

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
<b>MEMORY MATTERS</b> 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@MEMORY-MATTERS.ORG	Beaufort / Charitable PO BOX 22330 HILTON HEAD ISLAND, SC 29925-2330 ALZHEIMER'S RESPITE & RESOURCE ADC-0291 / 12/31/2017 (Renewal Pending)	60
<b>Number of Participants:</b>		<b>60</b>

<b>Totals For Facility/License Type: <u>Adult Day Care</u></b>	
<b>Number of Activities/Facilities licensed:</b> <u>1</u>	<b>Number Licensed Units:</b> <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
<b>BLUFFTON OKATIE SURGERY CENTER</b> 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		
<b>LASER AND SKIN SURGERY CENTER</b> 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		
<b>OUTPATIENT SURGERY CENTER OF HILTON HEAD</b> 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 / 01/31/2018	7
Operating Rooms: 3 Procedure Rooms: 2 Endoscopy Rooms: 2		

<b>Totals For Facility/License Type: <u>Ambulatory Surgery</u></b>	
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
<b>BEAUTY MARKS PIERCING</b> 220 SAVANNAH HWY STE A BEAUFORT, SC 29906-6724 FAC.#:843-470-0304 WILLS DALE D JR PH#: 843-470-0304 <b>Facility Email:</b> GOTHICPIERCING@YAHOO.COM	Beaufort / Ltd. Liability 220 SAVANNAH HWY STE A BEAUFORT, SC 29906-6724 GOTHIC PIERCING AND BEAUTY MARKS TATTOOS LLC <b>BP-0216 / 07/31/2018</b>	1
<b>BODY PIERCING STUDIO AT ISLAND REPUBLIC</b> 1460 FORDING ISLAND RD STE 210 BLUFFTON, SC 29910-8665 FAC.#:843-836-2030 BITTON AMIR M PH#: 843-836-2030 <b>Facility Email:</b> ALLSTAR20@HARGRAY.COM	Beaufort / Ltd. Liability 130 ARROW RD STE 103A HILTON HEAD ISLAND, SC 29928-7341 ALL STAR SERVICE AND RETAIL OF SC LLC <b>BP-0128 / 04/30/2018</b>	1

<b>Totals For Facility/License Type: <u>Body Piercing</u></b>	
<b>Number of Activities/Facilities licensed: _____ 2</b>	<b>Number Licensed Units: _____ 2</b>

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
<b>A'LELIA RESIDENTIAL CARE</b> 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		
<b>BAYSHORE ON HILTON HEAD ISLAND</b> 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 / 06/30/2018	147
Alzheimer Care:No      Max # Resident:0	Alzheimer Unit: No      Max # Beds: 0	
Certifications:None		
<b>BENTON HOUSE OF BLUFFTON</b> 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 / 03/31/2018	104
Alzheimer Care:Yes      Max # Resident:36	Alzheimer Unit: Yes      Max # Beds: 40	
Certifications:None		
<b>BLOOM AT BELFAIR</b> 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 60 OAK FOREST RD BLUFFTON, SC 29910-5010 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		
<b>BLOOM AT BLUFFTON</b> 800 FORDING ISLAND RD BLUFFTON, SC 29910-4845 FAC.#:843-815-2555 LATHAM K'LEE PH#: 843-815-2555 Facility Email: ADMIN@BLOOMATBLUFFTON.COM	Beaufort / 800 FORDING ISLAND RD BLUFFTON, SC 29910-4845 BLOOMFIELD SENIOR LIVING OF BLUFFTON II LLC CRC-1381 / 04/30/2018	70
Alzheimer Care:Yes      Max # Resident:10	Alzheimer Unit: Yes      Max # Beds: 24	
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
<b>BLOOM AT HILTON HEAD</b> 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 / 35 BEACH CITY RD HILTON HEAD ISLAND, SC 29926-4725 BLOOMFIELD SENIOR LIVING OF HILTON HEAD LLC CRC-1382 / 04/30/2018	72
Alzheimer Care:Yes Max # Resident:16	Alzheimer Unit: Yes Max # Beds: 19	
Certifications:None		
<b>BOSTICK'S ADULT RESIDENTIAL CARE FACILITY</b> 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 / 05/31/2018	20
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
<b>BROAD CREEK CARE CENTER ASSISTED LIVING</b> 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	50
Alzheimer Care:Yes Max # Resident:6	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
<b>BROOKDALE HILTON HEAD</b> 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		
<b>BROOKDALE HILTON HEAD COURT</b> 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
<b>BROOKDALE HILTON HEAD VILLAGE</b> 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		
<b>HELENA PLACE</b> 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		
<b>MARQUISE RESIDENTIAL HOME</b> 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 / 03/31/2018	5
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
<b>MORNINGSIDE OF BEAUFORT</b> 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 / 06/30/2018	49
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
<b>PORT ROYAL COMMUNITY RESIDENCE</b> 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		

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
<b>RIVER OAKS</b> 1251 LADYS ISLAND DR PORT ROYAL, SC 29935-1106 FAC.#:843-521-2298 CRUMAUGH HEATHER PH#: 843-521-2298 Facility Email: HCRUMBAUGH@ROYALSENIORS.COM	Beaufort / 1251 LADYS ISLAND DR PORT ROYAL, SC 29935-1106 CARE RSL PORT ROYAL OPCO LLC CRC-0733 / 01/31/2018	62
Alzheimer Care:Yes      Max # Resident:5      Alzheimer Unit: Yes      Max # Beds: 0		

Certifications:None

<b>SUMMIT PLACE OF BEAUFORT</b> 1119 PICK POCKET PLANTATION DR BEAUFORT, SC 29902-3771 FAC.#:843-770-0105 DEFINO DERRICK V 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 / 06/30/2018	87
Alzheimer Care:Yes      Max # Resident:44      Alzheimer Unit: Yes      Max # Beds: 44		

Certifications:None

<b>THE PALMETTOS OF BLUFFTON</b> 3039 OKATIE HWY BLUFFTON, SC 29910 FAC.#:843-707-9400 FLOYD STACY M PH#: 843-707-9400 Facility Email: SFLOYD@THEPALMETTOSBLUFFTON.COM	Beaufort / Limited Liability Company (multiple member) 3039 OKATIE HWY BLUFFTON, SC 29909 PALMETTOS OF BLUFFTON LLC CRC-1648 / 03/31/2018	88
Alzheimer Care:Yes      Max # Resident:0      Alzheimer Unit: Yes      Max # Beds: 22		

Certifications:None

Totals For Facility/License Type: <u>Community Residential Care Facility</u>	
Number of Activities/Facilities licensed: <u>18</u>	Number Licensed Units: <u>1,040</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
<b>AMEDISYS HOME HEALTH OF BEAUFORT</b> 35 PROFESSIONAL VILLAGE CIR LADYS ISLAND, SC 29907 FAC.#:843-379-2320 SNYDER SHAUN PH#: Facility Email: 2210@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 2121 BOUNDARY ST STE 200 BEAUFORT, SC 29902-6812 AMEDISYS SC LLC HHA-0189 / 01/31/2018	2
<b>AMEDISYS HOME HEALTH OF BLUFFTON</b> 59 SHERIDAN PARK CIR STE A BLUFFTON, SC 29910-6029 FAC.#:800-697-5235 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 / 02/28/2018	4
<b>BEAUFORT-JASPER HOME HEALTH AGENCY</b> 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
<b>BRIGHTSTAR CARE-BLUFFTON</b> 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 / 12/31/2014 (Renewal Pending)	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
---	---	-------------------

<b>CYPRESS CLUB HOME HEALTH AGENCY</b> 20 LADYSLIPPER 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 / 07/31/2018	1
---	---	---

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

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

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:

<b>NHC HOMECARE-BEAUFORT</b> 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
---	---	---

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
---	---	-------------------

<b>PALLIATIVE CARE OF THE LOWCOUNTRY</b> 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
--	--	---

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:

<b>PRUITTHEALTH HOME HEALTH-LOW COUNTRY</b> 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 / 04/30/2018	12
---	--	----

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:

<b>SEABROOK WELLNESS AND HOME HEALTH CARE</b> 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
--	--	---

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:

<b>Totals For Facility/License Type: <u>Home Health</u></b>	
Number of Activities/Facilities licensed: <u>10</u>	Number Licensed Units: <u>32</u>

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
<b>FRIENDS OF CAROLINE HOSPICE OF BEAUFORT</b> 1110 13TH ST PORT ROYAL, SC 29935-1938 FAC.#:843-525-6257 ROBERG LINDSAY R PH#: 843-525-6257 <b>Facility Email:</b> LINDSAY@FRIENDSOFCAROLINEHOSPICE.ORG	Beaufort / Non-Profit Corporation 1110 13TH ST PORT ROYAL, SC 29935-1938 FRIENDS OF CAROLINE HOSPICE OF BEAUFORT INC <b>HPC-0057 / 06/30/2018</b>	4
<b>Counties Served: Beaufort, Colleton, Hampton, Jasper</b>		
<b>HOSPICE CARE OF THE LOWCOUNTRY INC</b> 7 PLANTATION PARK DR UNIT 4 BLUFFTON, SC 29910 FAC.#:843-706-2296 BRASINGTON RN JENNY PH#: 843-706-2296 <b>Facility Email:</b> INFO@HOSPICECARELC.ORG	Beaufort / Non-Profit Corporation PO BOX 3827 BLUFFTON, SC 29910-3827 HOSPICE CARE OF THE LOWCOUNTRY INC <b>HPC-0028 / 04/30/2018</b>	3
<b>Counties Served: Beaufort, Hampton, Jasper</b>		
<b>PRUITTHEALTH HOSPICE-BEAUFORT</b> 1605 NORTH ST BEAUFORT, SC 29902-4815 FAC.#:843-522-0476 LONG STEPHANIE PH#: <b>Facility Email:</b> KHARRISON@PRUITTHEALTH.COM	Beaufort / Corporation 1605 NORTH ST BEAUFORT, SC 29902-4815 PRUITTHEALTH HOSPICE INC <b>HPC-0087 / 06/30/2018</b>	4
<b>Counties Served: Beaufort, Colleton, Hampton, Jasper</b>		
<b>TIDEWATER HOSPICE</b> 10 BUCKINGHAM PLANTATION DR STE A BLUFFTON, SC 29910-6503 FAC.#:843-757-9388 SAXON SUSAN E PH#: 843-757-9388 <b>Facility Email:</b> SUSANSAXON@TIDEWATERHOSPICE.COM	Beaufort / Partnership 10 BUCKINGHAM PLANTATION DR STE A BLUFFTON, SC 29910-6503 TIDEWATER HOSPICE PA <b>HPC-0119 / 02/28/2018</b>	46
<b>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</b>		

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

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

Certifications: Perinatal Level II, JCAHO Accredited

<b>HILTON HEAD HOSPITAL</b> 25 HOSPITAL CENTER BLVD HILTON HEAD ISLAND, SC 29926-2738 FAC.#:843-689-8206 CLARK JEREMY PH#: 843-689-8206	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
<b>Facility Email:</b> HHH-CEO@TENETHEALTH.COM		
<b>Licensed Beds: General: 93    Psychiatric: 0    Rehab: 0    Substance Abuse: 0</b> <b>Other Beds :        NICU: 0        Neonatal Special Care: 0</b>		

Certifications: Perinatal Level I, JCAHO Accredited

<b>Totals For Facility/License Type: <u>Hospital or Institutional General Infirmary</u></b>	
<b>Number of Activities/Facilities licensed: _____ 2</b>	<b>Number Licensed Units: _____ 290</b>

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
<b>BRIGHTSTAR CARE LOW COUNTRY</b> 29 PLANTATION PARK DR STE 105 BLUFFTON, SC 29910-9010 FAC.#:843-837-3773 PH#: Facility Email: LOWCOUNTRY@BRIGHTSTARCARE.COM	Beaufort / Limited Liability 177 MOORING BUOY HILTON HEAD ISLAND, SC 29928-5287 SS&J ASSOCIATES LLC <b>IHCP-0342 / 11/30/2018</b>	- 1
<b>COMFORCARE SENIOR SERVICES HILTON HEAD</b> 25 BUCKINGHAM PLANTATION DR STE A BLUFFTON, SC 29910-8675 FAC.#:843-837-3100 PH#: Facility Email: HILTONHEAD@COMFORCARE.COM	Beaufort / Limited Liability Company - <del>25 BUCKINGHAM PLANTATION DR STE A</del> BLUFFTON, SC 29910-8675 VALHALLA ENTERPRISES LLC <b>IHCP-0002 / 05/31/2018</b>	1
<b>COMPASSIONATE CARE PROVIDERS</b> 20 TOWNE DR STE 229 BLUFFTON, SC 29910 FAC.#:571-238-5829 PH#: Facility Email: MONAJJOY71@GMAIL.COM	Beaufort / Limited Liability 20 TOWNE DR STE 229 BLUFFTON, SC 29910 COMPASSIONATE CARE PROVIDERS LLC <b>IHCP-0752 / 10/31/2018</b>	- 1
<b>DAYBREAK OF THE LOWCOUNTRY</b> 117 WILLIAM HILTON PKWY STE H HILTON HEAD ISLAND, SC 29926 FAC.#:843-415-3211 EITEEN CHERYL PH#: 803-360-3521 Facility Email: COKER@DAYBREAKCARE.COM	Beaufort / Corporation C-WORTHY INC <b>IHCP-0593 / 10/31/2018</b>	- 1
<b>GRISWOLD HOME CARE OF LOW COUNTRY</b> 1000 MAIN ST STE 200E HILTON HEAD ISLAND, SC 29926-1695 FAC.#:843-785-6400 PH#: Facility Email: MICHAEL.FALVO@GRISWOLDHOMECARE.COM	Beaufort / Limited Liability 1000 MAIN ST STE 200E HILTON HEAD ISLAND, SC 29926-1695 CAERKILLIAN LLC <b>IHCP-0051 / 01/31/2018</b>	- 1
<b>HOME HELPERS OF THE LOWCOUNTRY</b> 14 WESTBURY PARK WAY STE 102 BLUFFTON, SC 29910 FAC.#:843-837-3041 MORRIS DEBORAH D PH#: 843-837-3041 Facility Email: HELP@HOMEHELPERSLOWCOUNTRY.COM	Beaufort / Limited Liability 14 WESTBURY PARK WAY STE 102 BLUFFTON, SC 29910 M & C GROUP LLC <b>IHCP-0034 / 11/30/2018</b>	- 1
<b>OMEGA HEALTHCARE SERVICES</b> 1001 BAY ST STE 34 BEAUFORT, SC 29902 FAC.#:843-972-3939 OKAFOR CRYSTAL U PH#: 843-972-3939 Facility Email: COKAFOR@OMEGAHEALTHCARESERVICES.COM	Beaufort / Limited Liability PO BOX 61306 RALEIGH, NC 27661 OMEGA HEALTHCARE SERVICES LLC <b>IHCP-0776 / 12/31/2018</b>	- 1
<b>RIGHT AT HOME OF BLUFFTON</b> 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 <b>IHCP-0026 / 10/31/2018</b>	- 1

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
<b>SENIOR HELPERS HILTON HEAD SC</b> 1541 FORDING ISLAND RD STE 2 HILTON HEAD ISLAND, SC 29926 FAC.#:813-394-4524 PH#: <b>Facility Email:</b> SWELLINGER@SENIORHELPERS.COM	Beaufort / Corporation 17 SAW TIMBER DR HILTON HEAD ISLAND, SC 29926 SUSTAINED CARE SERVICES INC <b>IHCP-0780 / 10/31/2018</b>	- 1
<b>VERNON'S PRIVATE HOME CARE LLC</b> 33 CATAWBA WAY BURTON, SC 29906 FAC.#:843-263-1243 VERNON FELICIA PH#: 843-263-1243 <b>Facility Email:</b> CONTACTUS@VERNONSPHCONLINE.COM	Beaufort / Limited Liability 53 BRINDLEWOOD DR BEAUFORT, SC 29907 VERNON'S PRIVATE HOME CARE LLC <b>IHCP-0641 / 11/30/2017 (Renewal Pending)</b>	- 1
<b>VISITING ANGELS BLUFFTON</b> 29 PLANTATION PARK DR STE 114 BLUFFTON, SC 29910-9015 FAC.#:843-757-1002 DESALLE RICHARD PH#: 843-757-1002 <b>Facility Email:</b> RDESALLE@VISITINGANGELS.COM	Beaufort / Limited Liability 29 PLANTATION PARK DR STE 114 BLUFFTON, SC 29910-9015 HHI SENIOR HOME CARE LLC <b>IHCP-0103 / 04/30/2018</b>	- 1

<b>Totals For Facility/License Type: <u>Inhome Care Provider</u></b>	
<b>Number of Activities/Facilities licensed:</b> <u>11</u>	<b>Number Licensed Units:</b> <u>- 11</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
---	---	-------------------

<b>BAYVIEW MANOR</b> 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 / 05/31/2018	170
--	--	-----

Licensed Beds: Nursing Home: 170 Institutional Nursing Home: 0

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

Certifications:None

<b>BROAD CREEK CARE CENTER SKILLED NURSING</b> 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	25
--	--	----

Licensed Beds: Nursing Home: 25 Institutional Nursing Home: 0

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

Certifications:None

<b>FRASER HEALTH CARE</b> 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

<b>LIFE CARE CENTER OF HILTON HEAD</b> 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 / 05/31/2018	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 Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
---	---	-------------------

NHC HEALTHCARE BLUFFTON 3039 OKATIE HWY BLUFFTON, SC 29909-5101 FAC.#:843-705-8220 YOKLEY STEVEN T PH#: 843-705-8220 Facility Email: SYOKLEY@NHCBLUFFTON.COM	Beaufort / Limited Liability 3039 OKATIE HWY BLUFFTON, SC 29909-5101 NHC HEALTHCARE/BLUFFTON LLC NCF-0958 / 01/31/2018	120
--	--	-----

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 87 BIRDSONG WAY HILTON HEAD ISLAND, SC 29926-1365 FAC.#:843-689-7000 GRIFFIN-BUKOSKEY SANDRA PH#: 843-689-7077 Facility Email: SBUKOSKEY@THECYPRESS.COM	Beaufort / Limited Liability Limited 87 BIRDSONG WAY HILTON HEAD ISLAND, SC 29926-1365 CYPRESS OF HILTON HEAD ISLAND ASSOCIATES LP NCF-0576 / 04/30/2018	77
---	--	----

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

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

Certifications:None

<b>Totals For Facility/License Type: <u>Nursing Home</u></b>	
Number of Activities/Facilities licensed: <u>6</u>	Number Licensed Units: <u>513</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#: 843-473-3333	Beaufort / Limited Liability 2200 MAIN ST HILTON HEAD ISLAND, SC 29926 SUNSPIRE HEALTH HILTON HEAD LLC ITP-0035 / 08/31/2018	33
<b>Facility Email:</b> LDECKARD@SUNSPIREHEALTH.COM <b>Licensed Beds:</b> Medical Detox: 0 Social Detox: 12 Res. Treatment Program: 21		

<b>Totals For Facility/License Type: <u>PSAD Inpatient</u></b>	
<b>Number of Activities/Facilities licensed:</b> <u>1</u>	<b>Number Licensed Units:</b> <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
<b>BEAUFORT COUNTY ALCOHOL AND DRUG ABUSE DEPARTMENT</b> 1905 DUKE ST STE 270 BEAUFORT, SC 29902-4403 FAC.#:843-255-6000 BOYNE JR DOUGLAS H PH#: 843-255-6000 Facility Email: BRAY@BCGOV.NET	Beaufort / County PO BOX 311 BEAUFORT, SC 29901-0311 BEAUFORT COUNTY ALCOHOL AND DRUG ABUSE DEPARTMENT (BOARD) OTP-0018 / 07/31/2018	2

Certifications:None

<b>SUNSPIRE HEALTH HILTON HEAD OUTPATIENT</b> 2200 MAIN ST HILTON HEAD ISLAND, SC 29926-1667 FAC.#:843-473-3324 LAPOINTE DANIELLE PH#: 843-473-3333 Facility Email: LDECKARD@SUNSPIREHEALTH.COM	Beaufort / Limited Liability 2200 MAIN ST HILTON HEAD ISLAND, SC 29926 SUNSPIRE HEALTH HILTON HEAD LLC OTP-0123 / 08/31/2018	1
---	--	---

Certifications:None

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

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
<b>BLUFFTON DIALYSIS</b> 101 OKATIE CENTER BLVD S BLUFFTON, SC 29909 FAC.#:843-706-9900 CONRAD RN SHANE EDWARD PH#: 843-706-9900 Facility Email: LASHUNDRA.IVERY@DAVITA.COM	Beaufort / Limited Liability 5200 VIRGINIA WAY, LICENSING AND CERTIFICATION BRENTWOOD, TN 37027-7569 SHOALS DIALYSIS LLC ERD-0209 / 02/28/2018	12
<p>Licensed Stations: Hemodialysis: 11 Peritoneal: 2</p>		
<b>DCI PORT ROYAL</b> 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 / 05/31/2018	31
<p>Licensed Stations: Hemodialysis: 30 Peritoneal: 3</p>		
<b>FMC DIALYSIS SERVICES-HILTON HEAD</b> 25 HOSPITAL CENTER BLVD STE 108, MEDICAL PAVILION HILTON HEAD ISLAND, SC 29926-2735 FAC.#:843-681-5840 KEMMERLIN MARION 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 / 07/31/2018	17
<p>Licensed Stations: Hemodialysis: 16 Peritoneal: 1</p>		
<b>FMC DIALYSIS SERVICES-LOW COUNTRY DIALYSIS</b> 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 / 05/31/2018	24
<p>Licensed Stations: Hemodialysis: 22 Peritoneal: 2</p>		

<b>Totals For Facility/License Type: <u>Renal Dialysis</u></b>	
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
<b>BEAUTY MARKS TATTOOS</b> 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 BEAUFORT, SC 29906-6724 GOTHIC PIERCING AND BEAUTY MARKS TATTOOS LLC <b>TF-0064 / 04/30/2018</b>	3
<b>DARK TIDE GALLERY</b> 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 <b>TF-0190 / 10/31/2017 (Renewal Pending)</b>	2
<b>INCREDIBLE INK</b> 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 <b>TF-0153 / 03/31/2018</b>	3
<b>ISLAND TATTOO COMPANY</b> 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 <b>TF-0057 / 10/31/2018</b>	5
<b>SUGAR SHACK CANVAS &amp; INK</b> 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 <b>TF-0162 / 10/31/2018</b>	3

<b>Totals For Facility/License Type: <u>Tattoo Facility</u></b>	
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>69</u>
Number Licensed Units : <u>2,132</u>	

Report Totals

Total Number of Activities/Facilities licensed: 69 Total Number Licensed Units: 2,132