

County: Berkeley

Facility Type: Adult Day Care

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
LOW COUNTRY ACTIVE DAY CENTER 104 SPRINGHALL DR GOOSE CREEK, SC 29445-5335 FAC.#:843-553-1805 BOLING, ROSEMARY PH#: 843-553-1805 Facility Email: RBOLING@ACTIVEDAY.COM	Berkeley / Corporation 104 SPRINGHALL DR GOOSE CREEK, SC 29445-5335 ACSR INC ADC-0195 / 02/28/2010	97
Number of Participants		97

Totals For Facility/License Type Adult Day Care	
Number of Activities/Facilities licensed:	<input type="text" value="1"/>
Number Licensed Units	<input type="text" value="97"/>

County: Berkeley

Facility Type: Ambulatory Surgery

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
ROPER BERKELEY AMBULATORY SURGERY CENTER 730 STONEY LANDING RD MONCKS CORNER, SC 29461-2948 FAC.#:843-899-7700 HORVATH RN, LISA PH#: 843-899-7700 Facility Email: BRENDA.MYERS@RSFH.COM	Berkeley / Corporation 730 STONEY LANDING RD MONCKS CORNER, SC 29461-2948 ROPER HOSPITAL INC ASF-0063 / 02/28/2010	4
Operating Rooms 3 Procedure Rooms 1 Endoscopy Rooms 0		

Totals For Facility/License Type Ambulatory Surgery	
Number of Activities/Facilities licensed: <input type="text" value="1"/>	Number Licensed Units <input type="text" value="4"/>

Division of Health Licensing

County: Berkeley

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
GOOSE CREEK MANOR #1 104 MARILYN ST GOOSE CREEK, SC 29445-3104 FAC.#:843-553-8389 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 / 06/30/2010	7
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 / 04/30/2010	36
Certifications:None		
L & M RESIDENTIAL HEALTH CARE FACILITY 2504 HWY 311 CROSS, SC 29436-3339 FAC.#:843-753-7098 TAYLOR, LINDA B PH#: 843-753-7098 Facility Email: No Facility Email on Record	Berkeley / Ltd. Liability 2504 HWY 311 CROSS, SC 29436-3339 L & M RESIDENTIAL HCF LLC CRC-1426 / 02/28/2010	5
Certifications:None		
LOW COUNTRY HOME 105 MCKNIGHT ST MONCKS CORNER, SC 29461-4010 FAC.#:843-899-6950 BEY, LAILA R PH#: 843-899-6950 Facility Email: No Facility Email on Record	Berkeley / Ltd. Liability 204 MENDENHALL ST SUMMERVILLE, SC 29483-5288 RAINBOW RESIDENTIAL HOME LLC CRC-1353 / 03/31/2010	5
Certifications:None		
LOW COUNTRY HOME #2 1005 COOPER STORE RD MONCKS CORNER, SC 29461-8317 FAC.#:843-899-8385 BEY, LAILA R PH#: 843-873-1557 Facility Email: LBEYL@AOL.COM	Berkeley / Corporation LOWCOUNTRY MANAGEMENT SERVICES INC CRC-1496 / 10/31/2010	5
Certifications:Alzheimer Care		
MAMIE'S ADULT GROUP HOMES 102 CONEY CT SUMMERVILLE, SC 29483-2005 FAC.#:843-832-3877 REEVES, KARIN D PH#: 843-832-3887 Facility Email: KARINREEVESDBAMA@BELLSOUTH.NET	Berkeley / Corporation PO BOX 1664 SUMMERVILLE, SC 29484-1664 MAMIE'S ADULT GROUP HOMES INC CRC-1247 / 05/31/2010	5
Certifications:Alzheimer Care		

County: Berkeley

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
MAMIE'S ADULT GROUP HOMES INC #2 207 GENERAL DENNIS DR SUMMERVILLE, SC 29483-2012 FAC.#:843-821-4783 REEVES, KARIN D PH#: 843-832-3887 Facility Email: KARINREEVESDBAMA@BELLSOUTH.NET	Berkeley / Corporation PO BOX 1664 SUMMERVILLE, SC 29484-1664 MAMIE'S ADULT GROUP HOMES INC CRC-1294 / 02/28/2010	5
Certifications:Alzheimer Care		
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 / 04/30/2010	10
Certifications:None		
OMOOOO COMMUNITY CARE HOME 135 OMOOOO LN SUMMERVILLE, SC 29483-2724 FAC.#:843-688-4439 LEVINE-SASS, OPAH O PH#: 843-688-4439 Facility Email: No Facility Email on Record	Berkeley / Partnership 135 OMOOOO LN SUMMERVILLE, SC 29483-2724 OLIVER & MINA LEVINE CRC-0190 / 02/28/2010	43
Certifications:Alzheimer Care		
PINEWOOD HOUSE 101 CENTENNIAL BLVD GOOSE CREEK, SC 29445-7079 FAC.#:843-569-2520 LEE-HODGES, DANIELLE R PH#: 843-569-2520 Facility Email: PINWOODHOUSE@ALCCO.COM	Berkeley / Corporation 101 CENTENNIAL BLVD GOOSE CREEK, SC 29445-7079 ASSISTED LIVING CONCEPTS INC CRC-1406 / 11/30/2009	44
Certifications:Alzheimer Care		
QUALITY CARE RESIDENTIAL HOME 107 ETLING AVE GOOSE CREEK, SC 29445-3001 FAC.#:843-863-0209 ESPANO, FE B PH#: 843-863-0209 Facility Email: No Facility Email on Record	Berkeley / Partnership 107 ETLING AVE GOOSE CREEK, SC 29445-3001 CLARO L AND FE B ESPANO CRC-0715 / 05/31/2010	29
Certifications:None		
SUMMIT PLACE OF DANIEL ISLAND 320 SEVEN FARMS DR DANIEL ISLAND, SC 29492-7532 FAC.#:843-884-4104 GRANT, ETHELEE PH#: 843-884-4104 Facility Email: DIEXCDIRECTOR@HHHUNT.COM	Berkeley / Limited Liability Limited Partnership 320 SEVEN FARMS DR DANIEL ISLAND, SC 29492-7532 DANIEL ISLAND ASSISTED LIVING LP CRC-1282 / 12/31/2009	76
Certifications:None		

County: Berkeley

Facility Type: Community Residential Care Facility

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

Totals For Facility/License Type Community Residential Care Facility	
Number of Activities/Facilities licensed:	12 Number Licensed Units 270

County: Berkeley

Facility Type: Habilitation R15

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
CONIFER I COMMUNITY RESIDENCE 110 RESINWOOD DR MONCKS CORNER, SC 29461 FAC. #:843-761-0381 RONEY, SUSAN PH#: Facility Email: PMCDERMOTT@BICSERVICES.ORG	Berkeley / State PO BOX 4706 COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR15-0119 / 05/31/2010	8
CONIFER II COMMUNITY RESIDENCE 114 RESINWOOD DR MONCKS CORNER, SC 29461 FAC. #:843-761-0382 RONEY, SUSAN PH#: Facility Email: PMCDERMOTT@BICSERVICES.ORG	Berkeley / State PO BOX 4706 COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR15-0120 / 05/31/2010	8

Totals For Facility/License Type Habilitation R15

Number of Activities/Facilities licensed:	2	Number Licensed Units	16
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County: Berkeley

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
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HEARTLAND HEALTH CARE CENTER-CHARLESTON 1800 EAGLE LANDING BLVD HANAHAN, SC 29410-8517 FAC.#:843-553-0656 COURY, WILLIAM V PH#: 843-553-0656 Facility Email: 4015-ADMIN@HCR-MANORCARECOM	Berkeley / Limited Liability 1800 EAGLE LANDING BLVD HANAHAN, SC 29410-8517 HEARTLAND-CHARLESTON OF HANAHAN SC LLC NCF-0526 / 12/31/2009	105
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Licensed Beds Nursing Home 105 Institutional Nursing Home 0

Certifications:None

LAKE MOULTRIE NURSING HOME 1038 MCGILL LN SAINT STEPHEN, SC 29479-3196 FAC.#:843-567-2307 DRIGGERS, JOANN C PH#: 843-567-2307 Facility Email: JDRIGGERS@CLARENDONHEALTH.COM	Berkeley / Non-Profit Corporation PO BOX 1108 SAINT STEPHEN, SC 29479-1108 CLARENDON HOSPITAL DISTRICT NCF-0738 / 12/31/2009	88
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Licensed Beds Nursing Home 88 Institutional Nursing Home 0

Certifications:None

UNIHEALTH POST ACUTE CARE-MONCKS CORNER 505 S LIVE OAK DR MONCKS CORNER, SC 29461-3554 FAC.#:843-761-8368 MCKINSTRY, NANCY W PH#: 000-000-0000 Facility Email: THENSCHL@UHS-PRUITT.COM	Berkeley / Limited Liability 505 S LIVE OAK DR MONCKS CORNER, SC 29461-3554 UNIHEALTH POST ACUTE CARE-MONCKS CORNER LLC NCF-0943 / 10/31/2010	132
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Licensed Beds Nursing Home 132 Institutional Nursing Home 0

Certifications:None

Totals For Facility/License Type Nursing Home	
Number of Activities/Facilities licensed:	3
Number Licensed Units	325

County: Berkeley

Facility Type: PSAD Outpatient

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
ERNEST E KENNEDY CENTER 306 AIRPORT DR MONCKS CORNER, SC 29461-2629 FAC.#:843-761-8272 BAILEY, LINDA L PH#: 843-761-8272 Facility Email: EKCENTER@EKCENTER.ORG	Berkeley / Non-Profit Corporation 306 AIRPORT DR MONCKS CORNER, SC 29461-2629 ERNEST E KENNEDY CENTER INC OTP-0025 / 06/30/2010	3

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 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 / 08/31/2010	1
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Certifications:None

Totals For Facility/License Type PSAD Outpatient	
Number of Activities/Facilities licensed: <input type="text" value="2"/>	Number Licensed Units <input type="text" value="4"/>

County: Berkeley

Facility Type: Renal Dialysis

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
DCI GOOSE CREEK 98 HAMLET CIR GOOSE CREEK, SC 29445-8100 FAC.#:843-863-8633 SALVADOR, IMELDA P PH#: Facility Email: No Facility Email on Record	Berkeley / Corporation 1411 KING ST CHARLESTON, SC 29403-3008 DIALYSIS CLINIC INC ERD-0172 / 09/30/2010	17
Licensed Stations: Hemodialysis: 17 Peritoneal: 0		
GOOSE CREEK DIALYSIS 109 GREENLAND DR GOOSE CREEK, SC 29445-5354 FAC.#:843-377-1199 CHAMBERS, DEBORAH L PH#: 843-377-1199 Facility Email: No Facility Email on Record	Berkeley / Corporation 5200 VIRGINIA WAY STE 400, DAVITA-LICENSURE & CERTIFICATION BRENTWOOD, TN 37027-7569 TOTAL RENAL CARE INC ERD-0164 / 09/30/2010	17
Licensed Stations: Hemodialysis: 17 Peritoneal: 0		
RAI-R C DENNIS BLVD-MONCKS CORNER 112 MCCORMICK CIR MONCKS CORNER, SC 29461-3152 FAC.#:843-899-4953 CLARKE RN, JULIANNA PH#: 843-899-4953 Facility Email: BEN.DELP@RENALADVANTAGE.COM	Berkeley / Limited Liability 115 EASTPARK DR STE 300, RENAL ADVANTAGE-LEGAL DEPT BRENTWOOD, TN 37027-2311 RAI CARE CENTERS OF SOUTH CAROLINA I LLC ERD-0152 / 09/30/2010	25
Licensed Stations: Hemodialysis: 25 Peritoneal: 0		

Totals For Facility/License Type Renal Dialysis

Number of Activities/Facilities licensed:	<input type="text" value="3"/>	Number Licensed Units	<input type="text" value="59"/>
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County: Berkeley

Facility Type: Tattoo Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
BROKEN LANTERN STUDIO 924 S LIVE OAK DR MONCKS CORNER, SC 29461-7203 FAC.#:843-899-7900 COLLINS, GLENN PH#: 843-303-2578 Facility Email: BROKENLANTERNSTATTOO@GMAIL.COM	Berkeley / Sole Proprietorship 924 S LIVE OAK DR MONCKS CORNER, SC 29461-7203 COLLINS, GLENN TF-0090 / 04/30/2010	1
HOUSE OF INK 1204 N MAIN ST STE E SUMMERVILLE, SC 29483-7343 FAC.#:843-851-8287 VALDEZ, FRANCISCO N PH#: 843-851-8287 Facility Email: HOUSEOFINK@SC.RR.COM	Berkeley / Limited Liability 1204 N MAIN ST STE E SUMMERVILLE, SC 29483-7343 HOUSE OF INK LLC TF-0032 / 01/31/2010	4
LADY LUCK TATTOO 445 N HWY 52 STE 101 MONCKS CORNER, SC 29461-3978 FAC.#:843-761-4900 BLACK, JOHN V PH#: 843-834-5646 Facility Email: BLACKINKMAN@AOL.COM	Berkeley / Sole Proprietorship 445 N HWY 52 STE 101 MONCKS CORNER, SC 29461-3978 BLACK, JOHN V TF-0081 / 11/30/2009	3
NEON NEEDLE TATTOOS 105 EAGLE RD STE 3 GOOSE CREEK, SC 29445-5991 FAC.#:843-569-0315 HEFLEY, STEPHEN E PH#: 843-569-0315 Facility Email: No Facility Email on Record	Berkeley / 105 EAGLE RD STE 3 GOOSE CREEK, SC 29445-5991 NEON NEEDLE TATTOOS LLC TF-0018 / 08/31/2010	3
ROCKSTAR TATTOO STUDIO 1258 RED BANK RD UNIT 101 GOOSE CREEK, SC 29445-6559 FAC.#:843-345-1805 BADGETT, JOSHUA PH#: 410-474-8394 Facility Email: OTISJFLYWHEEL@TMAIL.COM	Berkeley / Limited Liability 206 IRIS ST LADSON, SC 29456-4821 ROCKSTAR TATTOO STUDIO LLC TF-0096 / 07/31/2010	1
SOUTHERN EXPRESSION'S 1066 S LIVE OAK DR MONCKS CORNER, SC 29461-7255 FAC.#:843-761-4789 KIRTON, JEFF W PH#: 843-761-4789 Facility Email: EZRD666@YAHOO.COM	Berkeley / Ltd. Liability 1066 S LIVE OAK DR MONCKS CORNER, SC 29461-7255 SOUTHERN EXPRESSION'S LLC TF-0047 / 08/31/2010	4

Totals For Facility/License Type Tattoo Facility		
Number of Activities/Facilities licensed:	6	Number Licensed Units 16

Number of Activities/Facilities licensed in county of	Berkeley	# Lics	30
	Number Licensed Units :	791	

Report Total

Total Number of Activities/Facilities licensed 30 Total Number Licensed Units 791