

County: Calhoun

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 |
|--|--|---------------|
| MYERS RESIDENTIAL CARE FACILITY 365 CALDON RD SWANSEA, SC 29160-9541 FAC.#:803-568-3582 MYERS, LOUISE PH#: 803-568-3582 Facility Email: MYERSRCF@PBTCOMM.NET | Calhoun / Partnership 365 CALDON RD SWANSEA, SC 29160-9541 LOUISE AND DAVID MYERS JR CRC-0644 / 08/31/2010 | 5 |

Certifications:None

| | | |
|--|--|---|
| MYERS RESIDENTIAL CARE FACILITY II 365 CALDON RD SWANSEA, SC 29160-9541 FAC.#:803-568-3582 MYERS, LOUISE PH#: 803-568-3582 Facility Email: No Facility Email on Record | Calhoun / Partnership 365 CALDON RD SWANSEA, SC 29160-9541 LOUISE AND DAVID MYERS JR CRC-0851 / 01/31/2010 | 7 |
|--|--|---|

Certifications:None

| | |
|---|---|
| Totals For Facility/License Type Community Residential Care Facility | |
| Number of Activities/Facilities licensed: <input type="text" value="2"/> | Number Licensed Units <input type="text" value="12"/> |

County: Calhoun

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 |
|--|---|---------------|
| FLORENCE GRESSETTE RESIDENCE 402 MILLIGAN CIR ST. MATTHEWS, SC 29135 FAC.#:803-655-7585 MOSS, R PIKE PH#: 803-655-7585 Facility Email: PMOSS@CALHOUNDSNB.ORG | Calhoun / State PO BOX 4706 COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR15-0196 / 06/30/2010 | 8 |
| WYLIE BRUNSON RESIDENCE 88 SUNFLOWER RD ST. MATTHEWS, SC 29135 FAC.#:803-655-7559 MOSS, R PIKE PH#: 803-655-7559 Facility Email: PMOSS@CALHOUNDSNB.ORG | Calhoun / State PO BOX 4706 COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR15-0228 / 06/30/2010 | 8 |

Totals For Facility/License Type Habilitation R15

| | | | |
|---|---|-----------------------|----|
| Number of Activities/Facilities licensed: | 2 | Number Licensed Units | 16 |
|---|---|-----------------------|----|

County: Calhoun

Facility Type: Nursing Home

| Facility Name | County/Ownership Typ | Licensed Unit |
|--|---------------------------------|---------------|
| Location Street | Mailing/Billing Address | |
| Location City, State | Licensee | |
| Administrator/Phone | License Nbr/Expiration Date | |
| CALHOUN CONVALESCENT CENTER | Calhoun / Corporation | 120 |
| 601 DANTZLER ST | PO BOX 157 | |
| SAINT MATTHEWS, SC 29135-1522 FAC.#:803-655-7101 | SAINT MATTHEWS, SC 29135-0157 | |
| KIZER, MELISSA R PH#: 803-655-7101 | CALHOUN CONVALESCENT CENTER INC | |
| Facility Email: No Facility Email on Record | NCF-0505 / 01/31/2010 | |
| Licensed Beds Nursing Home 120 | Institutional Nursing Home 0 | |

Certifications:None

| | |
|--|--|
| Totals For Facility/License Type Nursing Home | |
| Number of Activities/Facilities licensed: <input type="text" value="1"/> | Number Licensed Units <input type="text" value="120"/> |

County: Calhoun

Facility Type: Renal Dialysis

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

ST MATTHEWS DIALYSIS
 602 N F R HUFF DR
 SAINT MATTHEWS, SC 29135-9596 FAC.#:803-655-7758
 CROSBY, ANGELA R PH#: 803-245-5166
 Facility Email: No Facility Email on Record

Calhoun / Corporation 12
 5200 VIRGINIA WAY STE 400, DAVITA-LICENSURE & CERTIFICATION
 BRENTWOOD, TN 37027-7569
 DVA HEALTHCARE RENAL CARE INC
 ERD-0066 / 07/31/2010

Licensed Stations: Hemodialysis: 12 Peritoneal: 0

| | | | |
|---|--------------------------------|-----------------------|---------------------------------|
| Totals For Facility/License Type Renal Dialysis | | | |
| Number of Activities/Facilities licensed: | <input type="text" value="1"/> | Number Licensed Units | <input type="text" value="12"/> |

| | | | |
|---|-------------------------|--------|-----|
| Number of Activities/Facilities licensed in county of | Calhoun | # Lics | 6 |
| | Number Licensed Units : | | 160 |

Report Total

Total Number of Activities/Facilities licensed 6 Total Number Licensed Units 160