

County: Florence

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 |
|--|---|-------------------|
| JOHNSONVILLE ADULT DAY CARE CENTER 351 S MIDWAY HWY JOHNSONVILLE, SC 29555-6242 FAC.#:843-380-0777 ROBINSON RHONDA H PH#: 843-380-0777 Facility Email: JADC2011@YAHOO.COM | Florence / Limited Liability PO BOX 1118 JOHNSONVILLE, SC 29555-1118 JOHNSONVILLE ADULT DAY CARE CENTER LLC ADC-0296 / 03/31/2018 | 20 |
| Number of Participants: | | 20 |
| LAKE CITY ADULT DAY CARE 122 S ACLINE ST LAKE CITY, SC 29560-2633 FAC.#:843-394-8242 LYNCH ANTHONY PH#: 843-394-8242 Facility Email: LCADC 122@FTC-I.NET | Florence / Corporation 122 S ACLINE ST LAKE CITY, SC 29560-2633 LAKE CITY ADULT DAY CARE INC ADC-0197 / 03/31/2018 | 30 |
| Number of Participants: | | 30 |
| LAKE CITY COMMUNITY DAY SERVICES 411 S BLANDING ST LAKE CITY, SC 29560-3513 FAC.#:843-374-8088 JAMES EARLINE D PH#: 843-374-8088 Facility Email: GENESISIADULTDAYCARE@YAHOO.COM | Florence / Corporation PO BOX 517 LAKE CITY, SC 29560-0517 LAKE CITY COMMUNITY DAY SERVICES INC ADC-0257 / 08/31/2017 (Renewal Pending) | 50 |
| Number of Participants: | | 50 |
| MELVA'S ADULT DAY CARE SERVICES INC 817 W MAIN ST LAKE CITY, SC 29560-4401 FAC.#:843-374-2198 MYERS MELVA A PH#: 843-374-2198 Facility Email: MYERSMELV@YMAIL.COM | Florence / Corporation 817 W MAIN ST LAKE CITY, SC 29560-4401 MELVA'S DAYCARE INC ADC-0152 / 11/30/2018 | 34 |
| Number of Participants: | | 34 |
| NEW GENERATIONS ADULT DAY CENTER 2111 W JODY RD FLORENCE, SC 29501-2031 FAC.#:843-629-0103 BELISSARY JOHN C PH#: 843-629-0103 Facility Email: ANN@NEWGENERATIONSHC.COM | Florence / Corporation 2111 W JODY RD FLORENCE, SC 29501-2031 NEW GENERATIONS ADULT DAY CENTER OF FLORENCE INC ADC-0274 / 07/31/2018 | 181 |
| Number of Participants: | | 181 |
| PEE DEE ACTIVE DAY CENTER 2120 ENTERPRISE DR FLORENCE, SC 29501-1104 FAC.#:843-665-1919 HORVATH TRACY PH#: 843-665-1919 Facility Email: CROTHWELL@ACTIVEDAY.COM | Florence / Corporation 6 NESHAMINY INTERPLEX STE 401 TREVOSSE, PA 19053 ACTIVE SC ONE INC ADC-0235 / 03/31/2018 | 40 |
| Number of Participants: | | 40 |

County: Florence

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 |
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| SAVANNAH SENIORS 2620 ALLIGATOR RD EFFINGHAM, SC 29541-4313 FAC.#:843-662-7851 CANTY RALPH W PH#: 843-662-7851 Facility Email: JAMESGWEN60@GMAIL.COM | Florence / Corporation 2620 ALLIGATOR RD EFFINGHAM, SC 29541-4313 SAVANNAH SENIORS INC ADC-0219 / 04/30/2018 | 60 |
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Number of Participants: 60

Totals For Facility/License Type: Adult Day Care

Number of Activities/Facilities licensed: 7 Number Licensed Units: 415

County: Florence

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 |
|---|--|-------------------|
| FLORENCE SURGERY AND LASER CENTER 400 N CASHUA DR FLORENCE, SC 29501-2098 FAC.#:843-664-9398 SELTZER SAMUEL E PH#: 843-664-9393 Facility Email: MSTOKES@CCFS2020.COM | Florence / Ltd. Liability 400 N CASHUA DR FLORENCE, SC 29501-2098 FLORENCE SURGERY AND LASER CENTER LLC ASF-0070 / 03/31/2018 | 2 |
| Operating Rooms: 2 Procedure Rooms: 0 Endoscopy Rooms: 0 | | |
| MCLEOD REGIONAL MEDICAL CENTER OF THE PEE DEE SURGERY CENTER 1005 E CHEVES ST FLORENCE, SC 29506-2627 FAC.#:843-777-6452 SALEEBY MARIE PH#: 843-777-6452 Facility Email: MSALEEBY@MCLEODHEALTH.ORG | Florence / Non-Profit Corporation 604 E CHEVES ST FLORENCE, SC 29506-2627 MCLEOD REGIONAL MEDICAL CENTER OF THE PEE DEE INC ASF-0080 / 09/30/2018 | 2 |
| Operating Rooms: 2 Procedure Rooms: 0 Endoscopy Rooms: 0 | | |
| PHYSICIANS SURGERY CENTER OF FLORENCE 1580 FREEDOM BLVD STE 300 FLORENCE, SC 29505-6074 FAC.#:843-674-6700 MALAER GARY PH#: 843-674-6700 Facility Email: RHARDWICK@CAROLINASHOSPITAL.COM | Florence / Corporation PO BOX 100550 FLORENCE, SC 29501-0550 QHG OF SOUTH CAROLINA INC ASF-0107 / 08/31/2018 | 8 |
| Operating Rooms: 4 Procedure Rooms: 2 Endoscopy Rooms: 2 | | |

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| Totals For Facility/License Type: <u>Ambulatory Surgery</u> | |
| Number of Activities/Facilities licensed: <u>3</u> | Number Licensed Units: <u>12</u> |

County: Florence

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 |
|---|---|-------------------|
| HEAT STREET 2421 2ND LOOP RD STE C FLORENCE, SC 29501-6191 FAC.#:843-661-0602 MITCHELL LLOYD PH#: 843-661-0602 | Florence / Ltd. Liability 2421 2ND LOOP RD STE C FLORENCE, SC 29501-6191 HEAT STREET LLC | 1 |
| Facility Email: LLOYD@HEATSTREET.COM | BP-0020 / 06/30/2018 | |

Totals For Facility/License Type: Body Piercing

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

County: Florence

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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| ACLIN PLACE 200 S ACLIN ST LAKE CITY, SC 29560-2635 FAC.#:843-394-5677 UWAGBAI LINDA G PH#: 843-394-5677 Facility Email: GBARNES@FCDSN.ORG | Florence / State 1211 E NATIONAL CEMETERY RD, FCDSNB FLORENCE, SC 29506-3240 FLORENCE COUNTY DISABILITIES AND SPECIAL NEEDS BOARD CRC-1257 / 01/31/2019 | 8 |
| Alzheimer Care:No Max # Resident:0 | Alzheimer Unit: No Max # Beds: 0 | |
| Certifications:None | | |
| BEARD RESIDENTIAL CARE FACILITY #1 123 N WARREN ST TIMMONSVILLE, SC 29161-1443 FAC.#:843-346-5272 BEARD CATHERINE H PH#: 843-346-5272 Facility Email: BEARDSRCF@YAHOO.COM | Florence / Sole Proprietorship 123 N WARREN ST TIMMONSVILLE, SC 29161-1443 CATHERINE H BEARD CRC-0140 / 04/30/2018 | 10 |
| Alzheimer Care:No Max # Resident:0 | Alzheimer Unit: No Max # Beds: 0 | |
| Certifications:None | | |
| BEARD RESIDENTIAL CARE FACILITY #2 301 N ORANGE ST TIMMONSVILLE, SC 29161-1435 FAC.#:843-346-5272 BEARD CATHERINE H PH#: 843-346-5272 Facility Email: BEARDSRCF@YAHOO.COM | Florence / Sole Proprietorship 123 N WARREN ST TIMMONSVILLE, SC 29161-1443 CATHERINE H BEARD CRC-0082 / 04/30/2018 | 8 |
| Alzheimer Care:No Max # Resident:0 | Alzheimer Unit: No Max # Beds: 0 | |
| Certifications:None | | |
| BEARD'S RESIDENTIAL CARE FACILITY #3 201 N BROCKINGTON ST TIMMONSVILLE, SC 29161-1503 FAC.#:843-346-2287 BEARD JR JAMES PH#: 843-346-2287 Facility Email: BEARDSRCF@YAHOO.COM | Florence / Sole Proprietorship 123 N WARREN ST TIMMONSVILLE, SC 29161-1443 CATHERINE H BEARD CRC-0331 / 12/31/2018 | 8 |
| Alzheimer Care:No Max # Resident:0 | Alzheimer Unit: No Max # Beds: 0 | |
| Certifications:None | | |
| BURGESS RESIDENTIAL CARE #3 615 W EVANS ST FLORENCE, SC 29501-3409 FAC.#:843-665-4940 BURGESS SANDY PH#: 843-665-4940 Facility Email: SANDYBURGESS98@YAHOO.COM | Florence / Sole Proprietorship PO BOX 6023 FLORENCE, SC 29502-6023 DELLAVISION LLC CRC-1913 / 08/31/2018 | 9 |
| Alzheimer Care:No Max # Resident:0 | Alzheimer Unit: No Max # Beds: 0 | |
| Certifications:None | | |

County: Florence

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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| BURGESS RESIDENTIAL CARE FACILITY 2591 S BREHENAN DR FLORENCE, SC 29505-6203 FAC.#:843-665-6843 BURGESS SANDY M PH#: 843-665-6843 Facility Email: SANDYBURGESS98@YAHOO.COM | Florence / Sole Proprietorship PO BOX 6023 FLORENCE, SC 29502-6023 SANDY BURGESS CRC-0925 / 04/30/2018 | 9 |
| Alzheimer Care:No Max # Resident:0 | Alzheimer Unit: No Max # Beds: 0 | |
| Certifications:None | | |
| CAROLINA PLACE 240 CHARLES ST LAKE CITY, SC 29560-2161 FAC.#:843-394-5707 UWAGBAI LINDA G PH#: 843-394-5707 Facility Email: LUWAGBAI@FCDSN.ORG | Florence / State 1211 E NATIONAL CEMETERY RD, FLORENCE COUNTY DSNB FLORENCE, SC 29506-3240 FLORENCE COUNTY DISABILITIES AND SPECIAL NEEDS BOARD CRC-1258 / 01/31/2019 | 8 |
| Alzheimer Care:No Max # Resident:0 | Alzheimer Unit: No Max # Beds: 0 | |
| Certifications:None | | |
| CAROLINIAN 718 S DARGAN ST FLORENCE, SC 29506-2559 FAC.#:843-665-9314 HUMPHRIES DEBORAH KAY PH#: 843-665-9314 Facility Email: DEBBIE.HUMPHRIES@RHF.ORG | Florence / Corporation 911 N STUDEBAKER RD LONG BEACH, CA 90815-4900 FLORENCE RHF HOUSING INC CRC-0468 / 04/30/2018 | 38 |
| Alzheimer Care:Yes Max # Resident:10 | Alzheimer Unit: No Max # Beds: 0 | |
| Certifications:None | | |
| CARRIAGE HOUSE SENIOR LIVING OF FLORENCE 739 S PARKER DR FLORENCE, SC 29501-6062 FAC.#:843-661-6655 BENSON GINGER A PH#: 843-661-6655 Facility Email: CARRIAGEFLORENCE@GMAIL.COM | Florence / 201 S MCPHERSON CHURCH RD STE 228 FAYETTEVILLE, NC 28301 CARRIAGE HOUSE SENIOR LIVING OF FLORENCE INC CRC-1590 / 01/31/2019 | 80 |
| Alzheimer Care:No Max # Resident:0 | Alzheimer Unit: No Max # Beds: 0 | |
| Certifications:None | | |
| ELMCROFT OF FLORENCE 3006 HOFFMEYER RD FLORENCE, SC 29501-7551 FAC.#:843-292-0012 FLOYD NICA K PH#: 843-292-0012 Facility Email: NFLOYD@ELMCROFT.COM | Florence / Ltd. Liability 700 N HURSTBOURNE PKWY STE 200 LOUISVILLE, KY 40222 EC FLORENCE OPERATIONS LLC CRC-1422 / 10/31/2018 | 82 |
| Alzheimer Care:Yes Max # Resident:38 | Alzheimer Unit: Yes Max # Beds: 38 | |
| Certifications:None | | |

County: Florence

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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| EVELYN'S RESIDENTIAL CARE FACILITY 162 S MCQUEEN ST FLORENCE, SC 29501-4439 FAC.#:843-665-5751 CUSAAC EVELYN R PH#: 843-665-5751 Facility Email: EVELYNCUSAAC@YAHOO.COM | Florence / Sole Proprietorship PO BOX 5846 FLORENCE, SC 29502-5846 EVELYN R CUSAAC CRC-1164 / 05/31/2018 | 9 |
| Alzheimer Care:No Max # Resident:0 | Alzheimer Unit: No Max # Beds: 0 | |
| Certifications:None | | |
| FLORENCE PLACE 1938 MOUNTAIN LAUREL CT FLORENCE, SC 29505-6084 FAC.#:843-665-7978 OWENS ALICIA B PH#: 843-665-7978 Facility Email: ACQUISITIONS@ENLIVANT.COM | Florence / Limited Liability 330 N WABASH AVE STE 3700 CHICAGO, IL 60611-7605 FLORENCE BG OPCO LLC CRC-1990 / 10/31/2018 | 90 |
| Alzheimer Care:Yes Max # Resident:11 | Alzheimer Unit: Yes Max # Beds: 13 | |
| Certifications:None | | |
| GENE'S RESIDENTIAL CARE #1 607 W SUMTER ST FLORENCE, SC 29501-2458 FAC.#:843-662-2529 JONES CASSIE T PH#: 843-662-2529 Facility Email: JOHNATHANCAM06@ICLOUD.COM | Florence / Sole Proprietorship PO BOX 15101 FLORENCE, SC 29506-0101 GENE E JONES CRC-0431 / 05/31/2018 | 6 |
| Alzheimer Care:No Max # Resident:0 | Alzheimer Unit: No Max # Beds: 0 | |
| Certifications:None | | |
| GENE'S RESIDENTIAL CARE FACILITY #2 2385 PAMPLICO HWY FLORENCE, SC 29505-7515 FAC.#:843-407-4580 JONES GENE E PH#: 843-407-4580 Facility Email: JOHNATHANCAM06@ICLOUD.COM | Florence / Corporation PO BOX 15101 FLORENCE, SC 29506-0101 GENCASCO INC CRC-1479 / 06/30/2018 | 47 |
| Alzheimer Care:No Max # Resident:0 | Alzheimer Unit: No Max # Beds: 0 | |
| Certifications:None | | |
| GENE'S RESIDENTIAL CARE FACILITY #3 1312 W EVANS ST FLORENCE, SC 29501-3324 FAC.#:843-662-2529 JONES CASSIE T PH#: 843-662-2529 Facility Email: JOHNATHANCAM06@ICLOUD.COM | Florence / Sole Proprietorship PO BOX 15101 FLORENCE, SC 29506-0101 GENE E JONES CRC-0482 / 02/28/2018 | 9 |
| Alzheimer Care:No Max # Resident:0 | Alzheimer Unit: No Max # Beds: 0 | |
| Certifications:None | | |

County: Florence

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 |
|--|---|-------------------|
| HANNAH RESIDENTIAL MANOR INC 3750 SHEMINALLY RD PAMPLICO, SC 29583-5700 FAC.#:843-493-0001 HART PATRICIA W PH#: 843-493-0001 Facility Email: JADC2011@YAHOO.COM | Florence / Limited Liability 3750 SHEMINALLY RD PAMPLICO, SC 29583-5700 HART'S RENTAL MANAGEMENT COMPANY LLC CRC-0712 / 05/31/2018 | 48 |
| Alzheimer Care:No Max # Resident:0 | Alzheimer Unit: No Max # Beds: 0 | |
| Certifications:None | | |
| JOHNSONVILLE ADULT CARE SERVICES 351 S MIDWAY HWY JOHNSONVILLE, SC 29555-6242 FAC.#:843-380-0777 ROBINSON RHONDA H PH#: 843-380-0777 Facility Email: JADC2011@YAHOO.COM | Florence / Ltd. Liability PO BOX 1118 JOHNSONVILLE, SC 29555-1118 JOHNSONVILLE ADULT CARE SERVICES LLC CRC-1530 / 11/30/2018 | 22 |
| Alzheimer Care:No Max # Resident:0 | Alzheimer Unit: No Max # Beds: 0 | |
| Certifications:None | | |
| PADD-WREN HOME 2350 REGIONAL RD FLORENCE, SC 29501-7028 FAC.#:843-673-1005 TUMBLESON KIMBERLY PH#: 843-673-1005 Facility Email: KIMBERLYTUMBLESON2014@YAHOO.COM | Florence / Non-Profit Corporation PO BOX 5534 FLORENCE, SC 29502-5534 PRESBYTERIAN AGENCY FOR THE DEVELOPMENTALLY DISABLED INC CRC-1451 / 07/31/2018 | 6 |
| Alzheimer Care:No Max # Resident:0 | Alzheimer Unit: No Max # Beds: 0 | |
| Certifications:None | | |
| PEE DEE GARDENS 3117 W PALMETTO ST FLORENCE, SC 29501 FAC.#:843-667-6699 FLICK JOANN EVANS PH#: 843-667-6699 Facility Email: JFLICK@DEPAUL.ORG | Florence / 3117 W PALMETTO ST FLORENCE, SC 29501 DEPAUL ADULT CARE COMMUNITIES INC CRC-1391 / 05/31/2018 | 80 |
| Alzheimer Care:Yes Max # Resident:21 | Alzheimer Unit: Yes Max # Beds: 22 | |
| Certifications:None | | |
| PRESBYTERIAN COMMUNITIES OF SOUTH CAROLINA-FLORENCE 2350 W LUCAS ST FLORENCE, SC 29501-1201 FAC.#:843-665-2222 LILLY ORPHA LORETTA PH#: 843-665-2222 Facility Email: LORETTA.LILLY@PRESHOMESC.ORG | Florence / 2350 W LUCAS ST FLORENCE, SC 29501-1201 PRESBYTERIAN COMMUNITIES OF SOUTH CAROLINA CRC-0242 / 09/30/2018 | 47 |
| Alzheimer Care:Yes Max # Resident:6 | Alzheimer Unit: Yes Max # Beds: 13 | |
| Certifications:None | | |

County: Florence

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 |
|---|--|-------------------|
| VICTORIAN HOME 313 WARLEY ST FLORENCE, SC 29501-4730 FAC.#:843-664-3090 NWANKUDU ADA O PH#: 803-664-3090 Facility Email: ANWANKUDU@YAHOO.COM | Florence / Sole Proprietorship 1160 BERKLEY AVE FLORENCE, SC 29505-3006 ADA O NWANKUDU CRC-1487 / 04/30/2018 | 5 |
| Alzheimer Care:No Max # Resident:0 | Alzheimer Unit: No Max # Beds: 0 | |

Certifications:None

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| WESLEYAN SUITES 2100 TWIN CHURCH RD FLORENCE, SC 29501-8200 FAC.#:843-664-0700 TABOR TERESSA L PH#: 843-664-0700 Facility Email: TTABOR@METHODIST-MANOR.COM | Florence / Non-Profit Corporation 2100 TWIN CHURCH RD FLORENCE, SC 29501-8200 UNITED METHODIST MANOR OF THE PEE DEE CRC-0662 / 12/31/2017 (Renewal Pending) | 95 |
| Alzheimer Care:Yes Max # Resident:12 | Alzheimer Unit: Yes Max # Beds: 12 | |

Certifications:None

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| Totals For Facility/License Type: <u>Community Residential Care Facility</u> | |
| Number of Activities/Facilities licensed: <u>22</u> | Number Licensed Units: <u>724</u> |

County: Florence

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 |
|---|--|-------------------|
| CEDARS 123 W FIFTH AVE PAMPLICO, SC 29583 FAC.#:843-667-5007 HAYES ASHLEY PH#: 843-667-5007 Facility Email: DJOHNSON@FCDSN.ORG | Florence / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR15-0127 / 08/31/2018 | 8 |
| FLORENCE COMMUNITY RESIDENCE 511 CLYDE ST FLORENCE, SC 29506-3011 FAC.#:843-667-5007 ROBINSON JAMES DAVID PH#: 843-667-5007 Facility Email: DJOHNSON@FCDSN.ORG | Florence / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR15-0025 / 03/31/2018 | 8 |
| JOHNSONVILLE HAMPTON PLACE COMMUNITY RESIDENCE 333 S HAMPTON AVE JOHNSONVILLE, SC 29555 FAC.#:843-667-5007 MILES BRANDI S PH#: 843-667-5007 Facility Email: DJOHNSON@FCDSN.ORG | Florence / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR15-0161 / 11/30/2018 | 8 |
| MAGNOLIA PLACE 514 E MAIN ST OLANTA, SC 29114 FAC.#:843-667-5007 BRADLEY MARY PH#: 843-667-5007 Facility Email: DJOHNSON@FCDSN.ORG | Florence / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR15-0126 / 07/31/2018 | 8 |
| OAKS 108 N PINCKNEY ST TIMMONSVILLE, SC 29161-1449 FAC.#:843-667-5007 ROBISON JAMES DAVID PH#: 843-667-5007 Facility Email: DJOHNSON@FCDSN.ORG | Florence / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR15-0128 / 09/30/2018 | 8 |

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| Totals For Facility/License Type: <u>Habilitation R15</u> | |
| Number of Activities/Facilities licensed: _____ 5 | Number Licensed Units: _____ 40 |

County: Florence

Facility Type: Habilitation R16

| 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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| MULBERRY PARK UNITS 301-306 714 E NATIONAL CEMETERY RD FLORENCE, SC 29506-3230 FAC.#:843-664-2600 ALLEN KATHRYN PH#: 843-664-2600 Facility Email: JHITCHMAN@DDSN.SC.GOV | Florence / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR16-0141 / 11/30/2018 | 85 |
| PECAN LANE BUILDINGS 201-205 714 E NATIONAL CEMETERY RD FLORENCE, SC 29506-3230 FAC.#:843-664-2600 ALLEN KATHRYN PH#: 843-664-2600 Facility Email: JHITCHMAN@DDSN.SC.GOV | Florence / State PO BOX 4706, DDSN C/O DAVID GOODELL COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR16-0119 / 08/31/2018 | 120 |

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| Totals For Facility/License Type: <u>Habilitation R16</u> | |
| Number of Activities/Facilities licensed: <u>2</u> | Number Licensed Units: <u>205</u> |

County: Florence

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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| CAROLINAS HOME HEALTH 121 E CEDAR ST FLORENCE, SC 29506-2576 FAC.#:843-629-6811 POSTON JOE A PH#: 843-629-6811 Facility Email: JOEPOSTON@HOMECAREFLORENCE.COM | Florence / Limited Liability 121 E CEDAR ST FLORENCE, SC 29506-2576 FLORENCE HOME CARE SERVICES LLC HHA-0109 / 12/31/2018 | 4 |
| Counties Served: Darlington, Dillon, Florence, Marlboro | | |
| 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: SKILLED NURSING | | |
| FLORENCE VISITING NURSES SERVICE 1605-C W PALMETTO ST FLORENCE, SC 29501-4198 FAC.#:843-667-1515 JACKSON-MEEKINS JONATHAN PH#: 843-667-1515 Facility Email: JJOHNSON@AHCE.NET | Florence / Corporation PO BOX 1485 WAYCROSS, GA 31502 FLORENCE VISITING NURSES SERVICE INC HHA-0064 / 01/31/2019 | 4 |
| Counties Served: Dillon, Florence, Lee, Marion | | |
| License Restrictions: | | |
| Physical Therapy: Y Speech Therapy: N Occupational Therapy: N Med. Social Services: N Home Health Aid: Y Medical Supplies/Appliances/Durable Medical Equipment: N Other: SKILLED NURSING | | |
| KINDRED AT HOME-PEE DEE 702 PAMPLICO HWY STE B FLORENCE, SC 29505-6199 FAC.#:843-317-9686 BLALOCK JANET PH#: 800-677-2244 Facility Email: JANET.COMBS@GENTIVA.COM | Florence / Limited Liability 12900 FOSTER ST STE 400 OVERLAND PARK, KS 66213-2696 CAPITAL CARE RESOURCES OF SOUTH CAROLINA LLC HHA-0009 / 12/31/2018 | 12 |
| Counties Served: Chesterfield, Clarendon, Darlington, Dillon, Florence, Georgetown, Horry, Lee, Marion, Marlboro, Sumter, Williamsburg | | |
| 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 | | |

County: Florence

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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| MCLEOD HOME HEALTH 300 S DARGAN ST FLORENCE, SC 29506-2537 FAC.#:843-777-3050 THIGPEN TRACIE PH#: 803-777-3050 Facility Email: TTHIGPEN@MCLEODHEALTH.ORG | Florence / Non-Profit Corporation 300 S DARGAN ST FLORENCE, SC 29506-2537 MCLEOD REGIONAL MEDICAL CENTER OF THE PEE DEE INC HHA-0085 / 05/31/2018 | 10 |
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Counties Served: Chesterfield, Clarendon, Darlington, Dillon, Florence, Horry, Lee, Marion, Marlboro, Sumter

License Restrictions:

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

Other:

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| METHODIST MANOR HOME HEALTH 2100 TWIN CHURCH RD FLORENCE, SC 29501-8200 FAC.#:843-664-0700 TABOR TERESSA L PH#: 843-664-0700 Facility Email: TTABOR@METHODIST-MANOR.COM | Florence / Non-Profit Corporation 2100 TWIN CHURCH RD FLORENCE, SC 29501-8200 UNITED METHODIST MANOR OF THE PEE DEE HHA-0207 / 02/28/2018 | 1 |
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Counties Served: Florence

License Restrictions: RESTRICTED TO CCRC RESIDENTS OF THE METHODIST MANOR RETIREMENT COMMUNITY

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:

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| PRUITTHEALTH HOME HEALTH-FLORENCE 609 S COIT ST FLORENCE, SC 29501-5222 FAC.#:843-662-8633 MOORE SHARON PH#: 843-662-8633 Facility Email: CDEFEE@PRUITTHEALTH.COM | Florence / Corporation 609 S COIT ST FLORENCE, SC 29501-5222 PRUITTHEALTH HOME HEALTH INC HHA-0233 / 02/28/2018 | 11 |
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Counties Served: Chesterfield, Clarendon, Darlington, Dillon, Florence, Georgetown, Horry, Lee, Marion, Marlboro, Williamsburg

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:

| | |
|--|---------------------------------|
| Totals For Facility/License Type: <u>Home Health</u> | |
| Number of Activities/Facilities licensed: _____ 6 | Number Licensed Units: _____ 42 |

County: Florence

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 |
|---|---|-------------------|
| MCLEOD HOSPICE HOUSE 1203 E CHEVES ST FLORENCE, SC 29502-0551 FAC.#:843-777-4700 HARRISON-PAVY RN JOAN PH#: 843-777-4700 Facility Email: JPAVY@MCLEODHEALTH.ORG | Florence / Non-Profit Corporation PO BOX 100551 FLORENCE, SC 29502-0551 MCLEOD REGIONAL MEDICAL CENTER OF THE PEE DEE INC HPF-0003 / 09/30/2018 | 24 |

Totals For Facility/License Type: Hospice Facility

Number of Activities/Facilities licensed: 1 Number Licensed Units: 24

County: Florence

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 |
|--|---|-------------------|
| AMEDISYS HOSPICE OF SOUTH CAROLINA 500 PAMPLICO HWY STE D FLORENCE, SC 29505-6051 FAC.#:843-656-0820 POSTON RN JENNIFER L PH#: 843-656-0820 Facility Email: JENNIFER.POSTON2@AMEDISYS.COM | Florence / Limited Liability 500 PAMPLICO HWY STE D FLORENCE, SC 29505-6051 AMEDISYS HOSPICE LLC HPC-0091 / 07/31/2018 | 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 | | |
| EMBRACE HOSPICE OF SOUTH CAROLINA 1831 W EVANS ST STE 315 FLORENCE, SC 29501-3300 FAC.#:843-332-2221 STRICKLAND ROBBIE PH#: 843-332-2221 Facility Email: KMCHUGH@EMBRACEHEALTHCARE.ORG | Florence / Limited Liability 1831 W EVANS ST STE 315 FLORENCE, SC 29501-3300 EMBRACE HOSPICE OF SOUTH CAROLINA LLC HPC-0141 / 08/31/2018 | 31 |
| Counties Served: Abbeville, Aiken, Beaufort, Berkeley, Calhoun, Charleston, Chesterfield, Clarendon, Colleton, Darlington, Dillon, Dorchester, Edgefield, Fairfield, Florence, Georgetown, Greenwood, Horry, Kershaw, Lancaster, Laurens, Lee, Marion, Marlboro, McCormick, Newberry, Orangeburg, Richland, Saluda, Sumter, Williamsburg | | |
| MCLEOD HOSPICE OF THE PEE DEE MCLEOD REGIONAL MEDICAL CENTER 1203 E CHEVES ST FLORENCE, SC 29506-2711 FAC.#:843-777-2564 HARRISON-PAVY RN JOAN PH#: 843-777-2564 Facility Email: JPAVY@MCLEODHEALTH.ORG | Florence / Non-Profit Corporation PO BOX 100551 FLORENCE, SC 29502-0551 MCLEOD REGIONAL MEDICAL CENTER OF THE PEE DEE INC HPC-0014 / 09/30/2018 | 11 |
| Counties Served: Chesterfield, Clarendon, Darlington, Dillon, Florence, Horry, Lee, Marion, Marlboro, Sumter, Williamsburg | | |
| PRUITTHEALTH HOSPICE-PEE DEE 2051 ELIJAH LUDD RD STE 1 FLORENCE, SC 29501 FAC.#:843-662-8633 HARRIS BENITA PH#: Facility Email: BHARRIS@PRUITTHEALTH.COM | Florence / Corporation 609 S COIT ST FLORENCE, SC 29501-5222 PRUITTHEALTH HOSPICE INC HPC-0092 / 01/31/2019 | 14 |
| Counties Served: Chesterfield, Clarendon, Darlington, Dillon, Fairfield, Florence, Georgetown, Horry, Kershaw, Lee, Marion, Marlboro, Sumter, Williamsburg | | |

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|--|-----------------------------------|
| Totals For Facility/License Type: <u>Hospice Program</u> | |
| Number of Activities/Facilities licensed: <u>4</u> | Number Licensed Units: <u>102</u> |

County: Florence

Facility Type: Hospital or Institutional General Infirmery

| 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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| CAROLINAS HOSPITAL SYSTEM 805 PAMPLICO HWY FLORENCE, SC 29505-6050 FAC.#:843-674-2500 MALAER GARY PH#: 843-674-5000 Facility Email: RHARDWICK@CAROLINASHOSPITAL.COM Licensed Beds: General: 310 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0 | Florence / Corporation PO BOX 100550 FLORENCE, SC 29501-0550 QHG OF SOUTH CAROLINA INC HTL-0761 / 11/30/2018 | 310 |
|--|---|-----|

Certifications:Trauma Center Level III, JCAHO Accredited

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|---|---|----|
| CAROLINAS HOSPITAL SYSTEM CEDAR TOWER 121 E CEDAR ST FLORENCE, SC 29506-2576 FAC.#:843-674-2500 MALAER GARY PH#: 843-674-2500 Facility Email: RHARDWICK@CAROLINASHOSPITAL.COM Licensed Beds: General: 0 Psychiatric: 12 Rehab: 42 Substance Abuse: 12 Other Beds : NICU: 0 Neonatal Special Care: 0 | Florence / Corporation PO BOX 100550 FLORENCE, SC 29501-0550 QHG OF SOUTH CAROLINA INC HTL-0782 / 11/30/2018 | 66 |
|---|---|----|

Certifications:JCAHO Accredited

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| HEALTHSOUTH REHABILITATION HOSPITAL OF FLORENCE 900 E CHEVES ST FLORENCE, SC 29506-2704 FAC.#:843-673-7284 NUNN BRIAN PH#: 843-673-7284 Facility Email: BRIAN.NUNN@HEALTHSOUTH.COM Licensed Beds: General: 0 Psychiatric: 0 Rehab: 88 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0 | Florence / Corporation 900 E CHEVES ST FLORENCE, SC 29506-2704 HEALTHSOUTH REHABILITATION CENTER INC HTL-0587 / 06/30/2018 | 88 |
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Certifications:JCAHO Accredited

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| LAKE CITY COMMUNITY HOSPITAL 258 N RON MCNAIR BLVD LAKE CITY, SC 29560-2462 FAC.#:843-374-2036 FAUCETTE MICHAEL PH#: 843-374-2036 Facility Email: APOSTONON@LCCHOSPITAL.ORG Licensed Beds: General: 48 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0 | Florence / District 258 N RON MCNAIR BVD LAKE CITY, SC 29560-1479 LOWER FLORENCE COUNTY HOSPITAL DISTRICT HTL-0897 / 05/31/2018 | 48 |
|---|--|----|

Certifications:None

County: Florence

Facility Type: Hospital or Institutional General Infirmery

| Facility Name Location Street Location City, State Administrator/Phone | County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date | Licensed Units |
|---|--|-------------------|
| MCLEOD REGIONAL MEDICAL CENTER OF THE PEE DEE 555 E CHEVES ST FLORENCE, SC 29506-2617 FAC.#:843-777-2000 SALEEBY MARIE G PH#: 843-777-2000 Facility Email: MSALEEBY@MCLEODHEALTH.ORG | Florence / Non-Profit Corporation PO BOX 100551 FLORENCE, SC 29502-0551 MCLEOD REGIONAL MEDICAL CENTER OF THE PEE DEE INC HTL-0384 / 05/31/2018 | 461 |
| Licensed Beds: General: 461 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 20 Neonatal Special Care: 28 | | |

Certifications: Abortions, Trauma Center Level II, Perinatal Level III Regional

| | | |
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| REGENCY HOSPITAL OF FLORENCE 121 E CEDAR ST 4TH & 5TH FLOORS FLORENCE, SC 29506-2576 FAC.#:843-661-3471 NOTARIO MELANIE PH#: | Florence / Ltd. Liability 4714 GETTYSBURG RD MECHANICSBURG, PA 17055-4325 REGENCY HOSPITAL COMPANY OF SOUTH CAROLINA LLC HTL-0824 / 09/30/2018 | 40 |
| Facility Email: MNOTARIO@SELECTMEDICAL.COM Licensed Beds: General: 40 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 0 | | |

Certifications: JCAHO Accredited

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|---|--|----|
| WOMEN'S CENTER OF CAROLINAS HOSPITAL SYSTEM 1590 FREEDOM BLVD FLORENCE, SC 29505-6042 FAC.#:843-674-2500 MALAER GARY PH#: 843-674-6700 Facility Email: RHARDWICK@CAROLINASHOSPITAL.COM | Florence / Corporation PO BOX 100550 FLORENCE, SC 29501-0550 QHG OF SOUTH CAROLINA INC HTL-0674 / 12/31/2018 | 20 |
| Licensed Beds: General: 20 Psychiatric: 0 Rehab: 0 Substance Abuse: 0 Other Beds : NICU: 0 Neonatal Special Care: 11 | | |

Certifications: Perinatal Level II, JCAHO Accredited

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| Totals For Facility/License Type: <u>Hospital or Institutional General Infirmery</u> | |
| Number of Activities/Facilities licensed: <u>7</u> | Number Licensed Units: <u>1,033</u> |

County: Florence

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 |
|--|---|-------------------|
| ABSOLUTE HEALTH CARE LLC 601 LANCELOT DR FLORENCE, SC 29505 FAC.#:803-760-2822 PH#: Facility Email: DBERG99999@AOL.COM | Florence / Limited Liability 601 LANCELOT DR FLORENCE, SC 29505 ABSOLUTE HEALTH CARE LLC IHCP-0568 / 06/30/2018 | - 1 |
| ADVANCE HOME CARE MANAGEMENT 1001 W EVANS ST STE 101 FLORENCE, SC 29501 FAC.#:843-472-5276 FULLARD CHRISTINE PH#: 843-370-0050 Facility Email: SUPPORT@ADVANCEHCM.COM | Florence / Limited Liability 2835 MOUNT ZION RD OLANTA, SC 29114 ADVANCE HOME CARE MANAGEMENT LLC IHCP-0498 / 12/31/2018 | - 1 |
| ADVANCED HEALTHCARE STAFFING SOLUTIONS LLC 908 W EVANS ST FLORENCE, SC 29501-3442 FAC.#:843-679-5355 PH#: Facility Email: ADVANCEDWECARE4U@BELLSOUTH.NET | Florence / Limited Liability PO BOX 1570 FLORENCE, SC 29501 ADVANCED HEALTHCARE STAFFING SOLUTIONS LLC IHCP-0351 / 09/30/2018 | - 1 |
| ANGELIC HEALTH CARE INC 1224 B S IRBY ST FLORENCE, SC 29505-2753 FAC.#:843-667-5100 PH#: Facility Email: ANGELICGROUP@BELLSOUTH.NET | Florence / Corporation PO BOX 12919 FLORENCE, SC 29504-2919 ANGELIC HEALTH CARE INC IHCP-0280 / 07/31/2018 | - 1 |
| CARING FOR YOU SERVICES LLC 181 E EVANS ST STE 201 FLORENCE, SC 29506-5524 FAC.#:843-731-1481 PH#: Facility Email: CARING4U2SC@YAHOO.COM | Florence / Limited Liability 181 E EVANS ST STE 201 FLORENCE, SC 29506-5524 CARING FOR YOU SERVICES LLC IHCP-0239 / 07/31/2018 | - 1 |
| COMFORT KEEPERS #469 OF FLORENCE SUMTER & COLUMBIA 218 DOZIER BLVD FLORENCE, SC 29501-4075 FAC.#:843-656-1056 PH#: Facility Email: DCOKER@FLORENCECK.COM | Florence / Limited Liability PO BOX 7075 FLORENCE, SC 29502 FLORENCE CK LLC IHCP-0222 / 06/30/2018 | - 1 |
| CORPORATE CARE LLC-FLORENCE 1210 W EVANS ST STE A FLORENCE, SC 29501-3387 FAC.#:864-250-0403 COOLEY CAROLYN PH#: 864-250-0403 Facility Email: CCOOLEY1@CORPORATE-SERVICESSC.COM | Florence / Limited Liability PO BOX 16148 GREENVILLE, SC 29606-7148 CORPORATE CARE LLC-FLORENCE IHCP-0523 / 07/31/2018 | - 1 |
| DOMINION HEALTH CARE LLC 510 HICKORY GROVE CIR FLORENCE, SC 29501-0810 FAC.#:843-413-0182 PH#: Facility Email: DOMINION1HEALTH@AOL.COM | Florence / Limited Liability 510 HICKORY GROVE CIR FLORENCE, SC 29501-0810 DOMINION HEALTH CARE LLC IHCP-0215 / 07/31/2018 | - 1 |

County: Florence

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 |
|--|--|-------------------|
| EAST COAST NURSING SERVICES - FLORENCE 2231 W PALMETTO ST STE 102 FLORENCE, SC 29501 FAC.#:843-799-2123 HOOD BRITTANY PH#: 843-799-2123 Facility Email: AILEENRUSHING75@YAHOO.COM | Florence / 1415 3RD AVE STE 102-A CONWAY, SC 29526-5049 EAST COAST NURSING SERVICES LLC IHCP-0601 / 08/31/2018 | - 1 |
| FAITH HOPE & LOVE HOMECARE 604 S COIT ST FLORENCE, SC 29501 FAC.#:843-472-5256 PH#: Facility Email: MONICKA_WATSON@YAHOO.COM | Florence / Limited Liability 604 S COIT ST FLORENCE, SC 29501 FAITH HOPE & LOVE HOMECARE LLC IHCP-0681 / 11/30/2017 (Renewal Pending) | - 1 |
| HALOS PERSONAL CARE 1001 W EVANS ST STE 204 FLORENCE, SC 29501-3388 FAC.#:843-799-4441 PH#: Facility Email: LENORAJONES69@GMAIL.COM | Florence / Sole Proprietorship PO BOX 741 BENNETTSVILLE, SC 29512 JONES-COVINGTON BETTY L IHCP-0623 / 11/30/2018 | - 1 |
| HELP AT HOME INC (HARTSVILLE) 1330 CELEBRATION BLVD STE B FLORENCE, SC 29501 FAC.#:843-857-3944 PH#: Facility Email: HARTSVILLE@HELPPATHOME.COM | Florence / Corporation 1330 CELEBRATION BLVD STE B FLORENCE, SC 29501 HELP AT HOME INC IHCP-0315 / 06/30/2018 | - 1 |
| HELPING HEARTS LLC 908 S PARKER DR STE 3 FLORENCE, SC 29501-6007 FAC.#:843-669-2999 PH#: Facility Email: BRANDYEADDY80@GMAIL.COM | Florence / Sole Proprietorship 908 S PARKER DR STE 3 FLORENCE, SC 29501-6007 BRANDY EADDY IHCP-0191 / 06/30/2018 | - 1 |
| HOPE GARDENS LLC 1001 W EVANS ST STE 201 FLORENCE, SC 29501-3388 FAC.#:843-629-0402 PH#: Facility Email: HOPEGARDENS07@GMAIL.COM | Florence / Limited Liability 1001 W EVANS ST STE 201 FLORENCE, SC 29501-3388 HOPE GARDENS LLC IHCP-0526 / 03/31/2018 | - 1 |
| INTERIM HEALTHCARE INC OF FLORENCE 1800 2ND LOOP RD STE 7 FLORENCE, SC 29501-0000 FAC.#:843-800-1355 FLOWERS LORI PH#: 843-800-1355 Facility Email: LFLOWERS@INTERIMHEALTHCARE.COM | Florence / Corporation 1800 2ND LOOP RD STE 7 FLORENCE, SC 29501-0000 FLOWERS GROUP INC IHCP-0157 / 05/31/2018 | - 1 |
| LOVING ARMS HOME CARE LLC 608 GREGG AVE FLORENCE, SC 29501 FAC.#:704-277-3839 THOMAS PAULA PH#: 704-277-3839 Facility Email: LOVINGARMSCARES@GMAIL.COM | Florence / Limited Liability 608 GREGG AVE FLORENCE, SC 29501 LOVING ARMS HOME CARE LLC IHCP-0672 / 02/28/2018 | - 1 |

County: Florence

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 |
|--|---|-------------------|
| NIGHTINGALE'S NURSING & ATTENDANT CARE SERVICES 2721 DAVID H MCLEOD BLVD FLORENCE, SC 29501-4043 FAC.#:843-413-6033 PH#: Facility Email: GLORIA@NIGHTINGALESNURSING.NET | Florence / 2721 DAVID H MCLEOD BLVD FLORENCE, SC 29501-4043 NIGHTINGALE'S NURSING & ATTENDANT CARE SERVICES INC IHCP-0022 / 10/31/2018 | - 1 |
| NURSES UNLIMITED LLC 2230 BABAR LN STE 5 FLORENCE, SC 29501-1248 FAC.#:843-662-0929 GALLOWAY MICHELLE PH#: 843-662-0929 Facility Email: NURSESUNLIMITED74@YAHOO.COM | Florence / Limited Liability 2230 BABAR LN STE 5 FLORENCE, SC 29501-1248 NURSES UNLIMITED LLC IHCP-0234 / 07/31/2018 | - 1 |
| PARSON'S COMPANION CARE 141 BULLDOG LN LAKE CITY, SC 29560 FAC.#:843-598-9184 PH#: Facility Email: PCC@PARSONSCOMPANIONCARE.COM | Florence / Limited Liability 1937 W PALMETTO ST-PMB#159 FLORENCE, SC 29501 PARSON'S COMPANION CARE LLC IHCP-0812 / 01/31/2019 | - 1 |
| PERSONAL CARE 1951 PISGAH INCUBATOR ROOM #136 FLORENCE, SC 29501 FAC.#:843-799-2552 PH#: Facility Email: PERSONALCARESC@GMAIL.COM | Florence / Limited Liability PO BOX 100548 INCUBATOR BOX #114 FLORENCE, SC 29501 PERSONAL CARE GROUP LLC IHCP-0544 / 05/31/2018 | - 1 |
| PRESTIGE HOME SUPPORT 1922 E MCIVER RD FLORENCE, SC 29501-9640 FAC.#:843-669-4664 PH#: Facility Email: PRESTIGE01@MSN.COM | Florence / Sole Proprietorship 1505 E MCIVER RD FLORENCE, SC 29501 ALMEDA MYERS GRAHAM IHCP-0264 / 07/31/2018 | - 1 |
| RESCARE HOMECARE-FLORENCE 960 PAMPLICO HWY STE L FLORENCE, SC 29505-6244 FAC.#:843-629-0794 YOUNG SHIRLEY PH#: 843-629-0794 Facility Email: SHIRLEY.YOUNG@RESCARE.COM | Florence / Corporation 960 PAMPLICO HWY STE L FLORENCE, SC 29505-6244 SOUTHERN HOME CARE SERVICES INC IHCP-0038 / 12/31/2018 | - 1 |
| SENIOR CITIZENS ASSOCIATION IN FLORENCE COUNTY IN-HOME CARE PROVIDER 600 SENIOR WAY FLORENCE, SC 29505 FAC.#:843-669-6761 PH#: Facility Email: SCA.LMJOHNSON@SC.TWCBC.COM | Florence / SENIOR CITIZENS ASSOCIATION IN FLORENCE COUNTY IHCP-0559 / 10/31/2018 | - 1 |

County: Florence

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 |
|--|---|-------------------|
| TAKING A POSITIVE STEP IN-HOME CARE 3091 S CASHUA DR STE 1 FLORENCE, SC 29501 FAC.#:843-487-5140 ALLEN CAROLYN PH#: 843-487-5140 Facility Email: TAKINGAPOSITIVESTEP@YAHOO.COM | Florence / Corporation 3091 S CASHUA DR STE 1 FLORENCE, SC 29501 TAKING A POSITIVE STEP INC IHCP-0510 / 03/31/2018 | - 1 |
| TENDER CARE HEALTH CARE 1245 CELEBRATION BLVD FLORENCE, SC 29501-5499 FAC.#:843-699-0104 PH#: Facility Email: TENDERCARE@TENDERCAREHHC.COM | Florence / Limited Liability 1245 CELEBRATION BLVD FLORENCE, SC 29501-5499 TENDER CARE HOME HEALTH CARE LLC IHCP-0293 / 08/31/2018 | - 1 |
| TOTAL NURSING AGENCY 3362 W PALMETTO ST FLORENCE, SC 29501-5942 FAC.#:843-799-1233 PH#: Facility Email: SUPPORT@TOTALCARENURSINGAGENCY.COM | Florence / Limited Liability 3362 W PALMETTO ST FLORENCE, SC 29501-5942 TOTAL CARE NURSING AGENCY LLC IHCP-0678 / 03/31/2018 | - 1 |

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| Totals For Facility/License Type: <u>Inhome Care Provider</u> | |
| Number of Activities/Facilities licensed: <u>26</u> | Number Licensed Units: <u>- 26</u> |

County: Florence

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 |
|---|---|-------------------|
|---|---|-------------------|

| | | |
|---|---|----|
| CARLYLE SENIOR CARE OF FLORENCE 133 W CLARKE RD FLORENCE, SC 29501-0722 FAC.#:843-669-4374 SIMON SHIRLEY K PH#: 843-669-4374 Facility Email: RCRANFORD@CMCSENIORCARE.COM | Florence / Limited Liability 133 W CLARKE RD FLORENCE, SC 29501-0722 CARLYLE SENIOR CARE OF FLORENCE LLC NCF-0983 / 07/31/2018 | 88 |
|---|---|----|

Licensed Beds: Nursing Home: 88 Institutional Nursing Home: 0
 Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

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|---|--|-----|
| COMMANDER NURSING CENTER 4438 PAMPLICO HWY FLORENCE, SC 29505-8502 FAC.#:843-669-3502 COMMANDER IV JOSEPH M PH#: 843-669-3502 Facility Email: JOECOMMANDER@HOTMAIL.COM | Florence / Corporation 4438 PAMPLICO HWY FLORENCE, SC 29505-8502 COMMANDER HEALTH CARE FACILITIES INC NCF-0233 / 07/31/2018 | 163 |
|---|--|-----|

Licensed Beds: Nursing Home: 163 Institutional Nursing Home: 0
 Alzheimer Care:Yes Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

| | | |
|---|---|-----|
| FAITH HEALTHCARE CENTER 617 W MARION ST FLORENCE, SC 29501-2470 FAC.#:843-669-9958 ARNETTE BROOKS PH#: 843-669-9958 Facility Email: BROOKS.ARNETTE@PALMLTC.COM | Florence / Ltd. Liability 617 W MARION ST FLORENCE, SC 29501-2470 PALMETTO FAITH OPERATING LLC NCF-0927 / 09/30/2018 | 104 |
|---|---|-----|

Licensed Beds: Nursing Home: 104 Institutional Nursing Home: 0
 Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

| | | |
|---|---|-----|
| HERITAGE HOME OF FLORENCE 515 WARLEY ST FLORENCE, SC 29501-5199 FAC.#:843-662-4573 WELCH PAIGE S PH#: 843-662-4573 Facility Email: PWELCH@HERITAGEFLORENCE.COM | Florence / Corporation 515 S WARLEY ST FLORENCE, SC 29501-5199 HERITAGE HOME OF FLORENCE INC NCF-0450 / 02/28/2018 | 132 |
|---|---|-----|

Licensed Beds: Nursing Home: 132 Institutional Nursing Home: 0
 Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

County: Florence

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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| HONORAGE NURSING CENTER 1207 N CASHUA RD FLORENCE, SC 29501-6969 FAC.#:843-665-6172 TAYLOR PAMELA M PH#: 843-665-6172 Facility Email: PTAYLOR1549@AOL.COM | Florence / Corporation 1207 N CASHUA RD FLORENCE, SC 29501-6969 HONORAGE NURSING HOME OF FLORENCE SC INC NCF-0329 / 12/31/2018 | 88 |
|--|--|----|

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

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

Certifications:None

| | | |
|---|---|----|
| LAKE CITY-SCRANTON HEALTHCARE CENTER 1940 BOYD RD SCRANTON, SC 29591-5835 FAC.#:843-389-9201 GIBBS JEFFREY PH#: 843-389-9201 Facility Email: JEFFREY.GIBBS@PALMLTC.COM | Florence / Ltd. Liability 1940 BOYD RD SCRANTON, SC 29591-5835 PALMETTO LAKE CITY OPERATING LLC NCF-0928 / 09/30/2018 | 88 |
|---|---|----|

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

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

Certifications:None

| | | |
|--|---|----|
| METHODIST MANOR HEALTHCARE CENTER 2100 TWIN CHURCH RD FLORENCE, SC 29501-8200 FAC.#:843-664-0700 TABOR TERESSA L PH#: 843-664-0700 Facility Email: TTABOR@METHODIST-MANOR.COM | Florence / Non-Profit Corporation 2100 TWIN CHURCH RD FLORENCE, SC 29501-8200 UNITED METHODIST MANOR OF THE PEE DEE NCF-0579 / 09/30/2018 | 32 |
|--|---|----|

Licensed Beds: Nursing Home: 0 Institutional Nursing Home: 32

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

Certifications:None

| | | |
|--|--|----|
| PRESBYTERIAN COMMUNITIES OF SOUTH CAROLINA-FLORENCE 2350 W LUCAS ST FLORENCE, SC 29501-1201 FAC.#:843-665-2222 LILLY LORETTA PH#: 864-665-2102 Facility Email: LORETTA.LILLY@PRESHOMESC.ORG | Florence / Non-Profit Corporation 2350 W LUCAS ST FLORENCE, SC 29501-1201 PRESBYTERIAN COMMUNITIES OF SOUTH CAROLINA NCF-0420 / 09/30/2018 | 44 |
|--|--|----|

Licensed Beds: Nursing Home: 44 Institutional Nursing Home: 0

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

Certifications:None

County: Florence

Facility Type: Nursing Home

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

| | | |
|---|--------------------------------------|----|
| SOUTHLAND HEALTH CARE CENTER | Florence / Corporation | 88 |
| 722 S DARGAN ST | 722 S DARGAN ST | |
| FLORENCE, SC 29506-2562 FAC.#:843-669-4403 | FLORENCE, SC 29506-2562 | |
| COMMANDER CHARLES S PH#: 843-669-4403 | COMMANDER HEALTH CARE FACILITIES INC | |
| Facility Email: CCOMMANDER@SC.RR.COM | NCF-0599 / 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

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|--|-----------------------------------|
| Totals For Facility/License Type: <u>Nursing Home</u> | |
| Number of Activities/Facilities licensed: <u>9</u> | Number Licensed Units: <u>827</u> |

County: Florence

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 |
|---|---|-------------------|
| CHRYSALIS CENTER 1430 S CASHUA DR FLORENCE, SC 29501-6323 FAC.#:843-673-0660 JAMES JEANNIE PH#: 843-665-9349 Facility Email: JJAMES@CIRCLEPARK.COM | Florence / County PO BOX 6196 FLORENCE, SC 29502-6196 FLORENCE COUNTY COMMISSION ON ALCOHOL AND DRUG ABUSE ITP-0026 / 10/31/2018 | 16 |
| Licensed Beds: Medical Detox: 0 Social Detox: 0 Res. Treatment Program: 16 | | |

Totals For Facility/License Type: PSAD Inpatient

Number of Activities/Facilities licensed: 1 Number Licensed Units: 16

County: Florence

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 |
|---|--|-------------------|
| CIRCLE PARK FAMILY COUNSELING & ADDICTION CENTER 238 S COIT ST FLORENCE, SC 29501-4316 FAC.#:843-665-9349 JAMES JEANNIE PH#: 843-665-9349 Facility Email: JJAMES@CIRCLEPARK.COM | Florence / County PO BOX 6196 FLORENCE, SC 29502-6196 FLORENCE COUNTY COMMISSION ON ALCOHOL AND DRUG ABUSE OTP-0009 / 07/31/2018 | 2 |

Certifications:None

| | |
|--|---|
| STARTING POINT OF FLORENCE PC 1341 N CASHUA DR FLORENCE, SC 29501-6939 FAC.#:843-673-9320 PH#: Facility Email: Not on File | Florence / 1341 NCASHUA DR FLORENCE, SC 29501 STARTING POINT OF FLORENCE PC OTPN-0183 / 11/30/2018 |
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Certifications:Methodone Treatment Program

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

County: Florence

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 |
|---|---|-------------------|
| FLORENCE MEDICAL MILE 181-B E EVANS ST STES 8 - 12 FLORENCE, SC 29501 FAC.#:843-679-0550 PRESSLEY GAIL S PH#: Facility Email: GAIL.PRESSLEY@FMC-NA.COM | Florence / Corporation 181-B E EVANS ST STES 8-12 FLORENCE, SC 29501 BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC ERD-0239 / 06/30/2018 | 20 |
| Licensed Stations: Hemodialysis: 20 Peritoneal: 0 | | |
| FMC DIALYSIS SERVICES-PEE DEE DIALYSIS 331 ELIZABETH ANNE CT LAKE CITY, SC 29560-2488 FAC.#:843-394-3944 SULLIVAN MELISSA PH#: 843-394-3944 Facility Email: GAIL.PRESSLEY@FMC-HA.COM | Florence / Corporation 331 ELIZABETH ANNE CT LAKE CITY, SC 29560-2488 BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC ERD-0103 / 05/31/2018 | 30 |
| Licensed Stations: Hemodialysis: 30 Peritoneal: 0 | | |
| FRESENIUS MEDICAL CARE CHURCH STREET 406 S CHURCH ST FLORENCE, SC 29506-3000 FAC.#:843-679-5945 MCGILL FREDA PH#: 843-679-5945 Facility Email: GAIL.PRESSLEY@FMC-NA.COM | Florence / Corporation 406 S CHURCH ST FLORENCE, SC 29506-3000 BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC ERD-0178 / 12/31/2018 | 21 |
| Licensed Stations: Hemodialysis: 21 Peritoneal: 0 | | |
| FRESENIUS MEDICAL CARE FLORENCE 435 N CASHUA DR FLORENCE, SC 29501-2097 FAC.#:843-669-0825 GRAHAM RN SHIRLEY B PH#: 843-394-0355 Facility Email: SHIRLEY.GRAHAM@FMC-NA.COM | Florence / Corporation 435 N CASHUA DR FLORENCE, SC 29501-2097 BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC ERD-0141 / 07/31/2018 | 31 |
| Licensed Stations: Hemodialysis: 31 Peritoneal: 0 | | |
| FRESENIUS MEDICAL CARE FREEDOM 1520 FREEDOM BLVD FLORENCE, SC 29505-6040 FAC.#:843-667-0654 BRIGMAN MONIKA MARIA PH#: Facility Email: MONIKA.BRIGMAN@FMC-NA.COM | Florence / Corporation 1520 FREEDOM BLVD FLORENCE, SC 29505-6040 BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC ERD-0142 / 07/31/2018 | 28 |
| Licensed Stations: Hemodialysis: 26 Peritoneal: 4 | | |
| FRESENIUS MEDICAL CARE JOHNSONVILLE 200 STUCKEY ST JOHNSONVILLE, SC 29555-6449 FAC.#:843-380-1581 MCCRAY JESSICA PH#: 843-380-1581 Facility Email: JESSICA.MCCRAY@FMC-NA.COM | Florence / Corporation 200 STUCKEY ST JOHNSONVILLE, SC 29555-6449 BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC ERD-0180 / 01/31/2019 | 21 |
| Licensed Stations: Hemodialysis: 21 Peritoneal: 0 | | |

County: Florence

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 |
|---|---|-------------------|
|---|---|-------------------|

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|--|---|----|
| KELLEY CORNERS DIALYSIS 231 KELLEY ST LAKE CITY, SC 29560 FAC.#:615-320-4214 LEYDER VALERIE PH#: 615-320-4214 Facility Email: REGINIA.COPELAND@DAVITA.COM | Florence / Corporation L & C DEPARTMENT, 5200 VIRGINIA WAY BRENTWOOD, TN 37027 TOTAL RENAL CARE INC ERD-0240 / 10/31/2018 | 16 |
|--|---|----|

Licensed Stations: Hemodialysis: 16 Peritoneal: 0

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| PAMPLICO DIALYSIS 1520 FLAG DR FLORENCE, SC 29505 FAC.#:843-413-0857 JONES-HUGGINS MARGARET PH#: 843-413-0857 Facility Email: SCL@C@DAVITA.COM | Florence / Corporation 5200 VIRGINIA WAY STE 400, LICENSING AND CERTIFICATION BRENTWOOD, TN 37027-7569 TOTAL RENAL CARE INC ERD-0207 / 11/30/2018 | 24 |
|---|--|----|

Licensed Stations: Hemodialysis: 20 Peritoneal: 4

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| Totals For Facility/License Type: <u>Renal Dialysis</u> | |
| Number of Activities/Facilities licensed: _____ 8 | Number Licensed Units: _____ 191 |

County: Florence

Facility Type: Residential Treatment for Children & Adolescents

| Facility Name Location Street Location City, State Administrator/Phone | County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date | Licensed Units |
|---|---|-------------------|
| PALMETTO PEE DEE RESIDENTIAL TREATMENT CENTER 601 GREGG AVE STE B FLORENCE, SC 29501-4316 FAC.#:843-667-0644 EICHELBERGER DANIEL PH#: 843-667-0644 Facility Email: DANIEL.EICHELBERGER@UHSINC.COM | Florence / Ltd. Liability 601 GREGG AVE STE B FLORENCE, SC 29501-4316 PALMETTO PEE DEE BEHAVIORAL HEALTH LLC RTF-0014 / 09/30/2018 | 59 |

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|--|---|
| Totals For Facility/License Type: <u>Residential Treatment for Children & Adolescents</u> | |
| Number of Activities/Facilities licensed: <u>1</u> | Number Licensed Units: <u>59</u> |

County: Florence

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 |
|---|--|-------------------|
| GBMS TATTOO GALLERY 384 W EVANS ST FLORENCE, SC 29501 FAC.#:843-496-1765 PH#: Facility Email: TEAMGBMS@YAHOO.COM | Florence / Sole Proprietorship 384 W EVANS ST FLORENCE, SC 29501 WRIGHT JERMICHAEL TF-0268 / 06/30/2017 (Renewal Pending) | 3 |
| IMPERIAL INK TATTOO 2025 W EVANS ST FLORENCE, SC 29501-3356 FAC.#:843-676-0808 MITCHELL LLOYD PH#: 843-676-0808 Facility Email: LLOYD@HEATSTREET.COM | Florence / Ltd. Liability 2025 W EVANS ST FLORENCE, SC 29501-3356 IMPERIAL INK TATTOO LLC TF-0028 / 10/31/2018 | 3 |
| PORKCHOP'S TATTOO STUDIO 1356 JAMES JONES AVE FLORENCE, SC 29505-2793 FAC.#:843-407-6364 RAYFIELD REBECCA ELIZABETH PH#: 843-325-5754 Facility Email: PORKCHOP4TATTOOS@YAHOO.COM | Florence / Limited Liability 2990 SOCIETY DR CONWAY, SC 29527-6527 T&R INDUSTRIES LLC TF-0149 / 02/28/2018 | 4 |

| | |
|---|----------------------------------|
| Totals For Facility/License Type: <u>Tattoo Facility</u> | |
| Number of Activities/Facilities licensed: <u>3</u> | Number Licensed Units: <u>10</u> |

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|---|--------------------------------------|
| Number of Activities/Facilities licensed in county of : <u>Florence</u> | # Lics: <u>108</u> |
| | Number Licensed Units : <u>3,677</u> |

Report Totals

Total Number of Activities/Facilities licensed: 108 Total Number Licensed Units: 3,677