		60

Totals For Facility/License Type: <u>Adult Day Care</u>	
Number of Activities/Facilities licensed: <u>1</u>	Number Licensed Units: <u>60</u>

County: Beaufort

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
BLUFFTON OKATIE SURGERY CENTER 40 OKATIE CENTER BLVD S STE 125 OKATIE, SC 29909-7510 FAC.#:843-705-8804 MAHONEY TERRI-MARIE PH#: 843-705-8804 Facility Email: TMAHONEY@USPI.COM	Beaufort / Limited Liability 40 OKATIE CENTER BLVD S STE 125 OKATIE, SC 29909-7510 BLUFFTON OKATIE SURGERY CENTER LLC ASF-0075 / 10/31/2018	4
Operating Rooms: 2 Procedure Rooms: 2 Endoscopy Rooms: 0		
LASER AND SKIN SURGERY CENTER 15 HOSPITAL CENTER BLVD STE 2 HILTON HEAD ISLAND, SC 29926-2760 FAC.#:843-689-9200 BUNDY ALBERT THOMAS PH#: 843-689-9200 Facility Email: HHDERM@ICLOUD.COM	Beaufort / Ltd. Liability 15 HOSPITAL CENTER BLVD STE 2 HILTON HEAD ISLAND, SC 29926-2760 DERMATOLOGY SURGERY CENTER LLC ASF-0059 / 09/30/2018	2
Operating Rooms: 2 Procedure Rooms: 0 Endoscopy Rooms: 0		
OUTPATIENT SURGERY CENTER OF HILTON HEAD 190 PEMBROKE DR HILTON HEAD ISLAND, SC 29926-2389 FAC.#:843-682-5050 PFISTER CYNTHIA J PH#: 843-682-5050 Facility Email: CINDY.PFISTER@SCASURGERY.COM	Beaufort / Ltd. Liability 190 PEMBROKE DR HILTON HEAD ISLAND, SC 29926-2389 OUTPATIENT SURGERY CENTER OF HILTON HEAD LLC ASF-0092 / 01/31/2019	7
Operating Rooms: 4 Procedure Rooms: 1 Endoscopy Rooms: 2		

Totals For Facility/License Type: <u>Ambulatory Surgery</u>	
Number of Activities/Facilities licensed: <u>3</u>	Number Licensed Units: <u>13</u>

County: Beaufort

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
BEAUTY MARKS PIERCING 220 SAVANNAH HWY STE A BEAUFORT, SC 29906-6724 FAC.#:843-470-0304 WILLS DALE D JR PH#: 843-470-0304 Facility Email: GOTHICPIERCING@YAHOO.COM	Beaufort / Ltd. Liability 220 SAVANNAH HWY STE A BEAUFORT, SC 29906-6724 GOTHIC PIERCING AND BEAUTY MARKS TATTOOS LLC BP-0216 / 07/31/2018 (Renewal Pending)	1
BODY PIERCING STUDIO AT ISLAND REPUBLIC 1460 FORDING ISLAND RD STE 210 BLUFFTON, SC 29910-8665 FAC.#:843-836-2030 BITTON AMIR M PH#: 843-836-2030 Facility Email: ALLSTAR00000@HOTMAIL.COM	Beaufort / Ltd. Liability 130 ARROW RD STE 103A HILTON HEAD ISLAND, SC 29928-7341 ALL STAR SERVICE AND RETAIL OF SC LLC BP-0128 / 04/30/2019	1
EMPYRE MODIFICATIONS 1351 RIBAUT RD STE E BEAUFORT, SC 29935 FAC.#:606-304-9052 PH#: Facility Email: Not on File	Beaufort / Sole Proprietorship 3026 RATEL DR PORT ROYAL, SC 29935 RADER GREGORY S BP-0284 / 12/30/2018	1

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

County: Beaufort

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
A'LELIA RESIDENTIAL CARE 10 JACOB WHITE RD YEMASSEE, SC 29945-7820 FAC.#:843-466-0356 MILES CARRIE R PH#: 843-466-0356 Facility Email: MILES-66@HOTMAIL.COM	Beaufort / Corporation 10 JACOB WHITE RD YEMASSEE, SC 29945-7820 MILES RESIDENTIAL CARE FACILITY INC CRC-1115 / 09/30/2018	20
Alzheimer Care:Yes Max # Resident:2	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
BAYSHORE ON HILTON HEAD ISLAND 421 SQUIRE POPE RD HILTON HEAD ISLAND, SC 29926 FAC.#:843-342-2222 JOHNSON STEPHANI PH#: 843-342-2222 Facility Email: JOHNSONSTEPHANI@LCSNET.COM	Beaufort / 421 SQUIRE POPE RD HILTON HEAD ISLAND, SC 29926 BAYSHORE HILTON HEAD LLC CRC-1963 / 06/30/2019	147
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
BENTON HOUSE OF BLUFFTON 8 HAMPTON LAKE DR BLUFFTON, SC 29910-9568 FAC.#:843-757-3111 KETCHUM VALORIE PH#: 843-757-3111 Facility Email: BLUFFTONDIRECTOR@BENTONHOUSE.COM	Beaufort / Limited Liability 11175 CICERO DR STE 500 ALPHARETTA, GA 30022-0004 BLUFFTON SLP LLC CRC-1585 / 03/31/2019	104
Alzheimer Care:Yes Max # Resident:24	Alzheimer Unit: Yes Max # Beds: 28	
Certifications:None		
BLOOM AT BELFAIR 60 OAK FOREST RD BLUFFTON, SC 29910-5010 FAC.#:843-815-2338 FENNELL ERIC J PH#: 843-815-2338 Facility Email: ADMIN@BLOOMATBELFAIR.COM	Beaufort / Limited Liability 260 E BROWN ST STE 315 BIRMINGHAM, MI 48009-6236 BLOOMFIELD SENIOR LIVING OF BLUFFTON LLC CRC-1510 / 12/31/2018	68
Alzheimer Care:Yes Max # Resident:68	Alzheimer Unit: Yes Max # Beds: 68	
Certifications:None		
BLOOM AT BLUFFTON 800 FORDING ISLAND RD BLUFFTON, SC 29910-4845 FAC.#:843-815-2555 KILMER CATHERINE O PH#: 843-815-2555 Facility Email: ADMIN@BLOOMATBLUFFTON.COM	Beaufort / 260 E BROWN ST STE 315 BIRMINGHAM, MI 48009-6236 BLOOMFIELD SENIOR LIVING OF BLUFFTON II LLC CRC-1381 / 04/30/2019	70
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: Yes Max # Beds: 20	
Certifications:None		

County: Beaufort

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
BLOOM AT HILTON HEAD 35 BEACH CITY RD HILTON HEAD ISLAND, SC 29926-4725 FAC.#:843-342-5599 BAZEN TIFFANY R PH#: 843-342-5599 Facility Email: ADMIN@BLOOMATHILTONHEAD.COM	Beaufort / 260 E BROWN ST STE 315 BIRMINGHAM, MI 48009-6236 BLOOMFIELD SENIOR LIVING OF HILTON HEAD LLC CRC-1382 / 04/30/2019	72
Alzheimer Care:Yes Max # Resident:20	Alzheimer Unit: Yes Max # Beds: 18	
Certifications:None		
BOSTICK'S ADULT RESIDENTIAL CARE FACILITY 1912 DUKE ST BEAUFORT, SC 29902-4404 FAC.#:843-524-3906 BURNS WANDA BOSTICK PH#: 843-524-3906 Facility Email: BARCF1@GMAIL.COM	Beaufort / Sole Proprietorship PO BOX 1841 BEAUFORT, SC 29901-1841 WANDA BOSTICK BURNS CRC-0143 / 05/31/2019	20
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
BROAD CREEK CARE CENTER ASSISTED LIVING 801 LEMON GRASS CT HILTON HEAD ISLAND, SC 29928-3022 FAC.#:843-341-7300 JACKSON WILLIAM F PH#: 843-341-7300 Facility Email: FJACKSON@VILIVING.COM	Beaufort / Corporation 700 TIDEPOINTE WAY HILTON HEAD ISLAND, SC 29928-3040 CC-HILTON HEAD INC CRC-1036 / 07/31/2018 (Renewal Pending)	50
Alzheimer Care:Yes Max # Resident:6	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
BROOKDALE HILTON HEAD 15 MAIN ST HILTON HEAD ISLAND, SC 29926-4604 FAC.#:843-342-6565 ORAGE DARYL PH#: 843-342-6565 Facility Email: DARYL.ORAGE@BROOKDALE.COM	Beaufort / Corporation 15 MAIN ST HILTON HEAD ISLAND, SC 29926 EMERITUS CORPORATION CRC-1397 / 08/31/2018	51
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
BROOKDALE HILTON HEAD COURT 48 MAIN ST HILTON HEAD ISLAND, SC 29926-1647 FAC.#:843-342-7122 HERNDON ADAM W PH#: 843-342-7122 Facility Email: ADAM.HERNDON@BROOKDALE.COM	Beaufort / Corporation 48 MAIN ST HILTON HEAD ISLAND, SC 29926-1647 EMERITUS CORPORATION CRC-1275 / 08/31/2018	36
Alzheimer Care:Yes Max # Resident:27	Alzheimer Unit: Yes Max # Beds: 36	
Certifications:None		

County: Beaufort

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 HILTON HEAD VILLAGE 80 MAIN ST OFC 100 HILTON HEAD ISLAND, SC 29926-2923 FAC.#:843-689-9143 NAPOLITANO JENNIFER PH#: 843-689-9143 Facility Email: JENNIFER.NAPOLITANO@BROOKDALE.COM	Beaufort / Corporation EMERITUS CORPORATION CRC-1276 / 08/31/2018	52
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
HELENA PLACE 1624 PARIS AVE PORT ROYAL, SC 29935-2041 FAC.#:843-982-0233 KESLER LORIE A PH#: 843-982-0233 Facility Email: ALCLICENSE@ENLIVANT.COM	Beaufort / 330 N WABASH AVE STE 3700 CHICAGO, IL 60611-7605 HELENA AID OPCO LLC CRC-1409 / 11/30/2018	44
Alzheimer Care:Yes Max # Resident:4	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
MARQUISE RESIDENTIAL HOME 9 FRAZIER VILLAGE DR BEAUFORT, SC 29906-7959 FAC.#:843-846-8417 HAYWARD MATTIE L PH#: 843-846-8417 Facility Email: MHAYWARD42@GMAIL.COM	Beaufort / Sole Proprietorship 9 FRAZIER VILLAGE DR BEAUFORT, SC 29906-7959 MATTIE L HAYWARD CRC-0863 / 03/31/2019	5
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
MORNINGSIDE OF BEAUFORT 109 OLD SALEM RD BEAUFORT, SC 29902-5113 FAC.#:843-982-0220 SIEGNER TAMATHE J PH#: 843-982-0220 Facility Email: LICENSING@5SSL.COM	Beaufort / Ltd. Liability 400 CENTRE ST NEWTON, MA 02458-2094 MORNINGSIDE OF BEAUFORT LLC CRC-1267 / 06/30/2019	49
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
PALMETTOS OF BLUFFTON 3039 OKATIE HWY BLUFFTON, SC 29910 FAC.#:843-707-9400 FLOYD STACY M PH#: 843-707-9400 Facility Email: STACY.FLOYD@NHCCARE.COM	Beaufort / Limited Liability Company (multiple member) BLUFFTON, SC 29909 PALMETTOS OF BLUFFTON LLC CRC-1648 / 03/31/2019	88
Alzheimer Care:Yes Max # Resident:11	Alzheimer Unit: Yes Max # Beds: 20	
Certifications:None		

County: Beaufort

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
PORT ROYAL COMMUNITY RESIDENCE 1508 OLD SHELL RD PORT ROYAL, SC 29935-1705 FAC.#:843-255-6335 MAYSE WANDA D PH#: 843-255-6335 Facility Email: WMAYSE@BCGOV.NET	Beaufort / 100 CLEARWATER WAY BEAUFORT, SC 29906-5798 BEAUFORT COUNTY DISABILITIES AND SPECIAL NEEDS BOARD CRC-1173 / 09/30/2018	15
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
RETREAT AT LADYS ISLAND 9 SUNSET BLVD BEAUFORT, SC 29907 FAC.#:843-379-9502 HOWE VALERIE M PH#: 843-379-9502 Facility Email: VALERIE.HOWE@PHOENIXSRLIVING.COM	Beaufort / 9 SUNSET BLVD BEAUFORT, SC 29907 FACTORY CREEK AL LLC CRC-1898 / 05/31/2019	83
Alzheimer Care:Yes Max # Resident:0	Alzheimer Unit: Yes Max # Beds: 24	
Certifications:None		
RIVER OAKS 1251 LADYS ISLAND DR PORT ROYAL, SC 29935-1106 FAC.#:843-521-2298 BECK MICHELLE A PH#: 843-521-2298 Facility Email: MBECK@ROYALRIVEROAKS.COM	Beaufort / 1251 LADYS ISLAND DR PORT ROYAL, SC 29935-1106 CARE RSL PORT ROYAL OPCO LLC CRC-0733 / 01/31/2019	62
Alzheimer Care:Yes Max # Resident:5	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
SPRENGER HEALTHCARE AT PORT ROYAL ASSISTED LIVING 1810 RICHMOND AVE PORT ROYAL, SC 29935 FAC.#:843-781-7700 LATHAM K'LEE S PH#: 843-781-7700 Facility Email: ASANFILIPPO@SPRENGERHEALTHCARE.COM	Beaufort / 3905 ORBERLIN AVE LORAIN, OH 44053 SPRENGER HEALTHCARE OF PORT ROYAL INC CRC-2016 / 05/31/2019	46
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
SUMMIT PLACE OF BEAUFORT 1119 PICKPOCKET PLANTATION DR BEAUFORT, SC 29902-3771 FAC.#:843-770-0105 HOYLES CRAIG PH#: 843-770-0105 Facility Email: LICENSING@5SSL.COM	Beaufort / Corporation 400 CENTRE ST NEWTON, MA 02458-2094 SNH SE TENANT TRS INC CRC-1375 / 06/30/2019	87
Alzheimer Care:Yes Max # Resident:44	Alzheimer Unit: Yes Max # Beds: 44	
Certifications:None		

County: Beaufort

Facility Type: Community Residential Care Facility

Facility Name	County/Ownership Type	Licensed
Location Street	Mailing/Billing Address	Units
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

Totals For Facility/License Type: <u>Community Residential Care Facility</u>	
Number of Activities/Facilities licensed: <u>20</u>	Number Licensed Units: <u>1,169</u>

County: Beaufort

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
AMEDISYS HOME HEALTH OF BEAUFORT 35 PROFESSIONAL VILLAGE CIR LADYS ISLAND, SC 29907 FAC.#:843-379-2320 CRAVEN KAREN L PH#: Facility Email: SHAUN.SNYDER@AMEDISYS.COM Counties Served: Beaufort, Jasper 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:	Beaufort / Ltd. Liability 35 PROFESSIONAL VILLAGE CIR LADYS ISLAND, SC 29907 AMEDISYS SC LLC HHA-0189 / 01/31/2019	2
AMEDISYS HOME HEALTH OF BLUFFTON 59 SHERIDAN PARK CIR STE A BLUFFTON, SC 29910-6029 FAC.#:843-815-3090 BARRY HANK PH#: 843-815-8090 Facility Email: 2224@AMEDISYS.COM Counties Served: Allendale, Beaufort, Hampton, Jasper 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:	Beaufort / Ltd. Liability 59 SHERIDAN PARK CIR STE A BLUFFTON, SC 29910-6029 AMEDISYS SC LLC HHA-0203 / 02/28/2019	4
BEAUFORT-JASPER HOME HEALTH AGENCY 719 OKATIE HWY 170N RIDGELAND, SC 29936-8276 FAC.#:843-987-7400 KENNEDY CATHERINE B PH#: 843-987-7400 Facility Email: CKENNEDY@BJHCHS.ORG Counties Served: Beaufort, Jasper License Restrictions: Physical Therapy: Y Speech Therapy: N Occupational Therapy: Y Med. Social Services: Y Home Health Aid: N Medical Supplies/Appliances/Durable Medical Equipment: N Other:	Beaufort / Non-Profit Corporation PO BOX 357 RIDGELAND, SC 29936-2605 BEAUFORT-JASPER-HAMPTON COMPREHENSIVE HEALTH SERVICES INC HHA-0017 / 08/31/2018	2
BRIGHTSTAR CARE-BLUFFTON 29 PLANTATION PARK DR STE 105 BLUFFTON, SC 29910-9010 FAC.#:843-837-3773 WHITTELSEY SUSAN PH#: 843-837-3773 Facility Email: SWHITTELSEY@BRIGHTSTARCARE.COM Counties Served: Beaufort, Jasper 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:	Beaufort / Limited Liability 177 MOORING BUOY HILTON HEAD ISLAND, SC 29928-5287 SS&J ASSOCIATES LLC HHA-0223 / 12/31/2018	2

County: Beaufort

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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CYPRESS CLUB HOME HEALTH AGENCY 20 LADY SLIPPER LN HILTON HEAD ISLAND, SC 29926-1372 FAC.#:843-689-7017 HARRISON ANN E PH#: 843-689-7017 Facility Email: AHARRISON@THECYPRESS.COM	Beaufort / Corporation 20 LADYSLIPPER LN HILTON HEAD ISLAND, SC 29926-1372 CYPRESS CLUB INC HHA-0146 / 07/31/2019	1
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Counties Served: Beaufort, Special Note - Restricted to Residents of The Cypress Club Only on Hilton Head Island, South Carolina

License Restrictions:SERVING CAMPUS RESIDENTS ONLY

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

Other: NURSING

ENCOMPASS HEALTH HOME HEALTH-BLUFFTON 110 TRADERS CROSS STE 206 BLUFFTON, SC 29909 FAC.#:843-705-8044 OCONNOR SHARON PH#: 803-441-0174 Facility Email: LISA.ARBUCKLE@ENCOMPASSHEALTH.COM	Beaufort / Limited Liability CARESOUTH HHA HOLDINGS OF SOUTH CAROLINA LLC HHA-0330 / 10/31/2018	2
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Counties Served: Beaufort, Jasper

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:

NHC HOMECARE-BEAUFORT 22 PLANTATION PARK DR STE 105B BLUFFTON, SC 29910 FAC.#:843-705-8230 JOHNSON KATHY A PH#: 843-522-0476 Facility Email: NHC@NHCHOMECAREBEAUFORT.COM	Beaufort / Limited Liability PO BOX 1199 BLUFFTON, SC 29910 NHC HOMECARE-SOUTH CAROLINA LLC HHA-0216 / 09/30/2018	4
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Counties Served: Beaufort, Colleton, Hampton, Jasper

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: DIETARY CONSULTATION

County: Beaufort

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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PALLIATIVE CARE OF THE LOWCOUNTRY 7 PLANTATION PARK DR UNIT 4 STE C2 BLUFFTON, SC 29910 FAC.#:843-706-4094 BRASINGTON RN JENNY PH#: 843-706-2296 Facility Email: INFO@HOSPICECARELC.ORG	Beaufort / Non-Profit Corporation PO BOX 3827 BLUFFTON, SC 29910-3827 HOSPICE CARE OF THE LOWCOUNTRY INC HHA-0117 / 09/30/2018	2
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Counties Served: Beaufort, Jasper, Special Note - RESTRICTED TO RESIDENTS WHO ARE TRERMINALLY ILL AS DEFINED IN REGULATION 61-78

License Restrictions:RESTRICTED TO RESIDENTS WHO ARE TERMINALLY ILL AS DEFINED IN REGULATION 61-78

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:

PRUITTHEALTH HOME HEALTH-LOW COUNTRY 108 TRADERS CROSS STE 100 BLUFFTON, SC 29909 FAC.#:843-872-0946 KINARD ROBIN PH#: 843-322-0280 Facility Email: LEGALSERVICES@PRUITTHEALTH.COM	Beaufort / Corporation 108 TRADERS CROSS STE 100 BLUFFTON, SC 29909 PRUITTHEALTH HOME HEALTH INC HHA-0214 / 04/30/2019	12
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Counties Served: Aiken, Allendale, Bamberg, Barnwell, Beaufort, Berkeley, Charleston, Colleton, Dorchester, Hampton, Jasper, Orangeburg

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:

SEABROOK WELLNESS AND HOME HEALTH CARE 300 WOODHAVEN DR HILTON HEAD ISLAND, SC 29928-4682 FAC.#:843-842-374 LEE ROBERT M PH#: 843-842-3747 Facility Email: RLEE@THESEABROOK.COM	Beaufort / Non-Profit Corporation 300 WOODHAVEN DR OFC HILTON HEAD ISLAND, SC 29928-7512 SEABROOK OF HILTON HEAD INC HHA-0173 / 11/30/2018	1
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Counties Served: Beaufort, Special Note - SERVING CAMPUS RESIDENTS ONLY OF CONTINUING CARE RETIREMENT

License Restrictions:SERVING CAMPUS RESIDENTS ONLY OF CONTINUING CARE RETIREMENT

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

Other:

Totals For Facility/License Type: Home Health

Number of Activities/Facilities licensed: 10 Number Licensed Units: 32

County: Beaufort

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
FRIENDS OF CAROLINE HOSPICE OF BEAUFORT 1110 13TH ST PORT ROYAL, SC 29935-1938 FAC.#:843-525-6257 ROBERG LINDSAY R PH#: 843-525-6257 Facility Email: LINDSAY@FRIENDSOFCAROLINEHOSPICE.COM	Beaufort / Non-Profit Corporation 1110 13TH ST PORT ROYAL, SC 29935-1938 FRIENDS OF CAROLINE HOSPICE OF BEAUFORT INC HPC-0057 / 06/30/2019	4
Counties Served: Beaufort, Colleton, Hampton, Jasper		
HOSPICE CARE OF THE LOWCOUNTRY INC 7 PLANTATION PARK DR UNIT 4 BLUFFTON, SC 29910 FAC.#:843-706-2296 BRASINGTON RN JENNY PH#: 843-706-2296 Facility Email: INFO@HOSPICECARELC.ORG	Beaufort / Non-Profit Corporation PO BOX 3827 BLUFFTON, SC 29910-3827 HOSPICE CARE OF THE LOWCOUNTRY INC HPC-0028 / 04/30/2019	3
Counties Served: Beaufort, Hampton, Jasper		
PRUITTHEALTH HOSPICE-BEAUFORT 1605 NORTH ST BEAUFORT, SC 29902-4815 FAC.#:843-522-0476 LONG STEPHANIE PH#: Facility Email: LEGALSERVICES@PRUITTHEALTH.COM	Beaufort / Corporation 1605 NORTH ST BEAUFORT, SC 29902-4815 PRUITTHEALTH HOSPICE INC HPC-0087 / 06/30/2019	4
Counties Served: Beaufort, Colleton, Hampton, Jasper		
TIDEWATER HOSPICE 10 BUCKINGHAM PLANTATION DR STE A BLUFFTON, SC 29910-6503 FAC.#:843-757-9388 SAXON SUSAN E PH#: 843-757-9388 Facility Email: SSAXON@TIDEWATERHOSPICE.COM	Beaufort / Partnership 10 BUCKINGHAM PLANTATION DR STE A BLUFFTON, SC 29910-6503 TIDEWATER HOSPICE PA HPC-0119 / 02/28/2019	46
Counties Served: Abbeville, Aiken, Allendale, Anderson, Bamberg, Barnwell, Beaufort, Berkeley, Calhoun, Charleston, Cherokee, Chester, Chesterfield, Clarendon, Colleton, Darlington, Dillon, Dorchester, Edgefield, Fairfield, Florence, Georgetown, Greenville, Greenwood, Hampton, Horry, Jasper, Kershaw, Lancaster, Laurens, Lee, Lexington, Marion, Marlboro, McCormick, Newberry, Oconee, Orangeburg, Pickens, Richland, Saluda, Spartanburg, Sumter, Union, Williamsburg, York		

Totals For Facility/License Type: <u>Hospice Program</u>	
Number of Activities/Facilities licensed: _____ 4	Number Licensed Units: _____ 57

County: Beaufort

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
BEAUFORT MEMORIAL HOSPITAL 955 RIBAUT RD BEAUFORT, SC 29902-5454 FAC.#:843-522-5200 PH#: Facility Email: ASOBIECH@BMHSC.ORG Licensed Beds: General: 169 Psychiatric: 14 Rehab: 14 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 5	Beaufort / County 955 RIBAUT RD BEAUFORT, SC 29902-5454 BEAUFORT COUNTY MEMORIAL HOSPITAL HTL-0026 / 11/30/2018	197

Certifications: Perinatal Level II, JCAHO Accredited

ENCOMPASS HEALTH REHABILITATION HOSPITAL OF HILTON HEAD 107 SEAGRASS STATION RD BLUFFTON, SC 29910 FAC.#:843-836-8200 BURNSIDE BRIAN D PH#: 000-000-0000 Facility Email: BRIAN.BURNSIDE@ENCOMPASSHEALTH.COM Licensed Beds: General: 0 Psychiatric: 0 Rehab: 38 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0	Beaufort / Limited Liability 107 SEAGRASS STATION RD BLUFFTON, SC 29910 ENCOMPASS HEALTH REHABILITATION HOSPITAL OF HILTON HEAD LLC HTL-0943 / 06/30/2019	38
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Certifications: None

HILTON HEAD HOSPITAL 25 HOSPITAL CENTER BLVD HILTON HEAD ISLAND, SC 29926-2738 FAC.#:843-689-8206 CLARK JEREMY PH#: 843-689-8206 Facility Email: HHH-CEO@TENETHEALTH.COM Licensed Beds: General: 93 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0	Beaufort / Limited Liability Limited 25 HOSPITAL CENTER BLVD HILTON HEAD ISLAND, SC 29926-2738 HILTON HEAD HEALTH SYSTEM LP HTL-0646 / 10/31/2018	93
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Certifications: Perinatal Level I, JCAHO Accredited

Totals For Facility/License Type: <u>Hospital or Institutional General Infirmary</u>	
Number of Activities/Facilities licensed: <u> 3 </u>	Number Licensed Units: <u> 328 </u>

County: Beaufort

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
ACTI-KARE RESPONSIVE IN-HOME CARE-HILTON HEAD 2 CORPUS CHRISTI PL STE 200 HILTON HEAD ISLAND, SC 29928 FAC. #: 843-996-1497 PH#:	Beaufort / Limited Liability 11:11 ROSE LLC	- 1
Facility Email: NBRANCHE@ACTIKARE.COM	IHCP-0837 / 04/30/2019	
BRIGHTSTAR CARE LOW COUNTRY 29 PLANTATION PARK DR STE 105 BLUFFTON, SC 29910-9010 FAC. #: 843-837-3773 PH#:	Beaufort / Limited Liability 177 MOORING BUOY HILTON HEAD ISLAND, SC 29928-5287 SS&J ASSOCIATES LLC	- 1
Facility Email: LOWCOUNTRY@BRIGHTSTARCARE.COM	IHCP-0342 / 11/30/2018	
COMFORCARE SENIOR SERVICES HILTON HEAD 25 BUCKINGHAM PLANTATION DR STE A BLUFFTON, SC 29910-8675 FAC. #: 843-837-3100 PH#:	Beaufort / Limited Liability Company - 25 BUCKINGHAM PLANTATION DR STE A BLUFFTON, SC 29910-8675 VALHALLA ENTERPRISES LLC	1
Facility Email: HILTONHEAD@COMFORCARE.COM	IHCP-0002 / 05/31/2019	
COMPASSIONATE CARE PROVIDERS 20 TOWNE DR STE 229 BLUFFTON, SC 29910 FAC. #: 571-238-5829 PH#:	Beaufort / Limited Liability 20 TOWNE DR STE 229 BLUFFTON, SC 29910 COMPASSIONATE CARE PROVIDERS LLC	- 1
Facility Email: MONAJROY71@GMAIL.COM	IHCP-0752 / 10/31/2018	
DAYBREAK OF THE LOWCOUNTRY 117 WILLIAM HILTON PKWY STE H HILTON HEAD ISLAND, SC 29926 FAC. #: 843-415-3211 EITEEN CHERYL PH#: 803-360-3521	Beaufort / Corporation C-WORTHY INC	- 1
Facility Email: COKER@DAYBREAKCARE.COM	IHCP-0593 / 10/31/2018	
GRISWOLD HOME CARE OF LOW COUNTRY 1000 MAIN ST STE 200E HILTON HEAD ISLAND, SC 29926-1695 FAC. #: 843-785-6400 PH#:	Beaufort / Limited Liability 1000 MAIN ST STE 200E HILTON HEAD ISLAND, SC 29926-1695 CAERKILLIAN LLC	- 1
Facility Email: MICHAEL.FALVO@GRISWOLDHOMECARE.COM	IHCP-0051 / 01/31/2019	
HOME HELPERS OF THE LOWCOUNTRY 14 WESTBURY PARK WAY STE 102 BLUFFTON, SC 29910 FAC. #: 843-837-3041 MORRIS DEBORAH D PH#: 843-837-3041	Beaufort / Limited Liability 14 WESTBURY PARK WAY STE 102 BLUFFTON, SC 29910 M & C GROUP LLC	- 1
Facility Email: HELP@HOMEHELPERSLOWCOUNTRY.COM	IHCP-0034 / 11/30/2018	
OMEGA HEALTHCARE SERVICES 1001 BAY ST STE 34 BEAUFORT, SC 29902 FAC. #: 843-972-3939 OKAFOR CRYSTAL U PH#: 843-972-3939	Beaufort / Limited Liability PO BOX 61306 RALEIGH, NC 27661 OMEGA HEALTHCARE SERVICES LLC	- 1
Facility Email: COKAFOR@OMEGAHEALTHCARESERVICES.COM	IHCP-0776 / 12/31/2018	

County: Beaufort

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
RIGHT AT HOME OF BLUFFTON 29 PLANTATION PARK DR STE 704 BLUFFTON, SC 29910-9003 FAC.#:843-815-7890 PH#: Facility Email: GREGG@RAHLOWCOUNTRY.COM	Beaufort / Corporation 29 PLANTATION PARK DR STE 704 BLUFFTON, SC 29910-9003 RALPH DONALD CORPORATION DBA RIGHT AT HOME IHCP-0026 / 10/31/2018	- 1
SENIOR HELPERS HILTON HEAD SC 1541 FORDING ISLAND RD STE 2 HILTON HEAD ISLAND, SC 29926 FAC.#:813-394-4524 PH#: Facility Email: SWELLINGER@SENIORHELPERS.COM	Beaufort / Corporation 17 SAW TIMBER DR HILTON HEAD ISLAND, SC 29926 SUSTAINED CARE SERVICES INC IHCP-0780 / 10/31/2018	- 1
SORINITY SUPPORT SERVICES 2 CORPUS CHRISTI PL STE 200 HILTON HEAD ISLAND, SC 29928 FAC.#:866-494-4734 PH#: Facility Email: DIRECTOR@SORINITYHEALTH.COM	Beaufort / Limited Liability 2 CORPUS CHRISTI PL STE 200 HILTON HEAD ISLAND, SC 29928 SORINITY SUPPORT SERVICES LLC IHCP-0818 / 04/30/2019	- 1
VISITING ANGELS BLUFFTON 29 PLANTATION PARK DR STE 114 BLUFFTON, SC 29910-9015 FAC.#:843-757-1002 PH#: Facility Email: RDESALLE@VISITINGANGELS.COM	Beaufort / Limited Liability 29 PLANTATION PARK DR STE 114 BLUFFTON, SC 29910-9015 HHI SENIOR HOME CARE LLC IHCP-0103 / 04/30/2019	- 1

Totals For Facility/License Type: <u>Inhome Care Provider</u>	
Number of Activities/Facilities licensed: <u>12</u>	Number Licensed Units: <u>- 12</u>

County: Beaufort

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
BAYVIEW MANOR 11 TODD DR BEAUFORT, SC 29902-6113 FAC.#:843-524-8911 DRINKARD CHRISTY PH#: 843-524-8911 Facility Email: ADMIN@BAYVIEWMANOR.NET	Beaufort / Ltd. Liability 11 TODD DR BEAUFORT, SC 29902-6113 BAYVIEW MANOR LLC NCF-0898 / 05/31/2019	170
Licensed Beds: Nursing Home: 170 Institutional Nursing Home: 0 Alzheimer Care:Yes Max # Resident:0 Alzheimer Unit: Yes Max # Beds: 0 Certifications:None		
BROAD CREEK CARE CENTER SKILLED NURSING 801 LEMON GRASS CT HILTON HEAD ISLAND, SC 29928-3022 FAC.#:843-341-7300 JACKSON WILLIAM F PH#: 843-341-7300 Facility Email: Not on File	Beaufort / Corporation 700 TIDEPOINTE WAY HILTON HEAD ISLAND, SC 29928-3040 CC-HILTON HEAD INC NCF-0753 / 07/31/2018 (Renewal Pending)	25
Licensed Beds: Nursing Home: 25 Institutional Nursing Home: 0 Alzheimer Care:Yes Max # Resident:0 Alzheimer Unit: No Max # Beds: 0 Certifications:None		
FRASER HEALTH CARE 300 WOODHAVEN DR HILTON HEAD ISLAND, SC 29928-4682 FAC.#:843-842-3740 MARSHALL PETER C PH#: 843-689-9143 Facility Email: PMARSHALL@THESEABROOK.COM	Beaufort / Non-Profit Corporation 300 WOODHAVEN DR HILTON HEAD ISLAND, SC 29928-4682 SEABROOK OF HILTON HEAD INC NCF-0414 / 09/30/2018	33
Licensed Beds: Nursing Home: 19 Institutional Nursing Home: 14 Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0 Certifications:None		
LIFE CARE CENTER OF HILTON HEAD 120 LAMOTTE DR HILTON HEAD ISLAND, SC 29926-2792 FAC.#:843-681-6006 KILPATRICK LYNN D PH#: 843-681-6006 Facility Email: LYNN_KILPATRICK@LCCA.COM	Beaufort / Corporation 120 LAMOTTE DR HILTON HEAD ISLAND, SC 29926-2792 LIFE CARE CENTERS OF AMERICA INC NCF-0725 / 05/31/2019	88
Licensed Beds: Nursing Home: 88 Institutional Nursing Home: 0 Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0 Certifications:None		

County: Beaufort

Facility Type: Nursing Home

Facility Name	County/Ownership Type	Licensed Units
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

NHC HEALTHCARE BLUFFTON	Beaufort / Limited Liability	120
3039 OKATIE HWY	3039 OKATIE HWY	
BLUFFTON, SC 29909-5101 FAC.#:843-705-8220	BLUFFTON, SC 29909-5101	
YOKLEY STEVEN T PH#: 843-705-8220	NHC HEALTHCARE/BLUFFTON LLC	
Facility Email: SYOKLEY@NHCBLUFFTON.COM	NCF-0958 / 01/31/2019	

Licensed Beds: Nursing Home: 120 Institutional Nursing Home: 0

Alzheimer Care:Yes Max # Resident:0 Alzheimer Unit: Yes Max # Beds: 0

Certifications:None

PRESTON HEALTH CENTER	Beaufort / Limited Liability Limited	77
87 BIRDSONG WAY	87 BIRDSONG WAY	
HILTON HEAD ISLAND, SC 29926-1365 FAC.#:843-689-7030	HILTON HEAD ISLAND, SC 29926-1365	
FUNK ADAM PH#: 843-689-7030	CYPRESS OF HILTON HEAD ISLAND ASSOCIATES LP	
Facility Email: AFUNK@THECYPRESS.COM	NCF-0576 / 04/30/2019	

Licensed Beds: Nursing Home: 69 Institutional Nursing Home: 8

Alzheimer Care:Yes Max # Resident:0 Alzheimer Unit: Yes Max # Beds: 0

Certifications:None

SPRENGER HEALTHCARE OF PORT ROYAL	Beaufort / Corporation	65
1810 RICHMOND AVE	3905 OBERLIN AVE	
PORT ROYAL, SC 29935 FAC.#:843-781-7700	LORAIN, OH 44053	
SHAW JANELLE PH#: 843-781-7700	SPRENGER HEALTHCARE OF PORT ROYAL INC (DELAWARE CORP)	
Facility Email: ASANFILIPPO@SPRENGERHEALTHCARE.COM	NCF-0980 / 05/31/2019	

Licensed Beds: Nursing Home: 65 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>578</u>

County: Beaufort

Facility Type: PSAD Inpatient

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
SUNSPIRE HEALTH HILTON HEAD 2200 MAIN ST HILTON HEAD ISLAND, SC 29926-1667 FAC.#:843-473-3350 LAPOINTE DANIELLE PH#: 843-473-3325	Beaufort / Limited Liability 2200 MAIN ST HILTON HEAD ISLAND, SC 29926 SUNSPIRE HEALTH HILTON HEAD LLC ITP-0035 / 08/31/2018	33
Facility Email: LDECKARD@SUNSPIREHEALTH.COM Licensed Beds: Medical Detox: 0 Social Detox: 12 Res. Treatment Program: 21		

Totals For Facility/License Type: <u>PSAD Inpatient</u>	
Number of Activities/Facilities licensed: <u>1</u>	Number Licensed Units: <u>33</u>

County: Beaufort

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
BEAUFORT COUNTY ALCOHOL AND DRUG ABUSE DEPARTMENT 1905 DUKE ST STE 270 BEAUFORT, SC 29902-4403 FAC.#:843-255-6000 BOYNE JR DOUGLAS H PH#: 843-255-6000 Facility Email: MSPELLS@BCGOV.NET	Beaufort / County PO BOX 311 BEAUFORT, SC 29901-0311 BEAUFORT COUNTY ALCOHOL AND DRUG ABUSE DEPARTMENT (BOARD) OTP-0018 / 07/31/2019	2

Certifications:None

SUNSPIRE HEALTH HILTON HEAD OUTPATIENT 2200 MAIN ST HILTON HEAD ISLAND, SC 29926-1667 FAC.#:843-473-3325 LAPOINTE DANIELLE PH#: 843-473-3325 Facility Email: DLAPOINTE@SUNSPIREHEALTH.COM	Beaufort / Limited Liability 2200 MAIN ST HILTON HEAD ISLAND, SC 29926 SUNSPIRE HEALTH HILTON HEAD LLC OTP-0123 / 08/31/2018	1
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Certifications:None

Totals For Facility/License Type: <u>PSAD Outpatient</u>	
Number of Activities/Facilities licensed: _____ 2	Number Licensed Units: _____ 3

County: Beaufort

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
BLUFFTON DIALYSIS 101 OKATIE CENTER BLVD S BLUFFTON, SC 29909 FAC.#:843-706-9900 CONRAD RN SHANE EDWARD PH#: 843-706-9900 Facility Email: SCL_C@DAVITA.COM	Beaufort / Limited Liability 5200 VIRGINIA WAY, LICENSING AND CERTIFICATION BRENTWOOD, TN 37027-7569 SHOALS DIALYSIS LLC ERD-0209 / 02/28/2019	12
<p>Licensed Stations: Hemodialysis: 11 Peritoneal: 2</p>		
DCI PORT ROYAL 8 PRESNELL CIR BEAUFORT, SC 29902 FAC.#:843-521-4300 CASCIO BARBARA PH#: 843-521-4300 Facility Email: SUSAN.WATTS@DCIINC.ORG	Beaufort / Non-Profit Corporation 1411 KING ST CHARLESTON, SC 29403-3008 DIALYSIS CLINIC INC ERD-0132 / 05/31/2019	31
<p>Licensed Stations: Hemodialysis: 30 Peritoneal: 3</p>		
FMC DIALYSIS SERVICES-HILTON HEAD 25 HOSPITAL CENTER BLVD STE 108, MEDICAL PAVILION HILTON HEAD ISLAND, SC 29926-2735 FAC.#:843-681-5840 COLE JENNIFER PH#: Facility Email: JENNIFER.COLE@FMC-NA.COM	Beaufort / Corporation 25 HOSPITAL CENTER BLVD STE 108, MEDICAL PAVILION HILTON HEAD ISLAND, SC 29926-2735 BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC ERD-0123 / 07/31/2019	17
<p>Licensed Stations: Hemodialysis: 16 Peritoneal: 1</p>		
FMC DIALYSIS SERVICES-LOW COUNTRY DIALYSIS 10 JOHNNY MORRALL CIR PORT ROYAL, SC 29935-1148 FAC.#:843-524-2373 RIVERA SAMANTHA PH#: Facility Email: SAMANTHA.RIVERA@FMC-NA.COM	Beaufort / Corporation 10 JOHNNY MORRALL CIR PORT ROYAL, SC 29935-1148 BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC ERD-0097 / 05/31/2019	24
<p>Licensed Stations: Hemodialysis: 22 Peritoneal: 2</p>		

Totals For Facility/License Type: <u>Renal Dialysis</u>	
Number of Activities/Facilities licensed: <u>4</u>	Number Licensed Units: <u>84</u>

County: Beaufort

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
BEAUTY MARKS TATTOOS 220 SAVANNAH HWY STE B BEAUFORT, SC 29906-6724 FAC.#:843-470-0304 WILLS DALE D JR PH#: 843-470-0304 Facility Email: GOTHICPIERCING@YAHOO.COM	Beaufort / Limited Liability 220 SAVANNAH HWY STE B BEAUFORT, SC 29906-6724 GOTHIC PIERCING AND BEAUTY MARKS TATTOOS LLC TF-0064 / 04/30/2019	3
DARK TIDE GALLERY 5 MARINA BLVD BEAUFORT, SC 29902-6947 FAC.#:843-986-0221 RADER GREGORY PH#: 843-986-0221 Facility Email: DARKTIDEGALLERY@GMAIL.COM	Beaufort / Sole Proprietorship 5 MARINA BLVD BEAUFORT, SC 29902-6947 LIVELY BRITTANY NICOLE TF-0190 / 10/31/2018	2
INCREDIBLE INK 37 NEW ORLEANS RD STE Y, ORLEANS PLAZA HILTON HEAD ISLAND, SC 29928-4747 FAC.#:843-686-4657 MESTANEK ROBERT PH#: 843-686-4657 Facility Email: 1INCREDIBLEINK@GMAIL.COM	Beaufort / Limited Liability PO BOX 7872 HILTON HEAD ISLAND, SC 29938-7872 INCREDIBLE INK LLC TF-0153 / 03/31/2019	3
ISLAND TATTOO COMPANY 115 ARROW RD UNIT 1 HILTON HEAD ISLAND, SC 29928-7314 FAC.#:843-785-3344 BITTON AMIR M PH#: 843-785-3344 Facility Email: ALLSTAR20@HARGRAY.COM	Beaufort / Corporation 130 ARROW RD STE 103A HILTON HEAD ISLAND, SC 29928-7341 ISLAND TATTOO COMPANY INC TF-0057 / 10/31/2018	5
SUGAR SHACK CANVAS & INK 70 PENNINGTON DR STE 22 BLUFFTON, SC 29910-6059 FAC.#:843-836-2211 SMITH MARK E PH#: 843-837-5545 Facility Email: MARK@SUGARSHACKINK.COM	Beaufort / Limited Liability 70 PENNINGTON DR STE 22 BLUFFTON, SC 29910-6059 SUGAR SHACK CANVAS & INK LLC TF-0162 / 10/31/2018	3

Totals For Facility/License Type: <u>Tattoo Facility</u>	
Number of Activities/Facilities licensed: <u>5</u>	Number Licensed Units: <u>16</u>

Number of Activities/Facilities licensed in county of : <u>Beaufort</u>	# Lics: <u>75</u>
	Number Licensed Units : <u>2,364</u>

Report Totals

Total Number of Activities/Facilities licensed: 75 Total Number Licensed Units: 2,364