

**SCDHEC
Nursing Homes**

March 1, 2010

DHEC Regulation 61-17

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

A SAM KARESH LONG TERM CARE CENTER

1315 ROBERTS ST
CAMDEN, SC 29020-3737 FACILITY #:803-713-6376
HANLEY, JEANNE H PH#: 803-713-6376
Facility Email: HANLEY@KERSHAWHEALTH.ORG
Fac. Contact Email: HANLEY@KCMC.ORG

NCF-0313 / 09/30/2010
Kershaw / County
PO BOX 7003
CAMDEN, SC 29021-7003
KERSHAWHEALTH-BOARD OF TRUSTEES

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 96

ABBEVILLE NURSING HOME

83 THOMSON CIR
ABBEVILLE, SC 29620-5652 FACILITY #:864-366-5122
HUGHES SR, ALAN L PH#: 864-366-5122
Facility Email: ABBNH@WCTEL.NET
Fac. Contact Email: ABBNH@WCTEL.NET

NCF-0266 / 12/31/2010
Abbeville / Corporation
PO BOX 190
ABBEVILLE, SC 29620-0190
ABBEVILLE NURSING HOME INC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 94

AGAPE NURSING AND REHABILITATION CENTER

300 AGAPE DR
WEST COLUMBIA, SC 29169-3307 FACILITY #:803-739-5282
SIPPEL, MARILYN E PH#: 803-939-3000
Facility Email: BSIPPEL@AGAPESENIOR.COM
Fac. Contact Email: BSIPPEL@AGAPESENIOR.COM

NCF-0837 / 12/31/2010
Lexington / Corporation
300 AGAPE DR
WEST COLUMBIA, SC 29169-3307
AGAPE NURSING AND REHABILITATION CENTER INC

Alzheimers Care: Y Alzheimers Unit: N Total Number of Licensed Beds 100

AGAPE REHABILITATION OF CONWAY

2320 HWY 378
CONWAY, SC 29527-4911 FACILITY #:843-397-2273
STAUB, MATTHEW J PH#: 843-397-2273
Facility Email: MATT@AGAPESENIOR.COM
Fac. Contact Email: MATT@AGAPESENIOR.COM

NCF-0954 / 03/31/2010
Horry / Corporation
2320 HWY 378
CONWAY, SC 29527-4911
AGAPE REHABILITATION OF CONWAY INC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 72

AGAPE REHABILITATION OF ROCK HILL

159 SEDGEWOOD DR
ROCK HILL, SC 29732-2315 FACILITY #:803-329-6565
HENDERSON, DANIELLE B PH#: 803-329-6565
Facility Email: DHENDERSON@AGAPESENIOR.COM
Fac. Contact Email: DHENDERSON@AGAPESENIOR.COM

NCF-0814 / 02/28/2011
York / Ltd. Liability
159 SEDGEWOOD DR
ROCK HILL, SC 29732-2315
EBENEZER SENIOR SERVICES LLC

Alzheimers Care: Y Alzheimers Unit: N Total Number of Licensed Beds 99

**SCDHEC
Nursing Homes**

March 1, 2010

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
ANDERSON PLACE 311 SIMPSON RD ANDERSON, SC 29621-2157 FACILITY #:864-261-3875 HUNTER, ANDREA M PH#: 864-261-3875 Facility Email: ANDERSONPLACE-ED@EMERITUS.COM Fac. Contact Email: ANDERSONPLACE-ED@EMERITUS.COM	NCF-0872 / 12/31/2010 Anderson / Corporation 3131 ELLIOTT AVE STE 500 SEATTLE, WA 98121-1032 EMERICARE INC

Alzheimers Care: Y Alzheimers Unit: N Total Number of Licensed Beds 44

ARBORETUM OF THE WOODLANDS AT FURMAN NURSING HOME 50 ARBORETUM LN GREENVILLE, SC 29617-6227 FACILITY #:864-371-3100 MACK, JAMES H PH#: 864-371-3100 Facility Email: TCANNADAY@THEWOODLANDSATFURMAN.ORG Fac. Contact Email: No Facility Contact Email on Record	NCF-0957 / 06/30/2010 Greenville / Non-Profit Corporation 1500 TRAILHEAD CT GREENVILLE, SC 29617-6226 UPSTATE SENIOR LIVING INC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 30

AZALEA WOODS 123 DUPONT DR NE AIKEN, SC 29801-4001 FACILITY #:803-648-0434 ARMSTRONG, TIM E PH#: 803-648-0434 Facility Email: No Facility Email on Record Fac. Contact Email: TARMSTRONGLOU@HOTMAIL.COM	NCF-0938 / 12/31/2010 Aiken / Corporation 123 DUPONT DR NE AIKEN, SC 29801-4001 AIKEN NURSING HOME INC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 86

BARNWELL COUNTY NURSING HOME 31 WREN ST BARNWELL, SC 29812-1528 FACILITY #:803-259-5547 PORTER, NANCY PH#: 803-259-5547 Facility Email: NANCY@BARNWELLNURSING.COM Fac. Contact Email: BCNH@BARNWELLSC.COM	NCF-0893 / 04/30/2010 Barnwell / County 31 WREN ST BARNWELL, SC 29812-1528 BARNWELL COUNTY
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 44

BAYVIEW MANOR 11 TODD DR BEAUFORT, SC 29902-6113 FACILITY #:864-703-5100 STEVENS, SHEILA PH#: 843-524-8911 Facility Email: ADMIN@BAYVIEWMANOR.NET Fac. Contact Email: No Facility Contact Email on Record	NCF-0898 / 05/31/2010 Beaufort / Ltd. Liability PO BOX 1103 BEAUFORT, SC 29901-1103 BAYVIEW MANOR LLC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 170

**SCDHEC
Nursing Homes**

March 1, 2010

DHEC Regulation 61-17

**Name of Facility
Location Street
Location City, State
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**License#/Expiration
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Mailing Address
Licensee**

BETHEA BAPTIST HEALTH CARE CENTER
157 HOME AVE
DARLINGTON, SC 29532-7625 FACILITY #:843-393-2867
SPURLING, BENJAMIN S PH#: 843-393-2867
Facility Email: BSPURLING@SCBMA.COM
Fac. Contact Email: BSPURLING@SCBMA.COM

NCF-0189 / 06/30/2010
Darlington / Non-Profit Corporation
157 HOME AVE
DARLINGTON, SC 29532-7625
SOUTH CAROLINA BAPTIST MINISTRIES FOR THE AGING INC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 88

BISHOP GADSDEN EPISCOPAL HEALTH CARE CENTER
3 BISHOP GADSDEN WAY
CHARLESTON, SC 29412-3500 FACILITY #:843-762-3300
TRAWICK, C WILLIAM PH#: 843-762-3300
Facility Email: BILL.TRAWICK@BISHOPGADSDEN.ORG
Fac. Contact Email: LYDIA.CODY@BISHOPGADSDEN.ORG

NCF-0577 / 04/30/2010
Charleston / Non-Profit Corporation
1 BISHOP GADSDEN WAY
CHARLESTON, SC 29412-3501
EPISCOPAL CHURCH HOME

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 50

BLUE RIDGE LIVING CENTER
1850 CRESTVIEW RD
EASLEY, SC 29642-3528 FACILITY #:864-859-3236
MULLINS, LARRIS PH#: 864-859-3236
Facility Email: JSWIFT@HMR-LTC.COM
Fac. Contact Email: JSWIFT@HMR-LTC.COM

NCF-0901 / 09/30/2010
Pickens / Ltd. Liability
101 GRACE DR
EASLEY, SC 29640-9088
BLUE RIDGE LIVING CENTER LLC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 66

BRIAN CENTER OF NURSING CARE-ST ANDREWS
3514 SIDNEY RD
COLUMBIA, SC 29210-4494 FACILITY #:803-798-9715
HOLLOMAN, LISA D PH#: 803-798-9715
Facility Email: STANDREWS@CHOICE-HEALTH.NET
Fac. Contact Email: STANDREWS@CHOICE-HEALTH.NET

NCF-0875 / 05/31/2010
Lexington / Ltd. Liability
3514 SIDNEY RD
COLUMBIA, SC 29210-4494
BRIAN CENTER/ST ANDREWS LLC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 120

BRIARWOOD LIVING CENTER
721 W CURTIS ST
SIMPSONVILLE, SC 29681-2526 FACILITY #:864-967-7191
JOHNSON, DENA CHANEZ PH#: 864-269-3725
Facility Email: JSWIFT@HMR-LTC.COM
Fac. Contact Email: No Facility Contact Email on Record

NCF-0900 / 09/30/2010
Greenville / Limited Liability Company (multiple member)
101 GRACE DR
EASLEY, SC 29640-9088
BRIARWOOD LIVING CENTER LLC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 42

**SCDHEC
Nursing Homes**

March 1, 2010

DHEC Regulation 61-17

Name of Facility
Location Street
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Licensee

BRIGHTON GARDENS BY MARRIOTT OF GREENVILLE
1306 PELHAM RD
GREENVILLE, SC 29615-3600 FACILITY #:864-286-6600
TOWERY, AL M PH#: 864-286-6600
Facility Email: GREENVILLEBG.ED@SUNRISESENIORLIVING.COM
Fac. Contact Email: No Facility Contact Email on Record

NCF-0785 / 02/28/2011
Greenville / Corporation
1306 PELHAM RD OFC
GREENVILLE, SC 29615-3661
SUNRISE SENIOR LIVING SERVICES INC

Alzheimers Care: Y Alzheimers Unit: N Total Number of Licensed Beds 45

BRIGHTWATER SKILLED NURSING CENTER
171 BRIGHTWATER DR
MYRTLE BEACH, SC 29579-8268 FACILITY #:843-903-8300
WOOD, BONNIE S PH#: 843-903-8300
Facility Email: TBAZEN@SENIOR-LIVING-COMMUNITIESCOM
Fac. Contact Email: No Facility Contact Email on Record

NCF-0955 / 04/30/2010
Horry / Limited Liability
171 BRIGHTWATER DR
MYRTLE BEACH, SC 29579-8268
BRIGHTWATER RETIREMENT LLC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 32

BROAD CREEK A CLASSIC RESIDENCE BY HYATT CARE CENTER
801 LEMON GRASS CT
HILTON HEAD ISLAND, SC 29928-3022 FACILITY #:843-341-7300
JOHNSON, STEPHANI PH#: 843-341-7300
Facility Email: SJOHNSON@HYATTCLASSIC.COM
Fac. Contact Email: No Facility Contact Email on Record

NCF-0753 / 07/31/2010
Beaufort / Corporation
700 TIDEPOINTE WAY
HILTON HEAD ISLAND, SC 29928-3040
CC-HILTON HEAD INC

Alzheimers Care: Y Alzheimers Unit: N Total Number of Licensed Beds 25

BROOKSIDE LIVING CENTER
208 JAMES ST
ANDERSON, SC 29625-2942 FACILITY #:864-226-3427
KING, JIMMY PH#: 864-226-3427
Facility Email: JSWIFT@HMR-LTC.COM
Fac. Contact Email: JSWIFT@HMR-LTC.COM

NCF-0909 / 09/30/2010
Anderson / Limited Liability Company (multiple member)
101 GRACE DR
EASLEY, SC 29640-9088
BROOKSIDE LIVING CENTER LLC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 88

BROOKVIEW HEALTHCARE CENTER
510 THOMPSON ST
GAFFNEY, SC 29340-3620 FACILITY #:864-489-3101
SAIN, SUSAN H PH#: 864-489-3101
Facility Email: ADMIN.BRGA.SC@PALMETTOLTC.COM
Fac. Contact Email: ADMIN.BRGA.SC@PALMETTOLTC.COM

NCF-0931 / 09/30/2010
Cherokee / Ltd. Liability
510 THOMPSON ST
GAFFNEY, SC 29340-3620
PALMETTO BROOKVIEW OPERATING LLC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 132

**SCDHEC
Nursing Homes**

March 1, 2010

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
C M TUCKER JR NURSING CARE CENTER FEWELL AND STONE PAVILIONS 2200 HARDEN ST COLUMBIA, SC 29203-7199 FACILITY #:803-737-5313 CORLEY, FRANCES F PH#: 803-737-5399 Facility Email: FFC29@SCDMH.ORG Fac. Contact Email: FFC29@SCDMH.ORG	NCF-0334 / 12/31/2010 Richland / State 2200 HARDEN ST COLUMBIA, SC 29203-7199 SC DEPARTMENT OF MENTAL HEALTH
Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 252	

C M TUCKER JR NURSING CARE CENTER RODDEY PAVILION 2200 HARDEN ST COLUMBIA, SC 29203-7199 FACILITY #:803-737-7194 MOBLEY, NORMA JEAN PH#: 803-737-5339 Facility Email: NJM73@SCDMH.ORG Fac. Contact Email: No Facility Contact Email on Record	NCF-0726 / 12/31/2010 Richland / State 2200 HARDEN ST COLUMBIA, SC 29203-7199 SC DEPARTMENT OF MENTAL HEALTH
Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 308	

CALHOUN CONVALESCENT CENTER 601 DANTZLER ST SAINT MATTHEWS, SC 29135-1522 FACILITY #:803-655-7101 KIZER, MELISSA R PH#: 803-655-7101 Facility Email: No Facility Email on Record Fac. Contact Email: TRACYB@HEALTHCARECORP.NET	NCF-0505 / 01/31/2011 Calhoun / Corporation PO BOX 157 SAINT MATTHEWS, SC 29135-0157 CALHOUN CONVALESCENT CENTER INC
Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 120	

CAMP CARE 59 BLACKSTOCK RD INMAN, SC 29349-1827 FACILITY #:864-472-2028 COTHRAN, WADETTE S PH#: 864-472-2028 Facility Email: WADETTE.COTHRAN@THICARE.COM Fac. Contact Email: SEE DIRECTIONS	NCF-0862 / 08/31/2010 Spartanburg / Ltd. Liability 59 BLACKSTOCK RD INMAN, SC 29349-1827 THI OF SOUTH CAROLINA AT CAMP CARE LLC
Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 88	

CARLISLE NURSING CENTER 18 DR FRANK PRESSLY DR DUE WEST, SC 29639 FACILITY #:864-379-2570 PRIDMORE, R PAUL PH#: 864-379-3210 Facility Email: PPRIDMORE@COVENANTWAY.ORG Fac. Contact Email: DWRC DIR@WCTEL.NET	NCF-0775 / 06/30/2010 Abbeville / Non-Profit Corporation PO BOX 307 DUE WEST, SC 29639-0307 COVENANT WAY
Alzheimers Care: Y Alzheimers Unit: N Total Number of Licensed Beds 22	

**SCDHEC
Nursing Homes**

March 1, 2010

DHEC Regulation 61-17

Name of Facility
Location Street
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Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

CAROLINAS HOSPITAL SYSTEM TRANSITIONAL CARE UNIT
121 E CEDAR ST
FLORENCE, SC 29506-2576 FACILITY #:843-661-3200
SYLVESTER, JANET PH#: 843-674-5000
Facility Email: JOLOUGHLIN@CAROLINASHOSPITAL.COM
Fac. Contact Email: No Facility Contact Email on Record

NCF-0673 / 10/31/2010
Florence / Corporation
PO BOX 100550
FLORENCE, SC 29502-0550
QHG OF SOUTH CAROLINA INC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 24

CARRIAGE HILLS LIVING CENTER
550 EASTGATE DR
AIKEN, SC 29803-7688 FACILITY #:803-643-3694
BOWLES JR, ROBERT F PH#: 803-643-3694
Facility Email: JSWIFT@HMR-LTC.COM
Fac. Contact Email: JSWIFT@HMR-LTC.COM

NCF-0902 / 09/30/2010
Aiken / Ltd. Liability
101 GRACE DR
EASLEY, SC 29640-9088
CARRIAGE HILLS LIVING CENTER LLC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 60

CHERAW HEALTHCARE
400 MOFFAT DR
CHERAW, SC 29520-3048 FACILITY #:843-537-5253
DYSON, JOEL W PH#: 843-537-5253
Facility Email: INFO@CHERAWHC.COM
Fac. Contact Email: INFO@CHERAWHC.COM

NCF-0951 / 04/30/2010
Chesterfield / Corporation
PO BOX 967
CHERAW, SC 29520-0967
CHERAW HEALTHCARE INC

Alzheimers Care: Y Alzheimers Unit: N Total Number of Licensed Beds 120

CHEROKEE COUNTY LONG TERM CARE FACILITY
1434 N LIMESTONE ST
GAFFNEY, SC 29340-4798 FACILITY #:864-487-2717
MATTHEWS, CINDY PH#: 864-487-2717
Facility Email: CINDYMATTHEWSPTC@BELLSOUTH.NET
Fac. Contact Email: SANDRAHOFTIEZERE@HOTMAIL.COM

NCF-0323 / 11/30/2010
Cherokee / County
1434 N LIMESTONE ST
GAFFNEY, SC 29340-4798
CHEROKEE COUNTY

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 111

CHESTER NURSING CENTER
1 MEDICAL PARK DR
CHESTER, SC 29706-9776 FACILITY #:803-581-3151
PARKER, EDWARD SPENCER PH#: 803-581-3151
Facility Email: SPENCER.PARKER@HMA.ORG
Fac. Contact Email: SPENCER.PARKER@HMA.ORG

NCF-0895 / 09/30/2009 (Renewal Pending)
Chester / Corporation
1 MEDICAL PARK DR
CHESTER, SC 29706-9776
CHESTER HMA INC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 100

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
CHESTERFIELD CONVALESCENT CENTER 1150 STATE RD CHERAW, SC 29520-2048 FACILITY #:843-537-2060 TUCKER, RANDY PH#: 843-537-2060 Facility Email: No Facility Email on Record Fac. Contact Email: MARTHAR@HEALTHCARECORP.NET	NCF-0552 / 03/31/2010 Chesterfield / Corporation PO BOX 1329 CHERAW, SC 29520-1329 CHESTERFIELD CONVALESCENT CENTER INC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 104

CLEMSON AREA RETIREMENT CENTER-HEALTH CARE CENTER 500 DOWNS LOOP CLEMSON, SC 29631-2099 FACILITY #:864-654-1155 LEHEUP, JOHN D PH#: 864-654-1155 Facility Email: WANDAPALMER@CLEMSONDOWNS.COM Fac. Contact Email: No Facility Contact Email on Record	NCF-0391 / 10/31/2010 Pickens / Corporation 500 DOWNS LOOP CLEMSON, SC 29631-2099 CARC INC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 52

COMMANDER NURSING CENTER 4438 PAMPLICO HWY FLORENCE, SC 29505-8502 FACILITY #:843-669-3502 COMMANDER III, JOE M PH#: 843-669-3502 Facility Email: No Facility Email on Record Fac. Contact Email: CMDNURSING@AOL.COM	NCF-0233 / 07/31/2010 Florence / Corporation 4438 PAMPLICO HWY FLORENCE, SC 29505-8502 COMMANDER HEALTH CARE FACILITIES INC
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Alzheimers Care: Y Alzheimers Unit: N Total Number of Licensed Beds 163

CONWAY MANOR 3300 4TH AVE CONWAY, SC 29527-6099 FACILITY #:843-248-5728 TILLER, RAYMOND G PH#: 843-248-5728 Facility Email: RTILLER@CONWAYMANOR.NET Fac. Contact Email: RTILLER@CONWAYMANOR.NET	NCF-0899 / 05/31/2010 Horry / Ltd. Liability 3300 4TH AVE CONWAY, SC 29527-6099 CONWAY MANOR LLC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 190

COOKE ASSOCIATES OF FLORENCE 133 W CLARKE RD FLORENCE, SC 29501-0722 FACILITY #:843-669-4374 HAMMOND, NANCY R PH#: 843-669-4374 Facility Email: No Facility Email on Record Fac. Contact Email: RHAMMOND@COOKE-ASSOCIATES.COM	NCF-0935 / 12/31/2010 Florence / Corporation 133 W CLARKE RD FLORENCE, SC 29501-0722 COOKE ASSOCIATES OF FLORENCE INC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 88

DHEC Regulation 61-17

**Name of Facility
Location Street
Location City, State
Administrator**

**License#/Expiration
County/Ownership Type
Mailing Address
Licensee**

COTTAGES AT BRUSHY CREEK

101 COTTAGE CREEK CIR
GREER, SC 29650-2438 FACILITY #:864-797-8990
NICHOLS, KAREN H PH#: 864-797-8800
Facility Email: GHSNET@GHS.ORG
Fac. Contact Email: LPARKS@GHS.ORG

NCF-0945 / 10/31/2010
Greenville / District
300 E MCBEE AVE, SUNTRUST BLDG 2ND FLR
GREENVILLE, SC 29601-2842
GREENVILLE HOSPITAL SYSTEM

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 144

COUNTRYSIDE HEALTHCARE CENTER

706 PELZER HWY
EASLEY, SC 29642-2941 FACILITY #:864-859-0167
HAIR, BRANDON PH#: 864-859-4684
Facility Email: No Facility Email on Record
Fac. Contact Email: No Facility Contact Email on Record

NCF-0701 / 01/31/2011
Pickens / Corporation
3131 ELLIOTT AVE STE 500
SEATTLE, WA 98121-1032
EMERITUS CORPORATION

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 44

COUNTRYWOOD NURSING CENTER

1645 RIDGE RD
HOPKINS, SC 29061-8432 FACILITY #:803-776-3873
HUNT, JOE R PH#: 803-776-3873
Facility Email: No Facility Email on Record
Fac. Contact Email: No Facility Contact Email on Record

NCF-0946 / 11/30/2010
Richland / Ltd. Liability
1645 RIDGE RD
HOPKINS, SC 29061-8432
COUNTRYWOOD NURSING CENTER LLC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 38

COVENANT PLACE NURSING CENTER

2825 CARTER RD OFC
SUMTER, SC 29150-1736 FACILITY #:803-469-7007
LINDER SR, RISLEY E PH#: 803-469-7007
Facility Email: RLINDER@COVENANTPLACE.ORG
Fac. Contact Email: No Facility Contact Email on Record

NCF-0632 / 05/31/2010
Sumter / Non-Profit Corporation
2825 CARTER RD OFC
SUMTER, SC 29150-1736
COVENANT PLACE OF SUMTER INC

Alzheimers Care: Y Alzheimers Unit: Y Total Number of Licensed Beds 44

COVENANT TOWERS HEALTH CARE

5001 LITTLE RIVER RD
MYRTLE BEACH, SC 29577-2478 FACILITY #:843-449-2484
HENDRICK, DEBBIE M PH#: 843-449-2484
Facility Email: DEBBIE@COVENANTTOWERS.COM
Fac. Contact Email: CAROL@COVENANTTOWERS.COM

NCF-0469 / 08/31/2010
Horry / Non-Profit Corporation
5001 LITTLE RIVER RD, COVENANT TOWERS W-505
MYRTLE BEACH, SC 29577-2478
COVENANT TOWERS HOMEOWNERS ASSOCIATION INC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 30

**SCDHEC
Nursing Homes**

March 1, 2010

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**Name of Facility
Location Street
Location City, State
Administrator**

**License#/Expiration
County/Ownership Type
Mailing Address
Licensee**

DR RONALD E MCNAIR NURSING AND REHABILITATION CENTER
56 GENESIS DR
LAKE CITY, SC 29560-5531 FACILITY #:843-389-3685
FRIERSON, SARAH L PH#: 843-389-3685
Facility Email: MCNAIRNSGCTR@FTC-I.NET
Fac. Contact Email: MCNAIRNSGCTR@FTC-I.NET

NCF-0918 / 11/30/2010
Florence / Corporation
PO BOX 1598
LAKE CITY, SC 29560-1598
HEALTHCARE PANASCOPE INC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 88

DRIFTWOOD REHABILITATION AND NURSING CENTER
2375 BAKER HOSPITAL BLVD
NORTH CHARLESTON, SC 29405-8291 FACILITY #:843-744-2750
THOMAS, JAMES G PH#: 843-744-2750
Facility Email: JIM.THOMAS@THICARECOM
Fac. Contact Email: JIM.THOMAS@THICARE.COM

NCF-0870 / 08/31/2010
Charleston / Ltd. Liability
2375 BAKER HOSPITAL BLVD
NORTH CHARLESTON, SC 29405-8291
THI OF SOUTH CAROLINA AT CHARLESTON LLC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 160

DUNDEE MANOR
710 15-401 BYP W
BENNETTSVILLE, SC 29512-3641 FACILITY #:864-703-5100
GRIGGS, DEBRA G PH#:
Facility Email: HHANNA@DUNDEEMANOR.NET
Fac. Contact Email: No Facility Contact Email on Record

NCF-0897 / 05/31/2010
Marlboro / Ltd. Liability
PO BOX 858
BENNETTSVILLE, SC 29512-0858
DUNDEE MANOR LLC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 110

EASLEY LIVING CENTER
200 ANNE DR
EASLEY, SC 29640-2061 FACILITY #:864-859-9754
FERGUSON-DICKEY, SANDRA PH#: 864-269-3725
Facility Email: JSWIFT@HMR-LTC.COM
Fac. Contact Email: No Facility Contact Email on Record

NCF-0913 / 09/30/2010
Pickens / Ltd. Liability
101 GRACE DR
EASLEY, SC 29640-9088
EASLEY LIVING CENTER LLC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 103

ELLEN SAGAR NURSING HOME
1817 JONESVILLE HWY
UNION, SC 29379-9793 FACILITY #:864-427-5187
WINN, ANNE O PH#: 864-427-5187
Facility Email: ESNHADMINISTRATION@BELLSOUTH.NET
Fac. Contact Email: ESNHADMIN@BELLSOUTH.NET

NCF-0217 / 11/30/2010
Union / District
1817 JONESVILLE HWY
UNION, SC 29379-9793
UNION HOSPITAL DISTRICT

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 113

**SCDHEC
Nursing Homes**

March 1, 2010

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
ELLENBURG NURSING CENTER 611 E HAMPTON ST ANDERSON, SC 29624-2899 FACILITY #:864-226-5054 ELLENBURG, LYNDON W PH#: 864-226-5054 Facility Email: FUZZERONE@AOL.COM Fac. Contact Email: FUZZERONE@AOL.COM	NCF-0231 / 03/31/2010 Anderson / Corporation 611 E HAMPTON ST ANDERSON, SC 29624-2899 ELLENBURG NURSING CENTER INC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 181

FAIRFIELD HEALTHCARE CENTER 117 BELLFIELD RD RIDGEWAY, SC 29130-8261 FACILITY #:803-337-2257 NESMITH, NATHAN PH#: 803-337-2257 Facility Email: NNESMITH@LAURELBAYECOM Fac. Contact Email: No Facility Contact Email on Record	NCF-0776 / 06/30/2010 Fairfield / Ltd. Liability PO BOX 70 RIDGEWAY, SC 29130-0070 FAIRFIELD HEALTHCARE CENTER LLC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 112

FAITH HEALTHCARE CENTER 617 W MARION ST FLORENCE, SC 29501-2470 FACILITY #:843-669-9958 SWINTON-MICKENS, EVELYN PH#: 843-669-9958 Facility Email: ADMINFA.SC@PALMETTOLTC.COM Fac. Contact Email: ADMIN.FA.SC@PALMETTOLTC.COM	NCF-0927 / 09/30/2010 Florence / Ltd. Liability 617 W MARION ST FLORENCE, SC 29501-2470 PALMETTO FAITH OPERATING LLC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 104

FALLS CREEK LIVING CENTER 2906 GEER HWY MARIETTA, SC 29661-9517 FACILITY #:864-836-6381 ELLIOTT, ILENE D PH#: 864-292-2416 Facility Email: No Facility Email on Record Fac. Contact Email: CHTAYLORS@BELLSOUTH.NET	NCF-0920 / 05/31/2010 Greenville / Ltd. Liability 101 GRACE DR EASLEY, SC 29640-9088 FALLS CREEK LIVING CENTER LLC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 44

FOUNTAIN INN NURSING HOME 501 GULLIVER ST FOUNTAIN INN, SC 29644-2105 FACILITY #:864-862-2554 BAUGHMAN, KATHY J PH#: 864-862-2554 Facility Email: KBAUGHMAN@COOKE-ASSOCIATESCOM Fac. Contact Email: FINH_EMAIL@YAHOO.COM	NCF-0939 / 03/31/2010 Greenville / Limited Liability PO BOX 67 FOUNTAIN INN, SC 29644-0067 COOKE ASSOCIATES OF FOUNTAIN INN LLC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 60

**SCDHEC
Nursing Homes**

March 1, 2010

DHEC Regulation 61-17

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

FRANKE HEALTH CARE CENTER
1885 RIFLE RANGE RD
MOUNT PLEASANT, SC 29464-9440 FACILITY #:843-856-4700
STOLL, SANDRA A PH#: 843-856-4700
Facility Email: SSTOLL@FRANKEATSEASIDE.ORG
Fac. Contact Email: No Facility Contact Email on Record

NCF-0800 / 07/31/2010
Charleston / Non-Profit Corporation
1885 RIFLE RANGE RD
MOUNT PLEASANT, SC 29464-9440
LUTHERAN HOMES OF SOUTH CAROLINA INC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 44

FRASER HEALTH CARE
300 WOODHAVEN DR
HILTON HEAD ISLAND, SC 29928-4682 FACILITY #:843-842-3747
MILLER, LINDA D PH#: 843-842-3747
Facility Email: LMILLER@HARGRAY.COM
Fac. Contact Email: LMILLER@HARGRAY.COM

NCF-0414 / 09/30/2010
Beaufort / Corporation
300 WOODHAVEN DR
HILTON HEAD ISLAND, SC 29928-4682
SEABROOK OF HILTON HEAD INC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 33

GEORGETOWN HEALTHCARE & REHAB
2715 S ISLAND RD
GEORGETOWN, SC 29440-4415 FACILITY #:843-546-4123
RABY, SHEILA W PH#: 843-546-4123
Facility Email: ADMIN@GEORGETOWNHEALTHCARE.NET
Fac. Contact Email: ADMIN@GEORGETOWNHEALTHCARE.NET

NCF-0633 / 03/31/2010
Georgetown / Corporation
2715 S ISLAND RD
GEORGETOWN, SC 29440-4415
GEORGETOWN HEALTHCARE & REHAB INC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 84

GOLDEN AGE-INMAN
82 N MAIN ST
INMAN, SC 29349-1416 FACILITY #:864-472-6636
JOHNSON, TIMOTHY A PH#: 864-472-6636
Facility Email: TIMOTHY.JOHNSON@THICARE.COM
Fac. Contact Email: SEE DIRECTIONS

NCF-0857 / 08/31/2010
Spartanburg / Ltd. Liability
82 N MAIN ST
INMAN, SC 29349-1416
THI OF SOUTH CAROLINA AT GOLDEN AGE-INMAN LLC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 44

GRACE HALL REHABILITATION
1010 LAKE HUNTER CIR
MOUNT PLEASANT, SC 29464-5417 FACILITY #:843-388-2030
DEFOOR, KENNETH E PH#: 843-388-2030
Facility Email: KDEFOOR@SDBELL.COM
Fac. Contact Email: No Facility Contact Email on Record

NCF-0926 / 12/31/2010
Charleston / Corporation
1010 LAKE HUNTER CIR
MOUNT PLEASANT, SC 29464-5417
SAVANNAH GRACE HALLS LP

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 42

**SCDHEC
Nursing Homes**

March 1, 2010

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
GRAND STRAND HEALTHCARE 4452 SOCASTEE BLVD MYRTLE BEACH, SC 29588-7253 FACILITY #:843-293-1137 BRANTON, HAROLD D PH#: 843-293-1137 Facility Email: NORMA29578@AOL.COM Fac. Contact Email: NORMA29578@AOL.COM	NCF-0573 / 03/31/2010 Horry / Corporation 4452 SOCASTEE BLVD MYRTLE BEACH, SC 29588-7253 GRAND STRAND HEALTHCARE INC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 88

GREENVILLE LIVING CENTER 809 LAURENS RD GREENVILLE, SC 29607-1914 FACILITY #:864-232-8196 MCLEOD, CHARLES H PH#: 864-967-7191 Facility Email: JSWIFT@HMR-LTC.COM Fac. Contact Email: JSWIFT@HMR-LTC.COM	NCF-0912 / 09/30/2010 Greenville / Ltd. Liability 101 GRACE DR EASLEY, SC 29640-9088 GREENVILLE LIVING CENTER LLC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 79

GREENVILLE MEMORIAL MEDICAL CENTER SUBACUTE UNIT 701 GROVE RD GREENVILLE, SC 29605-5611 FACILITY #:864-455-5993 HEALY, STANLEY PH#: 864-455-7000 Facility Email: BETHEREDGE@GHS.ORG Fac. Contact Email: WWW.GHSNET.GHS.ORG	NCF-0934 / 02/28/2011 Greenville / District 300 E MCBEE AVE, SUNTRUST BLDG 2ND FLR GREENVILLE, SC 29601-2842 GREENVILLE HOSPITAL SYSTEM
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 15

GREENWOOD TRANSITIONAL REHABILITATION UNIT 1530 PKWY GREENWOOD, SC 29646-4027 FACILITY #:864-330-1800 KAGLE, TIM PH#: 864-330-9070 Facility Email: KAGLET@ERNESTHEALTH.COM Fac. Contact Email: TIMKAGLE@ERNESTHEALTH.COM	NCF-0944 / 10/31/2010 Greenwood / Ltd. Liability 1530 PKWY GREENWOOD, SC 29646-4027 GREENWOOD REGIONAL REHABILITATION HOSPITAL LLC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 12

HALLMARK HEALTHCARE CENTER 255 MIDLAND PKWY SUMMERVILLE, SC 29485-8104 FACILITY #:843-821-5005 STINSON, DURENA PH#: 843-821-5005 Facility Email: ADMINHASNSC@PALMETTOLTC.COM Fac. Contact Email: ADMIN.HASU.SC@PALMETTOLTC.COM	NCF-0932 / 09/30/2010 Dorchester / Ltd. Liability 255 MIDLAND PKWY SUMMERVILLE, SC 29485-8104 PALMETTO HALLMARK OPERATING LLC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 88

**SCDHEC
Nursing Homes**

March 1, 2010

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
HEALTH CARE CENTER OF WESLEY COMMONS 1110 MARSHALL RD GREENWOOD, SC 29646-4299 FACILITY #:864-227-7250 HOLMES, KIMBERLY K PH#: 864-227-7250 Facility Email: KHOMES@WESLEYCOMMONS.ORG Fac. Contact Email: KHOLMES@WESLEYCOMMONS.ORG	NCF-0304 / 03/31/2010 Greenwood / Non-Profit Corporation 1110 MARSHALL RD GREENWOOD, SC 29646-4299 WESLEY COMMONS

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 102

HEARTLAND HEALTH CARE CENTER-CHARLESTON 1800 EAGLE LANDING BLVD HANAHAN, SC 29410-8517 FACILITY #:843-553-0656 COURY, WILLIAM V PH#: 843-553-0656 Facility Email: 4015-ADMIN@HCR-MANORCARE.COM Fac. Contact Email: 4015-ADMIN@HCR-MANORCARE.COM	NCF-0526 / 12/31/2010 Berkeley / Limited Liability 1800 EAGLE LANDING BLVD HANAHAN, SC 29410-8517 HEARTLAND-CHARLESTON OF HANAHAN SC LLC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 105

HEARTLAND OF COLUMBIA REHABILITATION & NURSING CENTER 2601 FOREST DR COLUMBIA, SC 29204-2363 FACILITY #:803-256-4983 HAMM, SUE PH#: 803-256-4983 Facility Email: 512-ADMIN@HCR-MANORCARE.COM Fac. Contact Email: No Facility Contact Email on Record	NCF-0316 / 12/31/2010 Richland / Limited Liability 2601 FOREST DR COLUMBIA, SC 29204-2363 COLUMBIA REHABILITATION AND NURSING CENTER - COLUMBIA SC LLC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 132

HEARTLAND OF LEXINGTON REHABILITATION AND NURSING CENTER 2416 SUNSET BLVD WEST COLUMBIA, SC 29169-4791 FACILITY #:803-796-8024 BROWN, HAZEL D PH#: 803-256-4983 Facility Email: 526-ADMIN@HCR-MANORCARE.COM Fac. Contact Email: 512-ADMIN@HCR-MANORCARE.COM	NCF-0948 / 12/31/2010 Lexington / Ltd. Liability 2416 SUNSET BLVD WEST COLUMBIA, SC 29169-4791 LEXINGTON REHABILITATION AND NURSING CENTER-LEXINGTON SC LLC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 132

HEARTLAND OF WEST ASHLEY REHABILITATION AND NURSING CENTER 1137 SAM RITTENBERG BLVD CHARLESTON, SC 29407-3370 FACILITY #:843-763-0233 MCDANIEL, WILLIAM J PH#: 843-763-0233 Facility Email: 531-ADMIN@HCR-MANORCARE.COM Fac. Contact Email: 531-ADMIN@HCR-MANORCARE.COM	NCF-0413 / 12/31/2010 Charleston / Limited Liability 1137 SAM RITTENBERG BLVD CHARLESTON, SC 29407-3370 WEST ASHLEY REHABILITATION AND NURSING CENTER - CHARLESTON SC LLC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 99

**SCDHEC
Nursing Homes**

March 1, 2010

DHEC Regulation 61-17

**Name of Facility
Location Street
Location City, State
Administrator**

**License#/Expiration
County/Ownership Type
Mailing Address
Licensee**

HERITAGE AT LOWMAN REHABILITATION AND HEALTHCARE
201 FORTRESS DR
WHITE ROCK, SC 29177 FACILITY #:803-732-3000
YETTER, MELISSA T PH#: 803-732-3000
Facility Email: MYETTER@LHOMES.ORG
Fac. Contact Email: MYETTER@LHOMES.ORG

NCF-0688 / 05/31/2010
Richland / Non-Profit Corporation
PO BOX 444
WHITE ROCK, SC 29177-0444
LUTHERAN HOMES OF SOUTH CAROLINA INC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 176

HERITAGE HEALTHCARE AT THE PINES
413 LAKESIDE CT
DILLON, SC 29536-1999 FACILITY #:843-774-2741
SANTILLI, MICHELLE L PH#: 843-774-2741
Facility Email: MSANTILLI@UHS-PRUITT.COM
Fac. Contact Email: MSANTILLI@UHS-PRUITT.COM

NCF-0835 / 11/30/2010
Dillon / Ltd. Liability
413 LAKESIDE CT
DILLON, SC 29536-1999
HERITAGE HEALTHCARE AT THE PINES LLC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 84

HERITAGE HEALTHCARE OF PICKENS
163 LOVE AND CARE RD
SIX MILE, SC 29682-9569 FACILITY #:864-868-2307
CARR, JOSEPH J PH#: 864-868-2307
Facility Email: No Facility Email on Record
Fac. Contact Email: No Facility Contact Email on Record

NCF-0580 / 04/30/2010
Pickens / Limited Liability
163 LOVE AND CARE RD
SIX MILE, SC 29682-9569
HERITAGE HEALTHCARE OF PICKENS LLC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 44

HERITAGE HEALTHCARE OF WALTERBORO
401 WITSELL ST
WALTERBORO, SC 29488-3052 FACILITY #:843-549-5546
STEPHENSON, REBECCA S PH#: 843-549-5546
Facility Email: RESTEPHENSON@UHS-PRUITT.COM
Fac. Contact Email: RESTEPHENSON@UHS-PRUITT.COM

NCF-0949 / 10/31/2010
Colleton / Ltd. Liability
401 WITSELL ST
WALTERBORO, SC 29488-3052
HERITAGE HEALTHCARE OF WALTERBORO LLC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 132

HERITAGE HOME OF FLORENCE
515 S WARLEY ST
FLORENCE, SC 29501-5199 FACILITY #:843-662-4573
SKINNER SR, JEFFREY V PH#: 843-662-4573
Facility Email: No Facility Email on Record
Fac. Contact Email: JEFFSKINNER@SC.RR.COM

NCF-0450 / 02/28/2011
Florence / Corporation
515 S WARLEY ST
FLORENCE, SC 29501-5199
HERITAGE HOME OF FLORENCE INC

Alzheimers Care: Y Alzheimers Unit: N Total Number of Licensed Beds 132

**SCDHEC
Nursing Homes**

March 1, 2010

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
HONORAGE NURSING CENTER 1207 N CASHUA RD FLORENCE, SC 29501-6969 FACILITY #:843-665-6172 CLARKE, HOWARD W PH#: 843-665-6172 Facility Email: No Facility Email on Record Fac. Contact Email: PTAYLOR1549@AOL.COM	NCF-0329 / 12/31/2010 Florence / Corporation 1207 N CASHUA RD FLORENCE, SC 29501-6969 HONORAGE NURSING HOME OF FLORENCE SC INC

Alzheimers Care: Y Alzheimers Unit: N Total Number of Licensed Beds 88

HOPEWELL HEALTH CARE CENTER 1761 PINWOOD RD SUMTER, SC 29154-9056 FACILITY #:803-481-8591 BURNS, ROBERT W PH#: Facility Email: No Facility Email on Record Fac. Contact Email: No Facility Contact Email on Record	NCF-0745 / 10/31/2010 Sumter / Corporation 1761 PINWOOD RD SUMTER, SC 29154-9056 HP/HOPEWELL INC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 96

INMAN HEALTHCARE 51 N MAIN ST INMAN, SC 29349-1437 FACILITY #:864-472-9370 KILPATRICK, LYNN D PH#: Facility Email: LYNN.KILPATRICK@THICARE.COM Fac. Contact Email: No Facility Contact Email on Record	NCF-0864 / 08/31/2010 Spartanburg / Corporation 51 N MAIN ST INMAN, SC 29349-1437 THI OF SOUTH CAROLINA AT INMAN LLC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 40

ISLAND OAKS LIVING CENTER 3647 MAYBANK HWY JOHNS ISLAND, SC 29455-4825 FACILITY #:843-559-5888 BYRUM, DENA BYRD PH#: 864-269-3725 Facility Email: JSWIFT@HMR-LTC.COM Fac. Contact Email: No Facility Contact Email on Record	NCF-0911 / 09/30/2010 Charleston / Ltd. Liability 101 GRACE DR EASLEY, SC 29640-9088 ISLAND OAKS LIVING CENTER LLC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 132

J F HAWKINS NURSING HOME 1330 KINARD ST NEWBERRY, SC 29108-3096 FACILITY #:803-276-2601 GAMBILL, ELIZABETH A PH#: 803-284-4313 Facility Email: GGAMBILL@JFHAWKINS.ORG Fac. Contact Email: No Facility Contact Email on Record	NCF-0234 / 06/30/2010 Newberry / County 1330 KINARD ST NEWBERRY, SC 29108-3096 NEWBERRY COUNTY
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Alzheimers Care: Y Alzheimers Unit: Y Total Number of Licensed Beds 118

**SCDHEC
Nursing Homes**

March 1, 2010

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
JOHN EDWARD HARTER NURSING CENTER 185 REVOLUTIONARY TRL FAIRFAX, SC 29827-7105 FACILITY #:803-632-3334 HIATT, MELVIN K PH#: 803-632-3334 Facility Email: ADMINKH@ACHOSPITAL.ORG Fac. Contact Email: ADMINKH@ACHOSPITAL.ORG	NCF-0259 / 04/30/2010 Allendale / County PO BOX 218 FAIRFAX, SC 29827-0218 ALLENDALE COUNTY HOSPITAL

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 44

JOLLEY ACRES HEALTHCARE CENTER 1180 WOLFE TRL ORANGEBURG, SC 29115-7339 FACILITY #:803-534-1001 HOUSER, DEANA PH#: 803-534-1001 Facility Email: ADMIN.JO.SC@PALMETTOLTC.COM Fac. Contact Email: ADMIN.JO.SC@PALMETTOLTC.COM	NCF-0929 / 09/30/2010 Orangeburg / Ltd. Liability 1180 WOLFE TRL ORANGEBURG, SC 29115-7339 PALMETTO JOLLEY ACRES OPERATING LLC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 60

KINGSTON NURSING CENTER 2379 CYPRESS CIR CONWAY, SC 29526-8921 FACILITY #:843-347-8179 FOWLER, LAURA L PH#: 843-347-8179 Facility Email: LFOWLER@CMC-SC.COM Fac. Contact Email: LFOWLER@CMC-SC.COM	NCF-0518 / 06/30/2010 Horry / Non-Profit Corporation PO BOX 1496 CONWAY, SC 29528-1496 CONWAY HOSPITAL INC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 88

KINGSTREE NURSING FACILITY 401 NELSON BLVD KINGSTREE, SC 29556-4024 FACILITY #:843-355-6116 SLAVINSKI, CANDICE J PH#: 843-355-6116 Facility Email: CSLAVINSKI@COOKEASSOCIATES.COM Fac. Contact Email: CSLAVINSKI@COOKE-ASSOCIATES.COM	NCF-0937 / 12/31/2010 Williamsburg / Corporation 401 NELSON BLVD KINGSTREE, SC 29556-4024 KINGSTREE NURSING FACILITY INC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 96

LAKE CITY-SCRANTON HEALTHCARE CENTER 1940 BOYD RD SCRANTON, SC 29591-5835 FACILITY #:843-389-9201 KNEELAND, ROBERT E PH#: 803-817-1733 Facility Email: ADMIN.LACI@PALMETTOLTC.COM Fac. Contact Email: No Facility Contact Email on Record	NCF-0928 / 09/30/2010 Florence / Ltd. Liability 1940 BOYD RD SCRANTON, SC 29591-5835 PALMETTO LAKE CITY OPERATING LLC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 88

**SCDHEC
Nursing Homes**

March 1, 2010

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
LAKE MARION NURSING FACILITY 1527 URBANA RD SUMMERTON, SC 29148-8929 FACILITY #:803-485-2317 MCLEOD, MARY W PH#: 803-485-2317 Facility Email: LMCLEOD@CLARENDONHEALTH.COM Fac. Contact Email: LMCLEOD@CLARENDONHEALTH.COM	NCF-0736 / 01/31/2011 Clarendon / Non-Profit Corporation PO BOX 1159 SUMMERTON, SC 29148-1159 CLARENDON HOSPITAL DISTRICT

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 88

LAKE MOULTRIE NURSING HOME 1038 MCGILL LN SAINT STEPHEN, SC 29479-3196 FACILITY #:843-567-2307 DRIGGERS, JOANN C PH#: 843-567-2307 Facility Email: JDRIGGERS@CLARENDONHEALTH.COM Fac. Contact Email: JDRIGGERS@CLARENDONMEMORIAL.COM	NCF-0738 / 12/31/2010 Berkeley / Non-Profit Corporation PO BOX 1108 SAINT STEPHEN, SC 29479-1108 CLARENDON HOSPITAL DISTRICT
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 88

LAKES AT LITCHFIELD SKILLED NURSING CENTER 80 TIMBERVIEW CT PAWLEYS ISLAND, SC 29585-5798 FACILITY #:843-235-9393 RICHARDSON, JACQUE W PH#: 843-235-9393 Facility Email: JRICARDSON@LAKES-LITCHFIELD.COM Fac. Contact Email: No Facility Contact Email on Record	NCF-0843 / 12/31/2010 Georgetown / Ltd. Liability 120 LAKES AT LITCHFIELD DR PAWLEYS ISLAND, SC 29585-5515 LITCHFIELD RETIREMENT LLC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 24

LANCASTER CONVALESCENT CENTER 2044 PAGELAND HWY LANCASTER, SC 29720-7608 FACILITY #:803-285-7907 SCHOLL, DEBORAH M PH#: 803-285-7907 Facility Email: DSCHOLL@CONPORIUM.NET Fac. Contact Email: SWTLIPSRN@GMAIL.COM	NCF-0551 / 04/30/2010 Lancaster / Corporation PO BOX 1749 LANCASTER, SC 29721-1749 LANCASTER CONVALESCENT CENTER INC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 142

LAUREL BAYE HEALTHCARE OF BLACKVILLE 1612 JONES BRIDGE RD BLACKVILLE, SC 29817-3066 FACILITY #:803-284-4313 BROADFOOT, BOB PH#: 803-284-4313 Facility Email: BBROADFOOT@LAURELBAYE.COM Fac. Contact Email: LAURELBAYE.COM	NCF-0755 / 08/31/2010 Barnwell / Ltd. Liability 1612 JONES BRIDGE RD BLACKVILLE, SC 29817-3066 LAUREL BAYE HEALTHCARE OF BLACKVILLE LLC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 85

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
LAUREL BAYE HEALTHCARE OF GREENVILLE 661 RUTHERFORD RD GREENVILLE, SC 29609-4696 FACILITY #:864-232-2442 NADKARNI MS, NATASHA A PH#: 843-216-6800 Facility Email: TBAXLEY@LAURELBAYECOM Fac. Contact Email: No Facility Contact Email on Record	NCF-0805 / 04/30/2010 Greenville / Ltd. Liability 661 RUTHERFORD RD GREENVILLE, SC 29609-4696 LAUREL BAYE HEALTHCARE OF GREENVILLE LLC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 132

LAUREL BAYE HEALTHCARE OF ORANGEBURG 575 STONEWALL JACKSON BLVD ORANGEBURG, SC 29115-7250 FACILITY #:803-534-7771 GILSTRAP, DEBRA L PH#: Facility Email: No Facility Email on Record Fac. Contact Email: No Facility Contact Email on Record	NCF-0858 / 10/31/2010 Orangeburg / Ltd. Liability 575 STONEWALL JACKSON BLVD ORANGEBURG, SC 29115-7250 LAUREL BAYE HEALTHCARE OF ORANGEBURG LLC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 113

LAUREL BAYE HEALTHCARE OF WILLISTON 5721 SPRINGFIELD RD WILLISTON, SC 29853-1917 FACILITY #:803-266-3229 GUZMAN, CHARLES N PH#: 803-531-7771 Facility Email: KDERRICK@LAURELBAYE.COM Fac. Contact Email: CGUZMAN@LAURELBAYE.COM	NCF-0754 / 08/31/2010 Barnwell / Ltd. Liability PO BOX 250 WILLISTON, SC 29853-0250 LAUREL BAYE HEALTHCARE OF WILLISTON LLC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 44

LAUREL CREST RETIREMENT CENTER 100 JOSEPH WALKER DR WEST COLUMBIA, SC 29169-6939 FACILITY #:803-796-0370 BRYAN, MARY Y PH#: 803-796-0370 Facility Email: MBRYAN@LAUREL-CREST.COM Fac. Contact Email: M.BRYAN@LAUREL-CREST.COM	NCF-0647 / 09/30/2010 Lexington / Non-Profit Corporation 100 JOSEPH WALKER DR WEST COLUMBIA, SC 29169-6939 FPCRC INC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 12

LAUREL HILL LIVING CENTER 716 E CEDAR ROCK ST PICKENS, SC 29671-2324 FACILITY #:864-878-4739 GRIGGS, TODD PH#: Facility Email: JSWIFT@HMR-LTC.COM Fac. Contact Email: No Facility Contact Email on Record	NCF-0910 / 09/30/2010 Pickens / Ltd. Liability 101 GRACE DR EASLEY, SC 29640-9088 LAUREL HILL LIVING CENTER LLC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 80

**SCDHEC
Nursing Homes**

March 1, 2010

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
LAURENS COUNTY HEALTH CARE SYSTEM SKILLED NURSING FACILITY 22725 HWY 76 E CLINTON, SC 29325-7527 FACILITY #:864-938-2843 FISCUS, DEBORAH B PH#: 864-938-2843 Facility Email: DFISCUS@LCHCSORG Fac. Contact Email: DFISCUS@LCHCS.ORG	NCF-0786 / 04/30/2010 Laurens / District 22725 HWY 76 E CLINTON, SC 29325-7527 LAURENS COUNTY HEALTH CARE SYSTEM
Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 14	

LEXINGTON MEDICAL CENTER EXTENDED CARE 815 OLD CHEROKEE RD LEXINGTON, SC 29072-8115 FACILITY #:803-359-5181 STOWE, RICHARD W PH#: 803-359-5181 Facility Email: WSTOWE@LEXHEALTH.ORG Fac. Contact Email: WSTOWE@LEXHEALTH.ORG	NCF-0730 / 12/31/2010 Lexington / Corporation 815 OLD CHEROKEE RD LEXINGTON, SC 29072-8115 LEXMED INC
Alzheimers Care: N Alzheimers Unit: Y Total Number of Licensed Beds 388	

LIFE CARE CENTER OF CHARLESTON 2600 ELMS PLANTATION BLVD NORTH CHARLESTON, SC 29406-9180 FACILITY #:843-764-3500 CLIETT, BETH A PH#: 843-764-3500 Facility Email: No Facility Email on Record Fac. Contact Email: BETH_CLIETT@LCCA.COM	NCF-0878 / 11/30/2010 Charleston / Ltd. Liability 2600 ELMS PLANTATION BLVD NORTH CHARLESTON, SC 29406-9180 CHARLESTON MEDICAL INVESTORS LLC
Alzheimers Care: Y Alzheimers Unit: Y Total Number of Licensed Beds 148	

LIFE CARE CENTER OF COLUMBIA 2514 FARAWAY DR COLUMBIA, SC 29223-3969 FACILITY #:803-865-1999 JEROME, MARGARET K PH#: Facility Email: LCCA.COM Fac. Contact Email: No Facility Contact Email on Record	NCF-0634 / 06/30/2010 Richland / Corporation 2514 FARAWAY DR COLUMBIA, SC 29223-3969 RCM-COLUMBIA INC
Alzheimers Care: Y Alzheimers Unit: Y Total Number of Licensed Beds 179	

LIFE CARE CENTER OF HILTON HEAD 120 LAMOTTE DR HILTON HEAD ISLAND, SC 29926-2792 FACILITY #:843-681-6006 HARDY JR, JAMES M PH#: 843-681-6006 Facility Email: No Facility Email on Record Fac. Contact Email: JIM_HARDY@LCCA.COM	NCF-0725 / 05/31/2010 Beaufort / Corporation 120 LAMOTTE DR HILTON HEAD ISLAND, SC 29926-2792 LIFE CARE CENTERS OF AMERICA INC
Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 88	

**SCDHEC
Nursing Homes**

March 1, 2010

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
LILA DOYLE AT OCONEE MEDICAL CENTER 101 LILA DOYLE DR SENECA, SC 29672-9495 FACILITY #:864-885-7475 PAUL, KEITH A PH#: 864-882-3351 Facility Email: KEITH.PAUL.OCONEEMED.ORG Fac. Contact Email: No Facility Contact Email on Record	NCF-0297 / 03/31/2010 Oconee / Non-Profit Corporation 101 LILA DOYLE DR SENECA, SC 29672-9495 OCONEE MEDICAL CENTER INC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 120

LINVILLE COURTS AT THE CASCADES VERDAE 30 SPRINGCREST CT GREENVILLE, SC 29607-4034 FACILITY #:864-528-5500 COATES, MELANIE M PH#: 864-528-5500 Facility Email: No Facility Email on Record Fac. Contact Email: No Facility Contact Email on Record	NCF-0956 / 04/30/2010 Greenville / Limited Liability 30 SPRINGCREST CT GREENVILLE, SC 29607-4034 BANYAN GREENVILLE NURSING SERVICES LLC
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Alzheimers Care: Y Alzheimers Unit: N Total Number of Licensed Beds 44

LORIS EXTENDED CARE CENTER 3620 STEVENS ST LORIS, SC 29569-2953 FACILITY #:843-756-7106 JOHNSON, LINDA L PH#: 843-716-7106 Facility Email: LLJOHNSN@SCCOAST.NET Fac. Contact Email: 11JOHNSN@SCCOAST.NET	NCF-0207 / 12/31/2010 Horry / District 3620 STEVENS ST LORIS, SC 29569-2953 LORIS COMMUNITY HOSPITAL DISTRICT
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 88

MAGNOLIA MANOR-COLUMBIA 1007 N KINGS WAY COLUMBIA, SC 29223-1916 FACILITY #:803-699-4111 SKEHAN, CAROL L PH#: 803-936-0062 Facility Email: KEITH.PAUL@THICARE.COM Fac. Contact Email: No Facility Contact Email on Record	NCF-0868 / 08/31/2010 Richland / Ltd. Liability 1007 N KINGS WAY COLUMBIA, SC 29223-1916 THI OF SOUTH CAROLINA AT COLUMBIA LLC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 88

MAGNOLIA MANOR-GREENVILLE 411 ANSEL ST GREENVILLE, SC 29601-3499 FACILITY #:864-232-5368 OWINGS, JANE B PH#: 864-232-5368 Facility Email: JANE.OWINGS@THICARE.COM Fac. Contact Email: JANE.OWINGS@THICARE.COM	NCF-0860 / 08/31/2010 Greenville / Ltd. Liability 411 ANSEL ST GREENVILLE, SC 29601-3499 THI OF SOUTH CAROLINA AT GREENVILLE LLC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 99

SCDHEC
Nursing Homes

March 1, 2010

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
MAGNOLIA MANOR-GREENWOOD 1415 PKWY GREENWOOD, SC 29646-4044 FACILITY #:864-227-9500 GOFORTH, EDITH C PH#: 864-227-9500 Facility Email: No Facility Email on Record Fac. Contact Email: SEE DIRECTIONS	NCF-0866 / 08/31/2010 Greenwood / Ltd. Liability 1415 PKWY GREENWOOD, SC 29646-4044 THI OF SOUTH CAROLINA AT GREENWOOD LLC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 88

MAGNOLIA MANOR-INMAN 63 BLACKSTOCK RD INMAN, SC 29349-1849 FACILITY #:864-472-9055 LYLES, DALE M PH#: 864-472-9055 Facility Email: No Facility Email on Record Fac. Contact Email: SEE DIRECTIONS	NCF-0863 / 08/31/2010 Spartanburg / Ltd. Liability 63 BLACKSTOCK RD INMAN, SC 29349-1849 THI OF SOUTH CAROLINA AT MAGNOLIA MANOR-INMAN LLC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 176

MAGNOLIA MANOR-ROCK HILL 127 MURRAH DR ROCK HILL, SC 29732-2390 FACILITY #:803-328-6518 HENSCHEL, THOMAS W PH#: 803-366-7133 Facility Email: DANA.STEELE@THICARE.COM Fac. Contact Email: No Facility Contact Email on Record	NCF-0859 / 08/31/2010 York / Ltd. Liability 127 MURRAH DR ROCK HILL, SC 29732-2390 THI OF SOUTH CAROLINA AT ROCK HILL LLC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 106

MAGNOLIA MANOR-SPARTANBURG 375 SERPENTINE DR SPARTANBURG, SC 29303-3026 FACILITY #:864-585-0218 HARPER, DAVID S PH#: 864-594-5116 Facility Email: No Facility Email on Record Fac. Contact Email: 4032SEC@HCR-MANORCARE.COM	NCF-0867 / 08/31/2010 Spartanburg / Ltd. Liability 375 SERPENTINE DR SPARTANBURG, SC 29303-3026 THI OF SOUTH CAROLINA AT SPARTANBURG LLC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 95

MAGNOLIA PLACE AT GREENVILLE 35 SOUTHPOINTE DR GREENVILLE, SC 29607-5956 FACILITY #:864-288-1415 FARTHING, SHANNON P PH#: 864-288-1415 Facility Email: SHANNON.FARTHING@THICARE.COM Fac. Contact Email: SHANNON.FARTHING@THICARE.COM	NCF-0869 / 08/31/2010 Greenville / Ltd. Liability 35 SOUTHPOINTE DR GREENVILLE, SC 29607-5956 THI OF SOUTH CAROLINA AT MAGNOLIA PLACE AT GREENVILLE LLC
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Alzheimers Care: Y Alzheimers Unit: N Total Number of Licensed Beds 120

SCDHEC
Nursing Homes

March 1, 2010

DHEC Regulation 61-17

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

MAGNOLIA PLACE AT SPARTANBURG
8020 WHITE AVE
SPARTANBURG, SC 29303-2099 FACILITY #:864-542-8515
HARRIS, PATRICIA A PH#: 864-542-8515
Facility Email: PATRICIA.HARRIS@THICARE.COM
Fac. Contact Email: PATRICIA.HARRIS@THICARE.COM

NCF-0861 / 08/31/2010
Spartanburg / Ltd. Liability
8020 WHITE AVE
SPARTANBURG, SC 29303-2099
THI OF SOUTH CAROLINA AT MAGNOLIA PLACE AT SPARTANBURG
LLC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 88

MARION NURSING CENTER
2770 S HWY 501
MARION, SC 29571-7854 FACILITY #:843-423-2601
JAMES, ALYCE C PH#: 843-423-2601
Facility Email: CENTERNURSES123@AOL.COM
Fac. Contact Email: No Facility Contact Email on Record

NCF-0689 / 09/30/2010
Marion / Corporation
PO BOX 1485
MARION, SC 29571-1485
MARION NURSING CENTER INC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 88

MARTHA FRANKS BAPTIST RETIREMENT COMMUNITY
1 MARTHA FRANKS DR
LAURENS, SC 29360-1799 FACILITY #:864-984-4541
ORCUTT, LINDA PH#: 864-984-4541
Facility Email: DHAIR@SCBMA.COM
Fac. Contact Email: No Facility Contact Email on Record

NCF-0435 / 03/31/2010
Laurens / Non-Profit Corporation
1 MARTHA FRANKS DR
LAURENS, SC 29360-1799
SOUTH CAROLINA BAPTIST MINISTRIES FOR THE AGING INC

Alzheimers Care: Y Alzheimers Unit: Y Total Number of Licensed Beds 88

MCCOY MEMORIAL NURSING CENTER
207 CHAPPELL DR
BISHOPVILLE, SC 29010-1167 FACILITY #:803-484-5636
MOORE, JOHN D PH#: 803-484-5636
Facility Email: JMOORE@COOKE-ASSOCIATES.COM
Fac. Contact Email: JMOORE@COOKE-ASSOCIATES.COM

NCF-0940 / 12/31/2010
Lee / Ltd. Liability
207 CHAPPELL DR
BISHOPVILLE, SC 29010-1167
COOKE ASSOCIATES OF BISHOPVILLE LLC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 120

MEDFORD NURSING CENTER
105 MEDFORD DR
DARLINGTON, SC 29532-2719 FACILITY #:843-398-7000
MARSH, NOELLE PH#: 843-398-7000
Facility Email: NMARSH@WILSONSENIORCARE.COM
Fac. Contact Email: NMARSH@WILSONSENIORCARE.COM

NCF-0891 / 08/31/2010
Darlington / Ltd. Liability
105 MEDFORD DR
DARLINGTON, SC 29532-2719
MEDFORD NURSING CENTER LLC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 88

**SCDHEC
Nursing Homes**

March 1, 2010

DHEC Regulation 61-17

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

METHODIST MANOR HEALTHCARE CENTER
2100 TWIN CHURCH RD
FLORENCE, SC 29501-8200 FACILITY #:843-664-0700
JACKSON, WILLIAM F PH#: 843-664-0700
Facility Email: FJACKSON@METHODIST-MANOR.COM
Fac. Contact Email: FJACKSON@METHODIST-MANOR.COM

NCF-0579 / 09/30/2010
Florence / Non-Profit Corporation

UNITED METHODIST MANOR OF THE PEE DEE INC

Alzheimers Care: Y Alzheimers Unit: Y Total Number of Licensed Beds 32

METHODIST OAKS
1000 METHODIST OAKS DR
ORANGEBURG, SC 29115-1813 FACILITY #:803-534-1212
JOHNSON, PATRICIA W PH#: 803-534-1212
Facility Email: No Facility Email on Record
Fac. Contact Email: No Facility Contact Email on Record

NCF-0735 / 11/30/2010
Orangeburg / Corporation
PO BOX 327
ORANGEBURG, SC 29116-0327
METHODIST OAKS INC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 132

MORRELL NURSING CENTER
900 N MARQUIS HWY
HARTSVILLE, SC 29550-3526 FACILITY #:843-383-5164
MORRIS, PHYLLIS PH#: 843-398-7000
Facility Email: PMORRIS@WILSONSENIORCARE.COM
Fac. Contact Email: No Facility Contact Email on Record

NCF-0881 / 08/31/2010
Darlington / Limited Liability

MORRELL NURSING CENTER LLC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 154

MOUNT PLEASANT MANOR
921 BOWMAN RD
MOUNT PLEASANT, SC 29464-3234 FACILITY #:843-884-8903
WHITE, BRUCE L PH#: 843-884-8903
Facility Email: BWHITE@MOUNTPLEASANTMANOR.COM
Fac. Contact Email: BWHITE@MOUNTPLEASANTMANOR.COM

NCF-0896 / 05/31/2010
Charleston / Ltd. Liability
921 BOWMAN RD
MOUNT PLEASANT, SC 29464-3234
MOUNT PLEASANT MANOR LLC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 132

MOUNTAINVIEW NURSING HOME
340 CEDAR SPRINGS RD
SPARTANBURG, SC 29302-4697 FACILITY #:864-582-4175
DILLARD, WILSON K PH#: 864-582-4175
Facility Email: WDILLARD@MOUNTAINVIEWNH.COM
Fac. Contact Email: WDILLARD@MOUNTAINVIEWNH.COM

NCF-0149 / 06/30/2010
Spartanburg / Corporation
340 CEDAR SPRINGS RD
SPARTANBURG, SC 29302-4697
COMMUNITY SERVICES FOR THE AGING INC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 132

**SCDHEC
Nursing Homes**

March 1, 2010

DHEC Regulation 61-17

**Name of Facility
Location Street
Location City, State
Administrator**

**License#/Expiration
County/Ownership Type
Mailing Address
Licensee**

MULLINS NURSING CENTER
518 S MAIN ST
MULLINS, SC 29574-3510 FACILITY #:843-464-8211
MARTIN, TONYA G PH#: 843-464-8211
Facility Email: TMARTIN@MCMED.ORG
Fac. Contact Email: TMARTIN@MCMED.ORG

NCF-0828 / 09/30/2010
Marion / Non-Profit Corporation
518 S MAIN ST
MULLINS, SC 29574-3510
MARION REGIONAL HEALTHCARE SYSTEM

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 92

MYRTLE BEACH MANOR
9547 HWY 17 N
MYRTLE BEACH, SC 29572-0000 FACILITY #:843-449-5283
BEARD, MICHAEL PH#: 843-449-5283
Facility Email: MBEARD@5SQC.COM
Fac. Contact Email: No Facility Contact Email on Record

NCF-0829 / 01/31/2011
Horry / Corporation
9547 HWY 17 N
MYRTLE BEACH, SC 29572-0000
FS TENANT POOL I TRUST

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 100

NEWBERRY COUNTY MEMORIAL HOSPITAL TRANSITIONAL CARE UNIT
2669 KINARD ST
NEWBERRY, SC 29108-2932 FACILITY #:803-276-7570
ROBERTS, DEBRA G PH#: 803-405-7244
Facility Email: NEWBERRYHOSPITAL.ORG
Fac. Contact Email: LYNN.BEASLEY@NEWBERRYHOSPITAL.ORG

NCF-0763 / 02/28/2010 (Renewal Pending)
Newberry / County
PO BOX 497
NEWBERRY, SC 29108-0497
NEWBERRY COUNTY MEMORIAL HOSPITAL BOARD

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 12

NHC HEALTHCARE ANDERSON
1501 E GREENVILLE ST
ANDERSON, SC 29621-2004 FACILITY #:864-226-8356
MOORHOUSE, BRADLEY W PH#: 864-226-8356
Facility Email: SNFCARE@NHCANDERSON.COM
Fac. Contact Email: SNFCARE@NHANDERSON.COM

NCF-0801 / 06/30/2010
Anderson / Ltd. Liability
PO BOX 1327
ANDERSON, SC 29622-1327
NHC HEALTHCARE/ANDERSON LLC

Alzheimers Care: Y Alzheimers Unit: N Total Number of Licensed Beds 290

NHC HEALTHCARE BLUFFTON
3039 OKATIE HWY
BLUFFTON, SC 29910 FACILITY #:843-705-8220
TAYLOR, WADE J PH#: 843-705-8220
Facility Email: No Facility Email on Record
Fac. Contact Email: No Facility Contact Email on Record

NCF-0958 / 01/31/2011
Beaufort / Limited Liability
PO BOX 3110
BLUFFTON, SC 29910-3110
NHC HEALTHCARE/BLUFFTON LLC

Alzheimers Care: Y Alzheimers Unit: Y Total Number of Licensed Beds 120

SCDHEC
Nursing Homes

March 1, 2010

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
NHC HEALTHCARE CHARLESTON 2230 ASHLEY CROSSING DR CHARLESTON, SC 29414-5700 FACILITY #:843-766-5228 ATKINSON, ANGELA PH#: 843-766-5228 Facility Email: ANGATK@GMAIL.COM Fac. Contact Email: ADM@TMCHARLESTON.COM	NCF-0871 / 09/30/2010 Charleston / Limited Liability 2230 ASHLEY CROSSING DR CHARLESTON, SC 29414-5700 NHC HEALTHCARE-CHARLESTON LLC
Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 132	

NHC HEALTHCARE CLINTON 304 JACOBS HWY CLINTON, SC 29325-7279 FACILITY #:864-833-2550 SELLARS, GIDEON PH#: 864-833-2550 Facility Email: GSELLARS@NHCCLINTON.NET Fac. Contact Email: GSELLARS@NHCCLINTON.NET	NCF-0804 / 06/30/2010 Laurens / Ltd. Liability PO BOX 727 CLINTON, SC 29325-0727 NHC HEALTHCARE/CLINTON LLC
Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 131	

NHC HEALTHCARE GARDEN CITY 9405 HWY 17 BYP MURRELLS INLET, SC 29576-9301 FACILITY #:843-650-2213 SHADOW, SHIRLEY B PH#: 843-650-2213 Facility Email: No Facility Email on Record Fac. Contact Email: REMSMOM@AOL.COM	NCF-0825 / 10/31/2010 Horry / Ltd. Liability PO BOX 309 MURRELLS INLET, SC 29576-0309 NHC HEALTHCARE/GARDEN CITY LLC
Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 148	

NHC HEALTHCARE GREENVILLE 1305 BOILING SPRINGS RD GREER, SC 29650-4139 FACILITY #:864-458-7566 MOORHOUSE, BRYAN M PH#: 864-458-7566 Facility Email: 1PENA@NHCGREENVILLE.COM Fac. Contact Email: NATIONALHEALTHCARE@CHARTER.NET	NCF-0807 / 07/31/2010 Greenville / Ltd. Liability 1305 BOILING SPRINGS RD GREER, SC 29650-4139 NHC HEALTHCARE/GREENVILLE LLC
Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 176	

NHC HEALTHCARE GREENWOOD 437 CAMBRIDGE AVE E GREENWOOD, SC 29646-2244 FACILITY #:864-223-1950 SELLARS, RICHARD A PH#: 864-223-1950 Facility Email: RSELLARS@NHCGREENWOOD.COM Fac. Contact Email: RSELLARS@NHCGREENWOOD.COM	NCF-0802 / 06/30/2010 Greenwood / Ltd. Liability PO BOX 3109 GREENWOOD, SC 29648-3109 NHC HEALTHCARE/GREENWOOD LLC
Alzheimers Care: Y Alzheimers Unit: N Total Number of Licensed Beds 152	

DHEC Regulation 61-17

**Name of Facility
Location Street
Location City, State
Administrator**

**License#/Expiration
County/Ownership Type
Mailing Address
Licensee**

NHC HEALTHCARE LAURENS
379 PINEHAVEN ST EXT
LAURENS, SC 29360-1259 FACILITY #:864-984-6584
SHEARER, RICKIE L PH#: 864-984-6584
Facility Email: RSHEARER@NHCLAURENSCOM
Fac. Contact Email: NHCSHEARER@CHARTER.NET

NCF-0326 / 06/30/2010
Laurens / Ltd. Liability
PO BOX 1259
LAURENS, SC 29360-1259
NHC HEALTHCARE/LAURENS LLC

Alzheimers Care: Y Alzheimers Unit: N Total Number of Licensed Beds 176

NHC HEALTHCARE LEXINGTON
2993 SUNSET BLVD
WEST COLUMBIA, SC 29169-3421 FACILITY #:803-939-0026
MANLEY, MICHAEL W PH#: 803-939-0026
Facility Email: NHC@NHCLEXINGTONCOM
Fac. Contact Email: NHC@NHCLEXINGTON.COM

NCF-0798 / 06/30/2010
Lexington / Ltd. Liability
2993 SUNSET BLVD
WEST COLUMBIA, SC 29169-3421
NHC HEALTHCARE/LEXINGTON LLC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 120

NHC HEALTHCARE MAULDIN
850 E BUTLER RD
GREENVILLE, SC 29607-5842 FACILITY #:864-675-6421
DOBSON, DEBORAH D PH#: 864-675-6421
Facility Email: NHCMAULDIN@NHCMAULDIN.COM
Fac. Contact Email: NHCMAULDIN@CHARTER.NET

NCF-0796 / 06/30/2010
Greenville / Ltd. Liability
PO BOX 600
MAULDIN, SC 29662-0600
NHC HEALTHCARE/MAULDIN LLC

Alzheimers Care: Y Alzheimers Unit: Y Total Number of Licensed Beds 180

NHC HEALTHCARE NORTH AUGUSTA
350 AUSTIN GRAYBILL RD
NORTH AUGUSTA, SC 29860-9251 FACILITY #:803-278-4272
HILL, HEATH E PH#: 803-278-4272
Facility Email: HEATHH@NHCNORTH AUGUSTA.COM
Fac. Contact Email: B.MOORHOUSE@CHARTER.NET

NCF-0799 / 06/30/2010
Aiken / Ltd. Liability
PO BOX 7979
NORTH AUGUSTA, SC 29861-7979
NHC HEALTHCARE/NORTH AUGUSTA LLC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 192

NHC HEALTHCARE PARKLANE
7601 PARKLANE RD
COLUMBIA, SC 29223-6122 FACILITY #:803-741-9090
ARGO, MELISSA B PH#: 803-741-9090
Facility Email: MARGO@SC.RR.COM
Fac. Contact Email: NATIONALHEALTHCARE@SC.RR.COM

NCF-0797 / 06/30/2010
Richland / Ltd. Liability
PO BOX 25548
COLUMBIA, SC 29224-5548
NHC HEALTHCARE/PARKLANE LLC

Alzheimers Care: Y Alzheimers Unit: Y Total Number of Licensed Beds 180

**SCDHEC
Nursing Homes**

March 1, 2010

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
NHC HEALTHCARE SUMTER 1018 N GUIGNARD DR SUMTER, SC 29150-2423 FACILITY #:803-773-5567 CROTTS, JEANIE S PH#: 803-773-5567 Facility Email: JCROTTS@NHCSUMTER.COM Fac. Contact Email: JCROTTS@NHCSUMTER.COM	NCF-0471 / 01/31/2011 Sumter / Corporation PO BOX 1524 SUMTER, SC 29150-1524 NATIONAL HEALTH CORPORATION

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 138

OAKBROOK HEALTH & REHABILITATION CENTER 920 TRAVELERS BLVD SUMMERVILLE, SC 29485-8213 FACILITY #:843-875-9053 DAVIS, NITA J PH#: Facility Email: ADMIN.OA.SC@PALMETTOLTC.COM Fac. Contact Email: No Facility Contact Email on Record	NCF-0923 / 09/30/2010 Dorchester / Ltd. Liability 920 TRAVELERS BLVD SUMMERVILLE, SC 29485-8213 PALMETTO OAKBROOK OPERATING LLC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 88

OAKHAVEN NURSING CENTER 123 OAK ST DARLINGTON, SC 29532-2628 FACILITY #:843-398-7041 OATES, MARGARET B PH#: 843-398-7041 Facility Email: BOATES@WILSONSENIORCARE.COM Fac. Contact Email: BOATES@WILSONSENIORCARE.COM	NCF-0890 / 08/31/2010 Darlington / Limited Liability 123 OAK ST DARLINGTON, SC 29532-2628 OAKHAVEN NURSING CENTER LLC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 88

OAKMONT EAST 601 SULPHUR SPRINGS RD GREENVILLE, SC 29617-1698 FACILITY #:864-246-2721 CADY, BETTY PH#: 864-246-2721 Facility Email: 4032ADMIN@HCR-MANORCARE.COM Fac. Contact Email: No Facility Contact Email on Record	NCF-0952 / 12/31/2010 Greenville / Limited Liability 601 SULPHUR SPRINGS RD GREENVILLE, SC 29617-1698 OAKMONT EAST-GREENVILLE SC LLC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 132

OAKMONT OF UNION 709 RICE AVE EXT UNION, SC 29379-9023 FACILITY #:864-427-0306 FREEMAN, PATRICIA A PH#: 864-427-0306 Facility Email: 4031ADMIN@HCR-MANORCARE.COM Fac. Contact Email: 4031-ADMIN@HCR-MANORCARE.COM	NCF-0443 / 12/31/2010 Union / Limited Liability 709 RICE AVE EXT UNION, SC 29379-9023 OAKMONT OF UNION SC LLC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 88

**SCDHEC
Nursing Homes**

March 1, 2010

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
OAKMONT WEST 600 SULPHUR SPRINGS RD GREENVILLE, SC 29617-1985 FACILITY #:864-246-2721 GRANGER, PAUL PH#: 864-269-3725 Facility Email: 4033-ADMIN@HCR-MANORCARE.COM Fac. Contact Email: No Facility Contact Email on Record	NCF-0953 / 12/31/2010 Greenville / Limited Liability 600 SULPHUR SPRINGS RD GREENVILLE, SC 29617-1985 OAKMONT WEST-GREENVILLE SC LLC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 125

PALMETTO HEALTH BAPTIST SUBACUTE REHABILITATION CENTER 1330 TAYLOR ST COLUMBIA, SC 29201-2943 FACILITY #:803-296-5010 SEIGLER, CAROLINE N PH#: 803-296-5010 Facility Email: No Facility Email on Record Fac. Contact Email: AMANDA.QUARTERMAN@PALMETTOHEALTH.ORG	NCF-0740 / 03/28/2011 Richland / Non-Profit Corporation 1330 TAYLOR ST COLUMBIA, SC 29201-2943 PALMETTO HEALTH
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 22

PEPPER HILL NURSING & REHAB CENTER 3525 AUGUSTUS RD AIKEN, SC 29801-2701 FACILITY #:803-642-8376 JONES, PRESTON S PH#: 803-642-8376 Facility Email: ROXANNEWEESE@PEPPERHILL.COM Fac. Contact Email: ROXANNEWEESE@PEPPERHILL.COM	NCF-0879 / 11/30/2010 Aiken / Limited Liability PO BOX 3188 AIKEN, SC 29802-3188 PEPPER HILL NURSING & REHAB CENTER LLC
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Alzheimers Care: N Alzheimers Unit: Y Total Number of Licensed Beds 132

PIEDMONT LIVING CENTER 401 CHANDLER RD GREER, SC 29651-1243 FACILITY #:864-879-1370 HILL, JAMES PH#: 864-879-1370 Facility Email: JSWIFT@HMR-LTC.COM Fac. Contact Email: JSWIFT@HMR-LTC.COM	NCF-0908 / 09/30/2010 Greenville / Ltd. Liability 101 GRACE DR EASLEY, SC 29640-9088 PIEDMONT LIVING CENTER LLC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 132

PRESBYTERIAN HOME OF SOUTH CAROLINA - SUMMERVILLE 201 W 9TH NORTH ST OFC 140 SUMMERVILLE, SC 29483-6701 FACILITY #:843-873-2550 MILLER, ROBIN C PH#: Facility Email: RMILLER@PRESHOMESC.ORG Fac. Contact Email: No Facility Contact Email on Record	NCF-0202 / 04/30/2010 Dorchester / Non-Profit Corporation 201 W 9TH NORTH ST OFC 140 SUMMERVILLE, SC 29483-6701 PRESBYTERIAN HOME OF SOUTH CAROLINA INC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 87

**SCDHEC
Nursing Homes**

March 1, 2010

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
PRESBYTERIAN HOME OF SOUTH CAROLINA-CLINTON 801 MUSGROVE ST CLINTON, SC 29325-1796 FACILITY #:864-833-5190 SNIDER, ANN T PH#: 864-833-5190 Facility Email: ASNIDER@PRESHOMESC.ORG Fac. Contact Email: ASNIDER@PRESHOMESC.ORG	NCF-0366 / 04/30/2010 Laurens / Non-Profit Corporation 801 MUSGROVE ST CLINTON, SC 29325-1796 PRESBYTERIAN HOME OF SOUTH CAROLINA INC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 66

PRESBYTERIAN HOME OF SOUTH CAROLINA-COLUMBIA 700 DAVEGA DR LEXINGTON, SC 29073-9698 FACILITY #:803-796-8700 BURTON, EDWARD G PH#: 803-796-8700 Facility Email: EBURTON@PRESHOMESC.ORG Fac. Contact Email: EGBURTON@LAURELBAYE.COM	NCF-0545 / 12/31/2010 Lexington / Non-Profit Corporation 700 DAVEGA DR LEXINGTON, SC 29073-9698 PRESBYTERIAN HOME OF SOUTH CAROLINA INC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 44

PRESBYTERIAN HOME OF SOUTH CAROLINA-FLORENCE 2350 W LUCAS ST FLORENCE, SC 29501-1201 FACILITY #:843-665-2222 HICKMAN III, WALTER E PH#: 843-665-2222 Facility Email: WHICKMAN@PRESHOMESC.ORG Fac. Contact Email: WHICKMAN@PRESHOMESC.ORG	NCF-0420 / 09/30/2010 Florence / Non-Profit Corporation 2350 W LUCAS ST FLORENCE, SC 29501-1201 PRESBYTERIAN HOME OF SOUTH CAROLINA INC
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Alzheimers Care: Y Alzheimers Unit: N Total Number of Licensed Beds 44

PRESBYTERIAN HOME OF SOUTH CAROLINA-FOOTHILLS 205 BUD NALLEY DR EASLEY, SC 29642 FACILITY #:864-859-3367 MIZE, SIDNEY K PH#: 864-859-3367 Facility Email: No Facility Email on Record Fac. Contact Email: SMIZE@PRESHOMESC.ORG	NCF-0809 / 10/31/2010 Pickens / Non-Profit Corporation 205 BUD NALLEY DR EASLEY, SC 29642 PRESBYTERIAN HOME OF SOUTH CAROLINA INC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 18

PRESTON HEALTH CENTER 87 BIRDSONG WAY HILTON HEAD ISLAND, SC 29926-1365 FACILITY #:843-689-7077 ELLIOTT, AMANDA J PH#: 843-689-7077 Facility Email: AELLIOTT@THECYPRESS.COM Fac. Contact Email: ELLIOTTAMANDA@LCSNET.COM	NCF-0576 / 04/30/2010 Beaufort / Limited Liability Limited Partnership 87 BIRDSONG WAY HILTON HEAD ISLAND, SC 29926-1365 CYPRESS OF HILTON HEAD ISLAND ASSOCIATES LP
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Alzheimers Care: N Alzheimers Unit: Y Total Number of Licensed Beds 77

**SCDHEC
Nursing Homes**

March 1, 2010

DHEC Regulation 61-17

**Name of Facility
Location Street
Location City, State
Administrator**

**License#/Expiration
County/Ownership Type
Mailing Address
Licensee**

PRINCE GEORGE HEALTHCARE CENTER
901 MAPLE ST
GEORGETOWN, SC 29440-4333 FACILITY #:843-546-6101
OTHMAN, MOHAMED PH#: 843-546-6101
Facility Email: ADMIN.PR.SC@PALMETTOLTC.COM
Fac. Contact Email: No Facility Contact Email on Record

NCF-0930 / 09/30/2010
Georgetown / Ltd. Liability
901 MAPLE ST
GEORGETOWN, SC 29440-4333
PALMETTO PRINCE GEORGE OPERATING LLC

Alzheimers Care: Y Alzheimers Unit: Y Total Number of Licensed Beds 148

RICE NURSING HOME
100 FINLEY RD
COLUMBIA, SC 29203-9264 FACILITY #:803-691-5720
LILLY, ORPHA LORETTA PH#: 803-691-5740
Facility Email: No Facility Email on Record
Fac. Contact Email: No Facility Contact Email on Record

NCF-0831 / 05/31/2010
Richland / Non-Profit Corporation
100 FINLEY RD
COLUMBIA, SC 29203-9264
LUTHERAN HOMES OF SOUTH CAROLINA INC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 32

RICHARD M CAMPBELL VETERANS NURSING HOME
4605 BELTON HWY
ANDERSON, SC 29621-5045 FACILITY #:864-261-6734
OSBORNE, GREG PH#: 864-261-6734
Facility Email: RAUSTIN@HMR-LTC.COM
Fac. Contact Email: No Facility Contact Email on Record

NCF-0549 / 02/28/2011
Anderson / State
4605 BELTON HWY
ANDERSON, SC 29621-5045
SC DEPARTMENT OF MENTAL HEALTH

Alzheimers Care: N Alzheimers Unit: Y Total Number of Licensed Beds 220

RIDGELAND NURSING CENTER
1516 GRAYS HWY
RIDGELAND, SC 29936-5440 FACILITY #:843-726-5581
BOYLES, SHERI P PH#: 843-726-5581
Facility Email: SBOYLES@RIDGELANDNC.COM
Fac. Contact Email: SBOYLES@RIDGELANDNC.COM

NCF-0553 / 08/31/2010
Jasper / Corporation
PO BOX 1570
RIDGELAND, SC 29936-2627
RIDGELAND NURSING CENTER INC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 88

RIVERSIDE LIVING CENTER
109 BENTZ RD
PIEDMONT, SC 29673-1412 FACILITY #:864-845-5177
PARSON, DIANE PH#: 864-845-5177
Facility Email: JSWIFT@HMR-LTC.COM
Fac. Contact Email: JSWIFT@HMR-LTC.COM

NCF-0907 / 09/30/2010
Anderson / Ltd. Liability
101 GRACE DR
EASLEY, SC 29640-9088
RIVERSIDE LIVING CENTER LLC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 88

DHEC Regulation 61-17

**Name of Facility
Location Street
Location City, State
Administrator**

**License#/Expiration
County/Ownership Type
Mailing Address
Licensee**

ROLLING GREEN VILLAGE HEALTH CARE FACILITY
1 HOKE SMITH BLVD
GREENVILLE, SC 29615-5308 FACILITY #:864-987-9800
EXLINE, KYLE T PH#: 864-213-4222
Facility Email: No Facility Email on Record
Fac. Contact Email: No Facility Contact Email on Record

NCF-0456 / 10/31/2010
Greenville / Non-Profit Corporation
1 HOKE SMITH BLVD
GREENVILLE, SC 29615-5308
GREENVILLE BAPTIST RETIREMENT COMMUNITY INC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 44

ROSECREST REHABILITATION AND HEALTHCARE
200 FORTRESS DR
INMAN, SC 29349-9160 FACILITY #:864-599-8600
MILLER, RICHARD P PH#: 803-581-3151
Facility Email: RMILLER@ROSECRESTORG
Fac. Contact Email: RICHARD.MILLER@CRMCSO.HMA-CORP.COM

NCF-0817 / 04/30/2010
Spartanburg / Non-Profit Corporation
200 FORTRESS DR
INMAN, SC 29349-9160
LUTHERAN HOMES OF SOUTH CAROLINA INC

Alzheimers Care: Y Alzheimers Unit: Y Total Number of Licensed Beds 75

ROSEMOND LIVING CENTER
138 ROSEMOND ST
PICKENS, SC 29671-2434 FACILITY #:864-878-9620
WOOD, ZACHERY PH#:
Facility Email: JSWIFT@HMR-LTC.COM
Fac. Contact Email: No Facility Contact Email on Record

NCF-0906 / 09/30/2010
Pickens / Ltd. Liability
101 GRACE DR
EASLEY, SC 29640-9088
ROSEMOND LIVING CENTER LLC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 44

SALUDA NURSING CENTER
581 NEWBERRY HWY
SALUDA, SC 29138-0398 FACILITY #:864-445-2146
BOWLES, ROBERT F PH#: 864-445-2146
Facility Email: RBOWLES@EMBARQMAIL.COM
Fac. Contact Email: ADMINISTRATOR_SNC@EARTHLINK.COM

NCF-0265 / 06/30/2010
Saluda / County
PO BOX 398
SALUDA, SC 29138-0398
SALUDA COUNTY

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 176

SANDPIPER REHAB & NURSING
1049 ANNA KNAPP BLVD
MOUNT PLEASANT, SC 29464-3133 FACILITY #:843-856-6025
HADLEY, ERIC T PH#: 843-884-5735
Facility Email: EHADLEY@PREMIERSL.COM
Fac. Contact Email: EHADLEY@PREMIERSL.COM

NCF-0876 / 10/31/2010
Charleston / Limited Liability
1049 ANNA KNAPP BLVD
MOUNT PLEASANT, SC 29464-3133
SANDPIPER REHAB & NURSING-DELAWARE LLC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 176

**SCDHEC
Nursing Homes**

March 1, 2010

DHEC Regulation 61-17

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

SAVANNAH HEIGHTS LIVING CENTER

204 HOLIDAY RD
MC CORMICK, SC 29835-3429 FACILITY #:864-391-2397
ADAMS, WAYNE PH#: 864-391-2390
Facility Email: JSWIFT@HMR-LTC.COM
Fac. Contact Email: No Facility Contact Email on Record

NCF-0933 / 11/30/2010
McCormick / Ltd. Liability
101 GRACE DR
EASLEY, SC 29640-9088
SAVANNAH HEIGHTS LIVING CENTER LLC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 120

SC EPISCOPAL HOME AT STILL HOPES

1 STILL HOPES DR
WEST COLUMBIA, SC 29169-7164 FACILITY #:803-796-6490
LONG, MARY K PH#: 803-796-6490
Facility Email: LSEGARS@STILLHOPESORG
Fac. Contact Email: LSEGARS@SCEH.ORG

NCF-0392 / 12/31/2010
Lexington / Corporation
PO BOX 2959
WEST COLUMBIA, SC 29171-2959
SOUTH CAROLINA EPISCOPAL HOME AT STILL HOPES INC

Alzheimers Care: N Alzheimers Unit: Y Total Number of Licensed Beds 62

SENECA HEALTH AND REHABILITATION CENTER

140 TOKEENA RD
SENECA, SC 29678-1799 FACILITY #:864-882-1642
SMITH, PAMELA P PH#: 864-882-1642
Facility Email: PPSMITH@SAVASC.COM
Fac. Contact Email: PPSMITH@SAVASC.COM

NCF-0917 / 09/30/2010
Oconee / Ltd. Liability
140 TOKEENA RD
SENECA, SC 29678-1799
SSC SENECA OPERATING COMPANY LLC

Alzheimers Care: Y Alzheimers Unit: N Total Number of Licensed Beds 132

SKYLYN HEALTH CENTER

1705 SKYLYN DR OFC
SPARTANBURG, SC 29307-1090 FACILITY #:864-582-6838
BARRESI, TIMOTHY J PH#: 864-582-6838
Facility Email: No Facility Email on Record
Fac. Contact Email: No Facility Contact Email on Record

NCF-0700 / 01/31/2011
Spartanburg / Corporation
3131 ELLIOTT AVE STE 500
SEATTLE, WA 98121-1032
EMERITUS CORPORATION

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 44

SOUTHLAND HEALTH CARE CENTER

722 S DARGAN ST
FLORENCE, SC 29506-2562 FACILITY #:843-669-4403
COMMANDER, CHARLES S PH#: 843-669-4403
Facility Email: No Facility Email on Record
Fac. Contact Email: CCOMMANDER@SC.RR.COM

NCF-0599 / 12/31/2010
Florence / Corporation
722 S DARGAN ST
FLORENCE, SC 29506-2562
COMMANDER HEALTH CARE FACILITIES INC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 88

**SCDHEC
Nursing Homes**

March 1, 2010

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
SPARTANBURG HOSPITAL FOR RESTORATIVE CARE SNF 389 SERPENTINE DR SPARTANBURG, SC 29303-3074 FACILITY #:864-560-3232 STIMAC, PATRICIA M PH#: 864-560-3232 Facility Email: PSTIMAC@SRHS.COM Fac. Contact Email: PSTIMAC@SRHS.COM	NCF-0915 / 02/28/2011 Spartanburg / District 389 SERPENTINE DR SPARTANBURG, SC 29303-3074 SPARTANBURG REGIONAL HEALTH SERVICES DISTRICT INC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 25

SPRINGDALE HEALTHCARE CENTER 146 BATTLESHIP RD CAMDEN, SC 29020-2060 FACILITY #:843-432-3741 SMALLS, CARLTON P PH#: 803-432-3741 Facility Email: ADMIN.SPCA.SC@PALMETTOLT.COM Fac. Contact Email: ADMIN.SPCA.SC@PALMETTOLT.COM	NCF-0925 / 09/30/2010 Kershaw / Ltd. Liability 146 BATTLESHIP RD CAMDEN, SC 29020-2060 PALMETTO SPRINGDALE OPERATING LLC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 148

ST GEORGE HEALTHCARE CENTER 905 DUKES ST SAINT GEORGE, SC 29477-2059 FACILITY #:843-563-4602 MARTIN, THEODOCIA R PH#: 803-534-7036 Facility Email: ADMIN.STGE.SC@PALMETTOLT.COM Fac. Contact Email: HOMECAMELOT@BELLSOUTH.NET	NCF-0924 / 09/30/2010 Dorchester / Ltd. Liability 905 DUKES ST SAINT GEORGE, SC 29477-2059 PALMETTO ST GEORGE OPERATING LLC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 88

SUMMIT HILLS SKILLED NURSING FACILITY 100 SUMMIT HILLS DR SPARTANBURG, SC 29307-1532 FACILITY #:864-591-2222 GOODWIN, ANNETTE SMITH PH#: 864-591-2222 Facility Email: ATHOMAS@SUMMIT-HILLSCOM Fac. Contact Email: No Facility Contact Email on Record	NCF-0950 / 03/31/2010 Spartanburg / Ltd. Liability 100 SUMMIT HILLS DR SPARTANBURG, SC 29307-1532 SUMMIT HILLS LLC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 33

SUMMIT PLACE LIVING CENTER 807 SE MAIN ST SIMPSONVILLE, SC 29681-7150 FACILITY #:864-963-6069 CAJKA, AMY PH#: 864-963-6069 Facility Email: JSWIFT@HMR-LTC.COM Fac. Contact Email: JSWIFT@HMR-LTC.COM	NCF-0905 / 09/30/2010 Greenville / Ltd. Liability 101 GRACE DR EASLEY, SC 29640-9088 SUMMIT PLACE LIVING CENTER LLC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 132

DHEC Regulation 61-17

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

SUMTER EAST HEALTH AND REHABILITATION CENTER
880 CAROLINA AVE
SUMTER, SC 29150-2815 FACILITY #:803-775-5394
HATTON, BRYAN C PH#: 803-775-5394
Facility Email: No Facility Email on Record
Fac. Contact Email: BCHATTON@SAVASC.COM

NCF-0919 / 09/30/2010
Sumter / Ltd. Liability
880 CAROLINA AVE
SUMTER, SC 29150-2815
SSC SUMTER EAST OPERATING COMPANY LLC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 176

SUNNY ACRES NURSING HOME
1727 BUCK SWAMP RD
FORK, SC 29543-6116 FACILITY #:843-464-6212
COOKE, TONY R PH#: 843-464-6212
Facility Email: BBARNETTE@COOKE-ASSOCIATES.COM
Fac. Contact Email: TONY RAY@COOKE-ASSOCIATES.COM

NCF-0936 / 12/31/2010
Dillon / Corporation
1727 BUCK SWAMP RD
FORK, SC 29543-6116
COOKE ASSOCIATES OF FORK INC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 111

TRANSITIONAL CARE UNIT AT SPRINGS MEMORIAL HOSPITAL
800 W MEETING ST
LANCASTER, SC 29720-2298 FACILITY #:803-286-1481
HUEY, NANCY D PH#: 803-286-1837
Facility Email: KAREN_MARTIN@CHS.NET
Fac. Contact Email: JULIE_SOEKORO@CHS.NET

NCF-0723 / 04/30/2010
Lancaster / Corporation
800 W MEETING ST
LANCASTER, SC 29720-2298
LANCASTER HOSPITAL CORPORATION

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 14

TRINITY MISSION HEALTH & REHAB OF EDGEFIELD
226 WA REEL DR
EDGEFIELD, SC 29824-4534 FACILITY #:803-637-5312
FALLAW, DENISE PH#: 803-637-5312
Facility Email: DFALLAW@TMEDGEFIELD.COM
Fac. Contact Email: DFALLAW@TMEDGEFIELD.COM

NCF-0941 / 07/31/2010
Edgefield / Ltd. Liability
PO BOX 668
EDGEFIELD, SC 29824-0668
TRINITY MISSION HEALTH & REHAB OF EDGEFIELD LLC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 120

TUOMEY SUBACUTE SKILLED CARE PROGRAM
129 N WASHINGTON ST
SUMTER, SC 29150-4983 FACILITY #:803-774-9000
MCMASTER, KATHY P PH#: 803-774-9000
Facility Email: KATHY.MCMASTER@TUOMEY.COM
Fac. Contact Email: KATHYMCMASTER@TUOMEY.COM

NCF-0698 / 02/28/2011
Sumter / Non-Profit Corporation
129 N WASHINGTON ST
SUMTER, SC 29150-4983
TUOMEY INC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 18

**SCDHEC
Nursing Homes**

March 1, 2010

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
UNIHEALTH POST ACUTE CARE-AIKEN 830 LAURENS ST AIKEN, SC 29801-0475 FACILITY #:803-649-6264 HAY, WINONA MICHELLE PH#: 803-649-6264 Facility Email: MHAY@UHS-PRUITT.COM Fac. Contact Email: No Facility Contact Email on Record	NCF-0942 / 06/30/2010 Aiken / Limited Liability 830 LAURENS ST AIKEN, SC 29801-0475 UNIHEALTH POST ACUTE CARE-AIKEN LLC
Alzheimers Care: Y Alzheimers Unit: Y Total Number of Licensed Beds 176	
UNIHEALTH POST ACUTE CARE-COLUMBIA 2451 FOREST DR COLUMBIA, SC 29204-2026 FACILITY #:803-254-5960 HUGHES, BRENDA S PH#: 864-378-0560 Facility Email: BHUGHES@UHS-PRUITT.COM Fac. Contact Email: No Facility Contact Email on Record	NCF-0880 / 01/31/2011 Richland / Limited Liability 2451 FOREST DR COLUMBIA, SC 29204-2026 UNIHEALTH POST ACUTE CARE-COLUMBIA LLC
Alzheimers Care: Y Alzheimers Unit: Y Total Number of Licensed Beds 257	
UNIHEALTH POST ACUTE CARE-LOW COUNTRY 200 LIBERTY ST S ESTILL, SC 29918-3310 FACILITY #:803-625-3852 SMITH, DEAN PH#: 803-625-3852 Facility Email: No Facility Email on Record Fac. Contact Email: No Facility Contact Email on Record	NCF-0922 / 09/30/2010 Hampton / Ltd. Liability 200 LIBERTY ST S ESTILL, SC 29918-3310 HERITAGE HEALTHCARE OF ESTILL LLC
Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 104	
UNIHEALTH POST ACUTE CARE-MONCKS CORNER 505 S LIVE OAK DR MONCKS CORNER, SC 29461-3554 FACILITY #:843-761-8368 GRALESKE, TINA PH#: 843-699-5124 Facility Email: THENSCHL@UHS-PRUITT.COM Fac. Contact Email: No Facility Contact Email on Record	NCF-0943 / 10/31/2010 Berkeley / Limited Liability 505 S LIVE OAK DR MONCKS CORNER, SC 29461-3554 UNIHEALTH POST ACUTE CARE-MONCKS CORNER LLC
Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 132	
UNIHEALTH POST ACUTE CARE-NORTH AUGUSTA 1200 TALISMAN DR NORTH AUGUSTA, SC 29841-4098 FACILITY #:803-278-2170 CARLISLE, CARROL A PH#: 803-278-2170 Facility Email: No Facility Email on Record Fac. Contact Email: No Facility Contact Email on Record	NCF-0721 / 10/31/2010 Aiken / Limited Liability 1200 TALISMAN DR NORTH AUGUSTA, SC 29841-4098 UNIHEALTH POST ACUTE CARE-NORTH AUGUSTA LLC
Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 132	

**SCDHEC
Nursing Homes**

March 1, 2010

DHEC Regulation 61-17

**Name of Facility
Location Street
Location City, State
Administrator**

**License#/Expiration
County/Ownership Type
Mailing Address
Licensee**

UNIHEALTH POST ACUTE CARE-ORANGEBURG
755 WHITMAN ST SE
ORANGEBURG, SC 29115-6163 FACILITY #:803-534-7036
PARRIS, BRENDA H PH#: 803-337-3211
Facility Email: No Facility Email on Record
Fac. Contact Email: BPARRIS@UHS-PRUITT.COM

NCF-0617 / 09/30/2010
Orangeburg / Limited Liability
755 WHITMAN ST SE
ORANGEBURG, SC 29115-6163
UNIHEALTH POST ACUTE CARE-ORANGEBURG LLC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 88

UNIHEALTH POST ACUTE CARE-ROCK HILL
261 S HERLONG AVE
ROCK HILL, SC 29732-1159 FACILITY #:803-366-7133
MARKUSZKA, THOMAS PH#:
Facility Email: TMARKUSZKA@UHS-PRUITT.COM
Fac. Contact Email: No Facility Contact Email on Record

NCF-0947 / 01/31/2011
York / Limited Liability
261 S HERLONG AVE
ROCK HILL, SC 29732-1159
UNIHEALTH POST ACUTE CARE-ROCK HILL LLC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 132

UNIHEALTH POST-ACUTE CARE OF BAMBERG
439 NORTH ST
BAMBERG, SC 29003-1317 FACILITY #:803-245-6227
REEVES, LUTHER E PH#:
Facility Email: No Facility Email on Record
Fac. Contact Email: No Facility Contact Email on Record

NCF-0322 / 08/31/2010
Bamberg / Limited Liability
439 NORTH ST
BAMBERG, SC 29003-1317
UNIHEALTH POST-ACUTE CARE OF BAMBERG LLC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 88

UNIHEALTH POST-ACUTE CARE-TANGLEWOOD
213 TANGLEWOOD CT
RIDGEWAY, SC 29130-7100 FACILITY #:803-337-3211
CARTER, TAMMY E PH#:
Facility Email: PDUNCAN@UHS-PRUITT.COM
Fac. Contact Email: No Facility Contact Email on Record

NCF-0710 / 10/31/2010
Fairfield / Limited Liability
213 TANGLEWOOD CT
RIDGEWAY, SC 29130-7100
UNIHEALTH POST-ACUTE CARE-TANGLEWOOD LLC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 150

VALLEY FALLS TERRACE
400 LOCUST GRV
SPARTANBURG, SC 29303-4831 FACILITY #:864-503-0377
HORNE, LINDA A PH#: 864-503-0377
Facility Email: LAHVFT@HOTMAIL.COM
Fac. Contact Email: LAHRFT@HOTMAIL.COM

NCF-0495 / 08/31/2010
Spartanburg / Corporation
400 LOCUST GRV
SPARTANBURG, SC 29303-4831
VALLEY FALLS TERRACE INC

Alzheimers Care: Y Alzheimers Unit: N Total Number of Licensed Beds 88

**SCDHEC
Nursing Homes**

March 1, 2010

DHEC Regulation 61-17

**Name of Facility
Location Street
Location City, State
Administrator**

**License#/Expiration
County/Ownership Type
Mailing Address
Licensee**

VETERANS VICTORY HOUSE

2461 SIDNEYS RD
WALTERBORO, SC 29488-6783 FACILITY #:843-538-3000
NEWTON, LEEANNE B PH#: 843-538-3000
Facility Email: LNEWTON@HMR-LTC.COM
Fac. Contact Email: LWH65@SCDMH.ORG

NCF-0921 / 10/31/2010
Colleton / State
2461 SIDNEYS RD
WALTERBORO, SC 29488-6783
SC DEPARTMENT OF MENTAL HEALTH

Alzheimers Care: N Alzheimers Unit: Y Total Number of Licensed Beds 220

WESTMINSTER HEALTH AND REHABILITATION CENTER

831 MCDOW DR
ROCK HILL, SC 29732-2415 FACILITY #:803-326-3100
STAMPER, AMANDA L PH#: 803-328-5000
Facility Email: MSTAMPER@WESTMINSTERTOWERS.ORG
Fac. Contact Email: No Facility Contact Email on Record

NCF-0819 / 08/31/2010
York / Non-Profit Corporation
831 MCDOW DR
ROCK HILL, SC 29732-2415
WESTMINSTER PRESBYTERIAN CENTER INC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 66

WESTSIDE LIVING CENTER

8 N TEXAS AVE
GREENVILLE, SC 29611-5034 FACILITY #:864-295-1331
BYINGTON, HEATHER PH#: 864-295-1331
Facility Email: JSWIFT@HMR-LTC.COM
Fac. Contact Email: JSWIFT@HMR-LTC.COM

NCF-0903 / 09/30/2010
Greenville / Ltd. Liability
101 GRACE DR
EASLEY, SC 29640-9088
WESTSIDE LIVING CENTER LLC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 132

WHITE OAK ESTATES

400 WEBBER RD
SPARTANBURG, SC 29307-2400 FACILITY #:864-579-7004
CATLETT, GARY D PH#: 864-579-7004
Facility Email: GCATLETT@WHITEOAKMANOR.COM
Fac. Contact Email: GCATLETT@WHITEOAKMANOR.COM

NCF-0888 / 12/31/2010
Spartanburg / Corporation
400 WEBBER RD
SPARTANBURG, SC 29307-2400
WHITE OAK ESTATES INC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 88

WHITE OAK MANOR-CHARLESTON

9285 MEDICAL PLAZA DR
N CHARLESTON, SC 29406-9126 FACILITY #:843-797-8282
WALKER, RUTH P PH#: 843-797-8282
Facility Email: No Facility Email on Record
Fac. Contact Email: RWALKER@WHITEOAKMANOR.COM

NCF-0892 / 12/31/2010
Charleston / Corporation
9285 MEDICAL PLAZA DR
N CHARLESTON, SC 29406-9126
WHITE OAK MANOR-CHARLESTON INC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 176

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
WHITE OAK MANOR-COLUMBIA 3001 BEECHAVEN RD COLUMBIA, SC 29204-2701 FACILITY #:803-782-4363 NEAL, MICHAEL S PH#: 803-782-4363 Facility Email: SNEAL@WHITEOAKMANOR.COM Fac. Contact Email: SNEAL@WHITEOAKMANOR.COM	NCF-0886 / 12/31/2010 Richland / Corporation 3001 BEECHAVEN RD COLUMBIA, SC 29204-2701 WHITE OAK MANOR-COLUMBIA INC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 120

WHITE OAK MANOR-LANCASTER 253 CRAIG MANOR RD LANCASTER, SC 29720-6531 FACILITY #:803-286-1464 CURTIS, ADRIENNE N PH#: 803-286-1464 Facility Email: NCURTIS@WHITEOAKMANOR.COM Fac. Contact Email: NCURTIS@WHITEOAKMANOR.COM	NCF-0883 / 12/31/2010 Lancaster / Corporation 253 CRAIG MANOR RD LANCASTER, SC 29720-6531 WHITE OAK MANOR-LANCASTER INC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 132

WHITE OAK MANOR-NEWBERRY 2555 KINARD ST NEWBERRY, SC 29108-2903 FACILITY #:803-276-6060 GILLIAM, MELISSA S PH#: 803-276-6060 Facility Email: MGILLIAM@WHITEOAKMANOR.COM Fac. Contact Email: MGILLIAM@WHITEOAKMANOR.COM	NCF-0884 / 12/31/2010 Newberry / Corporation 2555 KINARD ST NEWBERRY, SC 29108-2903 WHITE OAK MANOR-NEWBERRY INC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 146

WHITE OAK MANOR-ROCK HILL 1915 EBENEZER RD ROCK HILL, SC 29732-1097 FACILITY #:803-366-8155 ALEXANDER, JANE G PH#: 803-366-8155 Facility Email: JALEXANDER@WHITEOAKMANOR.COM Fac. Contact Email: JALEXANDER@WHITEOAKMANOR.COM	NCF-0885 / 12/31/2010 York / Corporation 1915 EBENEZER RD ROCK HILL, SC 29732-1097 WHITE OAK MANOR-ROCK HILL INC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 141

WHITE OAK MANOR-SPARTANBURG 295 E PEARL ST SPARTANBURG, SC 29303-3666 FACILITY #:864-585-0241 NELSON, ANDREW R PH#: 864-573-0106 Facility Email: ANELSON@WHITEOAKMANOR.COM Fac. Contact Email: No Facility Contact Email on Record	NCF-0889 / 12/31/2010 Spartanburg / Corporation PO BOX 4887 SPARTANBURG, SC 29305-4887 WHITE OAK MANOR-SPARTANBURG INC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 192

**SCDHEC
Nursing Homes**

March 1, 2010

DHEC Regulation 61-17

Name of Facility Location Street Location City, State Administrator	License#/Expiration County/Ownership Type Mailing Address Licensee
WHITE OAK MANOR-YORK 111 S CONGRESS ST YORK, SC 29745-1836 FACILITY #:803-684-0035 GIBBS, TAMMY L PH#: 803-684-0035 Facility Email: TGIBBS@WHITEOAKMANOR.COM Fac. Contact Email: TGIBBS@WHITEOAKMANOR.COM	NCF-0887 / 12/31/2010 York / Corporation PO BOX 629 YORK, SC 29745-0629 WHITE OAK MANOR-YORK INC

Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 109

WILDEWOOD DOWNS NURSING AND REHABILITATION CENTER 731 POLO RD COLUMBIA, SC 29223-4462 FACILITY #:803-788-5115 ABERNATHY, EVA MAE PH#: 803-788-5115 Facility Email: No Facility Email on Record Fac. Contact Email: HEATHERC@WILDEWOOD-DOWNS.COM	NCF-0914 / 12/31/2010 Richland / Ltd. Liability 731 POLO RD COLUMBIA, SC 29223-4462 WILDEWOOD DOWNS RETIREMENT LLC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 80

WILLOW BROOK COURT AT PARK POINTE VILLAGE 2993 VAN VALIN DR ROCK HILL, SC 29732-8079 FACILITY #:803-327-4723 PETTY, JIM PH#: 803-327-4723 Facility Email: JPETTY@ACTSLIFE.ORG Fac. Contact Email: No Facility Contact Email on Record	NCF-0916 / 07/31/2010 York / Corporation 2993 VAN VALIN DR ROCK HILL, SC 29732-8079 PARK POINTE VILLAGE INC
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Alzheimers Care: Y Alzheimers Unit: N Total Number of Licensed Beds 40

WILLOW CREEK LIVING CENTER 406 W BROAD ST IVA, SC 29655-9765 FACILITY #:864-348-7433 HERITAGE, CARLA PH#: 864-348-7433 Facility Email: JSWIFT@HMR-LTC.COM Fac. Contact Email: ADMINWILLOW@HMR-LTC.COM	NCF-0904 / 09/30/2010 Anderson / Ltd. Liability 101 GRACE DR EASLEY, SC 29640-9088 WILLOW CREEK LIVING CENTER LLC
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 60

WINDSOR MANOR 5583 SUMMERTON HWY MANNING, SC 29102-5217 FACILITY #:803-478-2323 MILES, ANETTE C PH#: 803-478-2323 Facility Email: AMILES@CLARENDONHEALTH.COM Fac. Contact Email: AMILES@CLARENDONHEALTH.COM	NCF-0737 / 01/31/2011 Clarendon / Non-Profit Corporation PO BOX 1230 SUMMERTON, SC 29148-1230 CLARENDON HOSPITAL DISTRICT
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Alzheimers Care: N Alzheimers Unit: N Total Number of Licensed Beds 64

SCDHEC
Nursing Homes

March 1, 2010

DHEC Regulation 61-17

Name of Facility
Location Street
Location City, State
Administrator

License#/Expiration
County/Ownership Type
Mailing Address
Licensee

WOODRUFF MANOR

1114 E GEORGIA RD

WOODRUFF, SC 29388-9350 FACILITY #:864-476-7092

TAYLOR, KEITH PH#:

Facility Email: ADMINISTRATOR@WOODRUFFMANOR.COM

Fac. Contact Email: No Facility Contact Email on Record

NCF-0823 / 09/30/2010

Spartanburg / Ltd. Liability

PO BOX 879

WOODRUFF, SC 29388-0879

WOODRUFF MANOR LLC

Alzheimers Care: Y Alzheimers Unit: N Total Number of Licensed Beds 88

Total Number of Facilities: 196

Alzheimers Care : 33

Alzheimers Units : 19

Licensed Beds : 20,005