

County: Berkeley

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

LOW COUNTRY ACTIVE DAY CENTER 104 SPRINGHALL DR GOOSE CREEK, SC 29445-5335 FAC.#:843-553-1805 GOODSON WHITNEY PH#: Facility Email: WGOODSON@ACTIVEDAY.COM	Berkeley / Corporation 6 NESHAMINY INTERPLEX DR STE 401 FEASTERVILLE TREVOSSE, PA 19053 ACSR INC ADC-0195 / 02/28/2019	97
---	--	----

Number of Participants: 97

Totals For Facility/License Type: Adult Day Care

Number of Activities/Facilities licensed: 1 Number Licensed Units: 97

County: Berkeley

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

ROPER HOSPITAL AMBULATORY SURGERY BERKELEY	Berkeley / Non-Profit Corporation	4
730 STONEY LANDING RD	730 STONEY LANDING RD	
MONCKS CORNER, SC 29461-2948 FAC.#:843-719-5585	MONCKS CORNER, SC 29461-2948	
MANNARINO SHERRIE PH#:	ROPER HOSPITAL INC	
Facility Email: SHERRIE.MANNARINO@RSFH.COM	ASF-0063 / 02/28/2019	

Operating Rooms: 3 Procedure Rooms: 1 Endoscopy Rooms: 0

Totals For Facility/License Type: Ambulatory Surgery

Number of Activities/Facilities licensed: 1 Number Licensed Units: 4

County: Berkeley

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
PREMIER PIERCING 1111 N MAIN ST UNIT B SUMMERVILLE, SC 29483-7319 FAC.#:843-771-2903 LONSBERRY KARA PH#: 843-771-2903 Facility Email: PREMIERPIERCING@YAHOO.COM	Berkeley / Sole Proprietorship 1111 N MAIN ST STE B SUMMERVILLE, SC 29483-7319 LAZAR JAMES AND LONSBERRY KARA BP-0223 / 08/31/2018	1

Totals For Facility/License Type: Body Piercing

Number of Activities/Facilities licensed: 1 Number Licensed Units: 1

County: Berkeley

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
BLAKE AT CARNES CROSSROADS LLC 4015 2ND AVE SUMMERVILLE, SC 29486 FAC.#:843-376-3996 DAUGHERTY KATHRYN PH#: 843-376-3996 Facility Email: MICHAEL@CARDINALVENTURES.NET	Berkeley / Limited Liability 4015 2ND AVE SUMMERVILLE, SC 29486 BLAKE AT CARNES CROSSROADS CRC-1896 / 07/31/2018	114
Alzheimer Care:Yes Max # Resident:0	Alzheimer Unit: Yes Max # Beds: 40	
Certifications:None		
GOOSE CREEK MANOR #1 104 MARILYN ST GOOSE CREEK, SC 29445-3104 FAC.#:843-572-7442 DEDIOS LETICIA G PH#: 843-572-7442 Facility Email: GOOSECREEKMANOR@AOL.COM	Berkeley / Corporation 104 MARILYN ST GOOSE CREEK, SC 29445-3104 NL & JR INCORPORATED CRC-0639 / 06/30/2018	7
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
GOOSE CREEK MANOR #2 104 MARILYN ST GOOSE CREEK, SC 29445-3104 FAC.#:843-572-7442 DEDIOS LETICIA G PH#: 843-572-7442 Facility Email: GOOSECREEKMANOR@AOL.COM	Berkeley / Corporation 104 MARILYN ST GOOSE CREEK, SC 29445-3104 NL & JR INCORPORATED CRC-0762 / 04/30/2019	36
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
NELSON'S RESIDENTIAL CARE 2504 HWY 311 CROSS, SC 29436-3339 FAC.#:843-753-7098 NELSON LUCILLE S PH#: 843-753-7098 Facility Email: LNELSON2527@HOTMAIL.COM	Berkeley / Sole Proprietorship 2504 HWY 311 CROSS, SC 29436-3339 LUCILLE S NELSON CRC-2004 / 11/30/2018	5
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
NEW BEGINNINGS OF PINEVILLE 212 MITCHELLBAY LN PINEVILLE, SC 29468-3200 FAC.#:843-351-2240 RAVENELL HELEN W PH#: 843-351-2240 Facility Email: NEW.BEGINNINGS@TDS.NET	Berkeley / Sole Proprietorship 212 MITCHELLBAY LN PINEVILLE, SC 29468-3200 RAVENELL HELEN W CRC-1521 / 04/30/2019	4
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		

County: Berkeley

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
OAKVIEW BOARDING HOME 1818 S LIVE OAK DR MONCKS CORNER, SC 29461-7216 FAC.#:843-761-3273 BIASCAN ERLINDA M PH#: 843-761-3273 Facility Email: BIASCANA@YAHOO.COM	Berkeley / Corporation 1818 S LIVE OAK DR MONCKS CORNER, SC 29461-7216 OAKVIEW BOARDING HOME INC CRC-1153 / 04/30/2019	10
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
PINEWOOD PLACE 101 CENTENNIAL BLVD GOOSE CREEK, SC 29445-7079 FAC.#:843-569-2520 GREENWOOD RAE-LYNN PH#: 843-569-2520 Facility Email: ALCLICENSE@ENLIVANT.COM	Berkeley / 330 N WABASH AVE STE 3700 CHICAGO, IL 60611-7605 PINEWOOD AID OPCO LLC CRC-1406 / 11/30/2018	44
Alzheimer Care:Yes Max # Resident:4	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
QUALITY CARE RESIDENTIAL HOME 107 ETLING AVE GOOSE CREEK, SC 29445-3001 FAC.#:843-863-0209 DOTTERY VERNELL PH#: 843-863-0209 Facility Email: VERNELL@QUALITYCAREOFSC.COM	Berkeley / PO BOX 129 CHINA GROVE, NC 28023 QUALITY CARE RESIDENTIAL HOME SC LLC CRC-0715 / 01/31/2019	29
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
SUMMIT PLACE OF DANIEL ISLAND 320 SEVEN FARMS DR DANIEL ISLAND, SC 29492-7532 FAC.#:843-884-4104 WOOLLEY KATHRYN D PH#: 843-884-4104 Facility Email: LICENSING@5SSL.COM	Berkeley / Limited Liability 400 CENTRE ST NEWTON, MA 02458-2094 SNH SE DANIEL ISLAND TENANT LLC CRC-1282 / 05/31/2019	76
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: _____ 9	Number Licensed Units: _____ 325

County: Berkeley

Facility Type: Habilitation R15

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
CONIFER I COMMUNITY RESIDENCE 110 RESINWOOD DR MONCKS CORNER, SC 29461 FAC. #: 843-761-0300 WILSON SUSAN PH#: 843-761-0300 Facility Email: ASHOOK@BCISERVICES.ORG	Berkeley / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR15-0119 / 05/31/2019	8
CONIFER II COMMUNITY RESIDENCE 114 RESINWOOD DR MONCKS CORNER, SC 29461 FAC. #: 843-761-0300 WILSON SUSAN PH#: 843-761-0300 Facility Email: ASHOOK@BCISERVICES.ORG	Berkeley / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR15-0120 / 05/31/2019	8

Totals For Facility/License Type: <u>Habilitation R15</u>	
Number of Activities/Facilities licensed: <u>2</u>	Number Licensed Units: <u>16</u>

County: Berkeley

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
PRUITTHEALTH HOSPICE-CHARLESTON 139 GATEWAY DR LADSON, SC 29456 FAC.#:843-573-8623 PH#:	Berkeley / Corporation 171 CHURCH ST STE 210 CHARLESTON, SC 29401 PRUITTHEALTH HOSPICE INC HPC-0114 / 11/30/2018	15
Facility Email: LDANKO@PRUITTHEALTH.COM		
Counties Served: Aiken, Allendale, Bamberg, Barnwell, Berkeley, Calhoun, Charleston, Clarendon, Colleton, Dorchester, Edgefield, Lexington, McCormick, Orangeburg, Richland		

Totals For Facility/License Type: <u>Hospice Program</u>	
Number of Activities/Facilities licensed: <u>1</u>	Number Licensed Units: <u>15</u>

County: Berkeley

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
AISHA'S DIVINE SETTING HOME CARE 320 CIRCADAS SONG DR MONCKS CORNER, SC 29461 FAC.#:855-277-8885 BROUGHTON AISHA PH#: 843-568-9812 Facility Email: AISHASDIVINESETTING@GMAIL.COM	Berkeley / Limited Liability AISHA'S DIVINE SETTING HOME CARE LLC IHCP-0654 / 03/31/2019	- 1
AN ANGELS TOUCH LLC 219 N HWY 52 STE J MONCKS CORNER, SC 29461-3926 FAC.#:843-291-3355 PETERSON KIMBERLY L PH#: 843-291-3355 Facility Email: MFRANK@ANANGELSTOUCH.BIZ	Berkeley / Limited Liability PO BOX 938 MONCKS CORNER, SC 29461-0938 AN ANGELS TOUCH LLC IHCP-0338 / 08/31/2018	- 1
COMPLETE CARE 204 SUMMER VIEW RD SUMMERVILLE, SC 29486 FAC.#:631-921-5886 PH#: Facility Email: COMPLETECARE@MAIL.COM	Berkeley / Sole Proprietorship 204 SUMMER VIEW RD SUMMERVILLE, SC 29483 BAILEY LAURA IHCP-0400 / 12/31/2018	- 1
ICAREDEEPLY 207 MARKET HALL ST MONCKS CORNER, SC 29461 FAC.#:843-761-2451 PH#: Facility Email: JEREMIAHHENDERSON40@YAHOO.COM	Berkeley / Limited Liability 207 MARKET HALL ST MONCKS CORNER, SC 29461 ICAREDEEPLY LLC IHCP-0732 / 07/31/2018	- 1
PALMETTO HOME CARE SPECIALISTS LLC 114 SPRINGHALL DR GOOSE CREEK, SC 29445 FAC.#:843-452-6739 PH#: Facility Email: DAVETHEDPM@YAHOO.COM	Berkeley / Limited Liability 114 SPRINGHALL DR GOOSE CREEK, SC 29445 PALMETTO HOME CARE SPECIALISTS LLC IHCP-0084 / 03/31/2018 (Renewal Pending)	- 1
PATHWAYS HOME CARE SERVICES 3266 PINWOOD DR LADSON, SC 29456 FAC.#:843-970-8290 PH#: Facility Email: PATHWAYSHOMECARESERVICES@GMAIL.COM	Berkeley / Limited Liability 3266 PINWOOD DR LADSON, SC 29456 PATHWAYS HOME CARE SERVICES LLC IHCP-0677 / 07/31/2018	- 1

Totals For Facility/License Type: <u>Inhome Care Provider</u>	
Number of Activities/Facilities licensed: _____	Number Licensed Units: _____
6	- 6

County: Berkeley

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	

HEARTLAND HEALTH AND REHABILITATION CARE CENTER-HANAHAN	Berkeley / Limited Liability	135
1800 EAGLE LANDING BLVD	333 N SUMMIT ST, LICENSURE SUPPORT	
HANAHAN, SC 29410-8517 FAC.#:843-553-0656	TOLEDO, OH 43604-1531	
GREEN DWIGHT PH#: 843-553-0656	HEARTLAND-CHARLESTON OF HANAHAN SC LLC	
Facility Email: 4015ADMIN@HCR-MANORCARE.COM	NCF-0526 / 12/31/2018	
Licensed Beds: Nursing Home: 135	Institutional Nursing Home: 0	

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

Certifications:None

LAKE MOULTRIE NURSING HOME	Berkeley / District	88
1038 MCGILL LN	PO BOX 1108	
SAINT STEPHEN, SC 29479-3196 FAC.#:843-567-2307	SAINT STEPHEN, SC 29479-1108	
DRIGGERS JOANN C PH#: 843-567-2307	CLARENDON HOSPITAL DISTRICT	
Facility Email: JDRIGGERS@CLARENDONLTC.ORG	NCF-0738 / 12/31/2018	

Licensed Beds: Nursing Home: 88 Institutional Nursing Home: 0

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

Certifications:None

PRUITTHEALTH-MONCKS CORNER	Berkeley / Limited Liability	132
505 S LIVE OAK DR	505 S LIVE OAK DR	
MONCKS CORNER, SC 29461-3554 FAC.#:843-761-8368	MONCKS CORNER, SC 29461-3554	
KRAFT STACEY PH#: 843-761-8368	PRUITTHEALTH-MONCKS CORNER LLC	
Facility Email: CFLANSBURG@PRUITTHEALTH.COM	NCF-0943 / 10/31/2018	

Licensed Beds: Nursing Home: 132 Institutional Nursing Home: 0

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

Certifications:None

RETREAT AT WELLMORE OF DANIEL ISLAND	Berkeley / Limited Liability	60
580 ROBERT DANIEL DR	3530 TORINGDON WAY STE 204	
CHARLESTON, SC 29492 FAC.#:843-566-1000	CHARLOTTE, NC 28277-3431	
SEEDS ASHLEY PH#: 843-566-1000	WELLMORE OF DANIEL ISLAND LLC	
Facility Email: BTHOMPSON@MAXWELL-GROUP.COM	NCF-0965 / 03/31/2019	

Licensed Beds: Nursing Home: 60 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: _____	4 Number Licensed Units: _____
	415

County: Berkeley

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
ERNEST E KENNEDY CENTER 306 AIRPORT DR MONCKS CORNER, SC 29461-2629 FAC.#:843-761-8272 TILGHMAN JR JEROME E PH#: 843-761-8272 Facility Email: JTILGHMAN@EKCENTER.ORG	Berkeley / Non-Profit Corporation 306 AIRPORT DR MONCKS CORNER, SC 29461-2629 ERNEST E KENNEDY CENTER (INC) OTP-0025 / 06/30/2018	2

Certifications:None

TRUE HEART COUNSELING 255 N HWY 52, HAYNES OFFICE PLAZA STE 1 MONCKS CORNER, SC 29461-3927 FAC.#:843-761-1444 ALEXANDER DARREN L PH#: 843-761-1444 Facility Email: TRUEHEARTCOUNSELING@GMAIL.COM	Berkeley / Limited Liability 255 N HWY 52, HAYNES OFFICE PLAZA STE 1 MONCKS CORNER, SC 29461-3927 TRUE HEART COUNSELING LLC OTP-0101 / 08/31/2018	1
---	---	---

Certifications:None

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

County: Berkeley

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
DCI GOOSE CREEK 98 HAMLET CIR GOOSE CREEK, SC 29445-8100 FAC.#:843-863-8633 SALVADOR IMELDA P PH#: Facility Email: SUSAN.WATTS@DCIINC.ORG	Berkeley / Non-Profit Corporation 1411 KING ST CHARLESTON, SC 29403-3008 DIALYSIS CLINIC INC ERD-0172 / 09/30/2018	17
Licensed Stations: Hemodialysis: 17 Peritoneal: 0		
FRESENIUS MEDICAL CARE LOWCOUNTRY HOME DIALYSIS 1980 N MAIN ST SUMMERVILLE, SC 29483-7812 FAC.#:843-695-0061 WESTBURY ANGELA PH#: 843-695-0061 Facility Email: ANNE.DURANT@FMC-NA.COM	Berkeley / Limited Liability 1980 N MAIN ST SUMMERVILLE, SC 29483-7812 FRESENIUS MEDICAL CARE GOOSE CREEK HOME DIALYSIS LLC ERD-0218 / 02/28/2019	6
Licensed Stations: Hemodialysis: 0 Peritoneal: 6		
FRESENIUS MEDICAL CARE MONCKS CORNER 112 MCCORMICK CIR MONCKS CORNER, SC 29461-3152 FAC.#:843-899-4953 ZUNIGA SHALES PH#: 843-899-4953 Facility Email: ANNE.DURANT@FMC-NA.COM	Berkeley / Limited Liability 112 MCCORMICK CIR MONCKS CORNER, SC 29461-3152 RAI CARE CENTERS OF SOUTH CAROLINA I LLC ERD-0152 / 11/30/2018	25
Licensed Stations: Hemodialysis: 25 Peritoneal: 0		
GOOSE CREEK DIALYSIS 109 GREENLAND DR GOOSE CREEK, SC 29445-5354 FAC.#:843-377-1199 SINGLETARY RN CHERYL S PH#: 000-000-0000 Facility Email: LASHUNDRA.IVERY@DAVITA.COM	Berkeley / Corporation 5200 VIRGINIA WAY STE 400, LICENSING AND CERTIFICATION BRENTWOOD, TN 37027-7569 TOTAL RENAL CARE INC ERD-0164 / 09/30/2018	17
Licensed Stations: Hemodialysis: 17 Peritoneal: 0		

Totals For Facility/License Type: <u>Renal Dialysis</u>	
Number of Activities/Facilities licensed: _____ 4	Number Licensed Units: _____ 65

County: Berkeley

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
BLU GORILLA II TATTOO 105 EAGLE RD STE 3 GOOSE CREEK, SC 29445-5991 FAC.#:843-573-7341 DENNIS TIMOTHY A PH#: 843-789-2244 Facility Email: BLUGORILLA.ALYX@GMAIL.COM	Berkeley / Limited Liability 1409 KING ST CHARLESTON, SC 29403-3008 BLU GORILLA TATTOO INC TF-0018 / 12/31/2018	4
IVORY TIGER TATTOO 1905 N MAIN ST SUMMERVILLE, SC 29483-7820 FAC.#:843-821-8145 DWYER RAYMOND PH#: 843-821-8145 Facility Email: PONYCHICK78@AOL.COM	Berkeley / Limited Liability 1905 N MAIN ST SUMMERVILLE, SC 29483-7820 DIXIE DERMAGRAPHIC DESIGNS LLC TF-0067 / 05/31/2018 (Renewal Pending)	3
MOTORCITY INK 2072 N MAIN ST SUMMERVILLE, SC 29483-7866 FAC.#:843-714-4042 WAKEFIELD JON W PH#: 843-714-4042 Facility Email: MOTORCITYINK@HOTMAIL.COM	Berkeley / Limited Liability 2072 N MAIN ST SUMMERVILLE, SC 29483-7866 MOTORCITY INK LLC TF-0154 / 04/30/2019	6
MYSTIC TIKI TATTOO & GALLERY 1204 N MAIN ST STE E SUMMERVILLE, SC 29483-7343 FAC.#:843-851-8287 REED JASON C PH#: 843-819-1003 Facility Email: JR9716@MSN.COM	Berkeley / 1204 N MAIN ST STE E SUMMERVILLE, SC 29483-7343 FLAMING TIKI LLC TF-0032 / 12/31/2018	4

Totals For Facility/License Type: <u>Tattoo Facility</u>	
Number of Activities/Facilities licensed: <u>4</u>	Number Licensed Units: <u>17</u>

Number of Activities/Facilities licensed in county of : <u>Berkeley</u>	# Lics: <u>35</u>
	Number Licensed Units : <u>952</u>

Report Totals

Total Number of Activities/Facilities licensed: 35 Total Number Licensed Units: 952