

Texas Health and Human Services Commission

ICF/IID Directory

Sorted by: County, City, Facility Name

County ANDERSON	Reg Svcs: ICF/IID TEAM	Region 04 - TYLER	
Facility Information:	Facility ID: 003868	Owner Information	
ELKHART INN COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
208 FM 1817		9901 LINN STATION ROAD	
ELKHART TX 75839		LOUISVILLE KY	40223-3808
Phone (903) 764-5072	Fax	PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019	
PRIVATE Beds: 0	TITLE 18/19: 0		
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County ANDERSON	Reg Svcs: ICF/IID TEAM	Region 04 - TYLER	
Facility Information:	Facility ID: 007294	Owner Information	
CRESTVIEW COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
216 CREST DR		9901 LINN STATION ROAD	
PALESTINE TX 75801-7360		LOUISVILLE KY	40223-3808
Phone (903) 729-1898	Fax	PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019	
PRIVATE Beds: 0	TITLE 18/19: 0		
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County ANDERSON	Reg Svcs: ICF/IID TEAM	Region 04 - TYLER	
Facility Information:	Facility ID: 003685	Owner Information	
MAVERICK COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
427 MAVERICK DR		9901 LINN STATION ROAD	
PALESTINE TX 75801		LOUISVILLE KY	40223-3808
Phone (903) 723-0777	Fax (713) 622-9141	PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019	
PRIVATE Beds: 0	TITLE 18/19: 0		
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County ANDERSON	Reg Svcs: ICF/IID TEAM	Region 04 - TYLER	
Facility Information:	Facility ID: 007456	Owner Information	
REDWOOD TERRACE COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
115 REDWOOD DR		9901 LINN STATION ROAD	
PALESTINE TX 75801-5826		LOUISVILLE KY	40223-3808
Phone (903) 729-6700	Fax (713) 622-9141	PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019	
PRIVATE Beds: 0	TITLE 18/19: 0		
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County ANDERSON	Reg Svcs: ICF/IID TEAM	Region 04 - TYLER	
Facility Information:	Facility ID: 003928	Owner Information	
WESTWOOD COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
219 BROOKVIEW LN		9901 LINN STATION ROAD	
PALESTINE TX 75801		LOUISVILLE KY	40223-3808
Phone (903) 729-8711	Fax (713) 622-9141	PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019	
PRIVATE Beds: 0	TITLE 18/19: 0		

County	ANGELINA	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 007606			Owner Information	
DIBOLL HOUSE				THE BURKE CENTER	
200 STUBBLEFIELD				1111	
DIBOLL	TX 75941				TX
Phone (409) 639-1636	Fax			PHONE:	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt:	

County	ANGELINA	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 007534			Owner Information	
510 JEFFERSON				ST GILES LIVING CENTERS INC	
510 JEFFERSON				912 MARKUS	
LUFKIN	TX 75901			LUFKIN	TX 75901
Phone (936) 639-1615	Fax (936) 639-1632			PHONE: (936) 639-1615	FAX: (936) 639-1632
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 09/01/2019	

County	ANGELINA	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 003860			Owner Information	
COOPER COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
105 COOPER ST				9901 LINN STATION ROAD	
LUFKIN	TX 75904			LOUISVILLE	KY 40223-3808
Phone (936) 639-1573	Fax (713) 622-9141			PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 01/01/2019	

County	ANGELINA	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 007355			Owner Information	
CUNNINGHAM HOUSE				THE BURKE CENTER	
1010 CUNNINGHAM RD				1111	
LUFKIN	TX 75901				TX
Phone (409) 634-2257	Fax			PHONE:	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt:	

County	ANGELINA	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 007522			Owner Information	
HOWARD HOUSE				ST GILES LIVING CENTERS INC	
2007 HOWARD STREET				912 MARKUS	
LUFKIN	TX 75901			LUFKIN	TX 75901
Phone (936) 639-1610	Fax (936) 639-1632			PHONE: (936) 639-1615	FAX: (936) 639-1632
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 09/01/2019	

County	ANGELINA	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 003857			Owner Information	
HUDSON COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
164 FREEMAN CEMETERY RD				9901 LINN STATION ROAD	
LUFKIN	TX 75904			LOUISVILLE	KY 40223-3808
Phone (936) 875-3078	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 01/01/2019	

County	ANGELINA	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 007439			Owner Information	
KARLA HOUSE				ST GILES - BAYTOWN INC	
107 KARLA DR				2203 KILGORE RD	
LUFKIN	TX 75901			BAYTOWN TX	77520
Phone (936) 275-3466	Fax (936) 275-9732			PHONE: (281) 837-1942	FAX: (281) 427-0586
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 09/01/2019	

County	ANGELINA	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 007103			Owner Information	
LUFKIN STATE SUPPORTED LIVING CENTER				DADS	
HWY 69 N				PO BOX 12668	
LUFKIN	TX 75901			AUSTIN TX	78711
Phone (936) 853-8350	Fax (956) 853-8521			PHONE: (512) 454-3761	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 486			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE STATE SCHOOL/STATE CENTER
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt:	

County	ANGELINA	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 007406			Owner Information	
MARKUS HOUSE				ST GILES LIVING CENTERS INC	
912 MARKUS				912 MARKUS	
LUFKIN	TX 75901			LUFKIN TX	75901
Phone (936) 639-1615	Fax (936) 639-1632			PHONE: (936) 639-1615	FAX: (936) 639-1632
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 09/01/2019	

County	ANGELINA	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 003869			Owner Information	
SOUTHWOOD COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
1500 SOUTHWOOD				9901 LINN STATION ROAD	
LUFKIN	TX 75904			LOUISVILLE KY	40223-3808
Phone (409) 639-6906	Fax (936) 639-5063			PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 01/01/2019	

County	ANGELINA	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 003898			Owner Information	
STECHEER COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
702 MARION ST				9901 LINN STATION ROAD	
LUFKIN	TX 75904			LOUISVILLE KY	40223-3808
Phone (936) 639-6998	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 01/01/2019	

County	ANGELINA	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 003862			Owner Information	
WESTSIDE COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
6895 FM 3150				9901 LINN STATION ROAD	
LUFKIN	TX 75904			LOUISVILLE KY	40223-3808
Phone (936) 639-1575	Fax (936) 639-5063			PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 09/23/2018	

County	ANGELINA	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 003899	Owner Information			
WHITE DOVE COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
462 WHITE DOVE DRIVE		9901 LINN STATION ROAD			
LUFKIN	TX 75904-9798	LOUISVILLE KY 40223-3808			
Phone (936) 824-4422	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2285			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 01/01/2019			

County	ARCHER	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 003797	Owner Information			
OUACHITA ACRES		D & S RESIDENTIAL SERVICES LP			
7752 STATE HWY 79 SOUTH		8911 N CAPITAL OF TX HWY ,BLDG 1 STE 1300			
WICHITA FALLS	TX 76310	AUSTIN TX 78759			
Phone (940) 692-6282	Fax (512) 327-5355	PHONE: (512) 327-2325 FAX: (512) 327-5355			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 12/01/2019			

County	AUSTIN	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007270	Owner Information			
BELLVILLE COMMUNITY RESIDENCE		D & S RESIDENTIAL SERVICES LP			
305 S THOMAS ST		8911 N CAPITAL OF TX HWY ,BLDG 1 STE 1300			
BELLVILLE	TX 77418	AUSTIN TX 78759			
Phone (979) 865-8112	Fax (512) 327-5355	PHONE: (512) 327-2325 FAX: (512) 327-5355			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 07/01/2019			

County	BASTROP	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 003762	Owner Information			
BASTROP COMMUNITY RESIDENCE		D & S RESIDENTIAL SERVICES LP			
133 PLUM ST		8911 N CAPITAL OF TX HWY ,BLDG 1 STE 1300			
BASTROP	TX 78602	AUSTIN TX 78759			
Phone (512) 321-3316	Fax (512) 327-5355	PHONE: (512) 327-2325 FAX: (512) 327-5355			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 8			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 07/01/2019			

County	BASTROP	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007634	Owner Information			
JEFFERSON COMMUNITY RESIDENCE		D & S RESIDENTIAL SERVICES LP			
1405 JEFFERSON ST		8911 N CAPITAL OF TX HWY ,BLDG 1 STE 1300			
BASTROP	TX 78602	AUSTIN TX 78759			
Phone (512) 303-7638	Fax (512) 327-5355	PHONE: (512) 327-2325 FAX: (512) 327-5355			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 07/01/2019			

County	BASTROP	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007635	Owner Information			
LAKEVIEW COMMUNITY RESIDENCE		D & S RESIDENTIAL SERVICES LP			
223 MATTHEW COVE		8911 N CAPITAL OF TX HWY ,BLDG 1 STE 1300			
BASTROP	TX 78602	AUSTIN TX 78759			
Phone (512) 303-6758	Fax (512) 327-5355	PHONE: (512) 327-2325 FAX: (512) 327-5355			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 07/01/2019			

County	BASTROP	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 003991	Owner Information			
SMITHVILLE COMMUNITY RESIDENCE		KENMAR RESIDENTIAL SERVICES INCORPORATED			
602 HICKORY		33 CYPRESS BLVD			,SUITE 100
SMITHVILLE	TX 78957	ROUND ROCK		TX	78665
Phone (512) 237-3715	Fax	PHONE:	(512) 336-0800	FAX:	(512) 336-0812
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID:	6	PROGRAM TYPE:	ICF/IID
Cert Alzh Capacity: 0	TITLE19: 0	SERVICE TYPE:	PRIVATELY OWNED	License Exp Dt:	03/15/2020
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BELL	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007459	Owner Information			
PROSPECT COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
1805 CANYON CREEK DRIVE		9901 LINN STATION ROAD			
TEMPLE	TX 76502-3210	LOUISVILLE		KY	40223-3808
Phone (254) 773-4173	Fax	PHONE:	(502) 394-2100	FAX:	(502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID:	6	PROGRAM TYPE:	ICF/IID
Cert Alzh Capacity: 0	TITLE19: 0	SERVICE TYPE:	PRIVATELY OWNED	License Exp Dt:	01/01/2019
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BELL	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007219	Owner Information			
TAYLORS COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
221 TAYLORS DR		9901 LINN STATION ROAD			
TEMPLE	TX 76502	LOUISVILLE		KY	40223-3808
Phone (254) 773-6700	Fax	PHONE:	(502) 394-2100	FAX:	(502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID:	6	PROGRAM TYPE:	ICF/IID
Cert Alzh Capacity: 0	TITLE19: 0	SERVICE TYPE:	PRIVATELY OWNED	License Exp Dt:	01/01/2019
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BELL	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007220	Owner Information			
TRENTON HOUSE		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
3220 TRENTON DRIVE		9901 LINN STATION ROAD			
TEMPLE	TX 76504	LOUISVILLE		KY	40223-3808
Phone (254) 773-2212	Fax	PHONE:	(502) 394-2100	FAX:	(502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID:	6	PROGRAM TYPE:	ICF/IID
Cert Alzh Capacity: 0	TITLE19: 0	SERVICE TYPE:	PRIVATELY OWNED	License Exp Dt:	01/01/2019
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007376	Owner Information			
COUNCIL OAKS @ MISTY RIDGE		COUNCIL OAKS COMMUNITY OPTIONS LTD			
7005 MISTY RIDGE		11901 TOEPPERWEIN			,STE 1001
CONVERSE	TX 78109	SAN ANTONIO		TX	78233
Phone (210) 564-0317	Fax (210) 590-9503	PHONE:	(210) 646-0717	FAX:	(210) 599-9789
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID:	6	PROGRAM TYPE:	ICF/IID
Cert Alzh Capacity: 0	TITLE19: 0	SERVICE TYPE:	PRIVATELY OWNED	License Exp Dt:	05/01/2020
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007318	Owner Information			
COUNCIL OAKS AT NUGGET CREEK		COUNCIL OAKS COMMUNITY OPTIONS LTD			
10022 NUGGET CREEK		11901 TOEPPERWEIN			,STE 1001
CONVERSE	TX 78109	SAN ANTONIO		TX	78233
Phone (210) 945-9124	Fax	PHONE:	(210) 646-0717	FAX:	(210) 599-9789
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID:	6	PROGRAM TYPE:	ICF/IID
Cert Alzh Capacity: 0	TITLE19: 0	SERVICE TYPE:	PRIVATELY OWNED	License Exp Dt:	11/01/2019
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID:	003652	Owner Information		
COUNCIL OAKS AT TROUT RIDGE			COUNCIL OAKS COMMUNITY OPTIONS LTD		
10026 TROUT RIDGE			11901 TOEPPERWEIN	,STE 1001	
CONVERSE	TX	78109	SAN ANTONIO	TX	78233
Phone	(210) 590-3909	Fax			
TOTAL Lic Capacity:	0	TITLE 18:	0	PHONE:	(210) 646-0717
Cert Alzh Capacity:	0	TITLE19:	0	FAX:	(210) 599-9789
PRIVATE Beds:	0	TITLE 18/19:	0	PROGRAM TYPE:	ICF/IID
				SERVICE TYPE	PRIVATELY OWNED
				License Exp Dt:	11/01/2019

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID:	104463	Owner Information		
COUNCIL OAKS FLATLAND TRAIL			COUNCIL OAKS COMMUNITY OPTIONS LTD		
10304 FLATLAND TRAIL			11901 TOEPPERWEIN	,STE 1001	
CONVERSE	TX	78109	SAN ANTONIO	TX	78233
Phone	(210) 659-9553	Fax	(210) 599-9789		
TOTAL Lic Capacity:	0	TITLE 18:	0	PHONE:	(210) 646-0717
Cert Alzh Capacity:	0	TITLE19:	0	FAX:	(210) 599-9789
PRIVATE Beds:	0	TITLE 18/19:	0	PROGRAM TYPE:	ICF/IID
				SERVICE TYPE	PRIVATELY OWNED
				License Exp Dt:	09/17/2018

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID:	101821	Owner Information		
SPRUCE RIDGE			EDUCARE COMMUNITY LIVING CORPORATION - TEXAS		
10026 SPRUCE RIDGE DR			9901 LINN STATION ROAD		
CONVERSE	TX	78109	LOUISVILLE	KY	40223
Phone	(210) 590-1348	Fax			
TOTAL Lic Capacity:	0	TITLE 18:	0	PHONE:	(502) 394-2100
Cert Alzh Capacity:	0	TITLE19:	0	FAX:	(502) 394-2369
PRIVATE Beds:	0	TITLE 18/19:	0	PROGRAM TYPE:	ICF/IID
				SERVICE TYPE	PRIVATELY OWNED
				License Exp Dt:	11/01/2019

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID:	007601	Owner Information		
10115 CEDARMONT			CALAB INC		
10115 CEDARMONT			3803 S ROBINSON RD		
SAN ANTONIO	TX	78245	GRAND PRAIRIE	TX	75052-1239
Phone	(210) 520-2539	Fax	(210) 647-7637		
TOTAL Lic Capacity:	0	TITLE 18:	0	PHONE:	(972) 263-2112
Cert Alzh Capacity:	0	TITLE19:	0	FAX:	(972) 263-2115
PRIVATE Beds:	0	TITLE 18/19:	0	PROGRAM TYPE:	ICF/IID
				SERVICE TYPE	PRIVATELY OWNED
				License Exp Dt:	05/04/2020

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID:	007602	Owner Information		
11311 MORINO PARK			CALAB INC		
11311 MORINO PARK			3803 S ROBINSON RD		
SAN ANTONIO	TX	78249	GRAND PRAIRIE	TX	75052-1239
Phone	(210) 694-4418	Fax	(210) 647-7637		
TOTAL Lic Capacity:	0	TITLE 18:	0	PHONE:	(972) 263-2112
Cert Alzh Capacity:	0	TITLE19:	0	FAX:	(972) 263-2115
PRIVATE Beds:	0	TITLE 18/19:	0	PROGRAM TYPE:	ICF/IID
				SERVICE TYPE	PRIVATELY OWNED
				License Exp Dt:	05/05/2020

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID:	007347	Owner Information		
7123 SPRING MORNING			CALAB INC		
7123 SPRING MORNING			3803 S ROBINSON RD		
SAN ANTONIO	TX	78249	GRAND PRAIRIE	TX	75052-1239
Phone	(210) 690-3258	Fax	(210) 647-7637		
TOTAL Lic Capacity:	0	TITLE 18:	0	PHONE:	(972) 263-2112
Cert Alzh Capacity:	0	TITLE19:	0	FAX:	(972) 263-2115
PRIVATE Beds:	0	TITLE 18/19:	0	PROGRAM TYPE:	ICF/IID
				SERVICE TYPE	PRIVATELY OWNED
				License Exp Dt:	09/01/2019

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007600			Owner Information	
9519 AUTUMN BREEZE				CALAB INC	
9519 AUTUMN BREEZE				3803 S ROBINSON RD	
SAN ANTONIO	TX 78250			GRAND PRAIRIE TX	75052-1239
Phone (210) 520-0561	Fax (210) 647-7637			PHONE: (972) 263-2112	FAX: (972) 263-2115
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 05/03/2020	

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007253			Owner Information	
APRICOT				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
12126 APRICOT				9901 LINN STATION ROAD	
SAN ANTONIO	TX 78247			LOUISVILLE KY	40223
Phone (210) 545-1581	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 12/01/2018	

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007216			Owner Information	
ARBOR WOOD				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
9035 ARBORWOOD				9901 LINN STATION ROAD	
SAN ANTONIO	TX 78250			LOUISVILLE KY	40223
Phone (210) 681-5334	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 11/20/2019	

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007349			Owner Information	
AUTISTIC TREATMENT CENTER WADES DON WOOD				AUTISTIC TREATMENT CENTER INC	
6307 WADES DON WOOD				10503 METRIC DR	
SAN ANTONIO	TX 78233			DALLAS TX	75243
Phone (210) 590-2107	Fax (210) 590-3143			PHONE: (972) 644-2076	FAX: (972) 644-5650
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 12/18/2019	

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 010179			Owner Information	
BOULDER CREEK				AUTISTIC TREATMENT CENTER INC	
15618 BOULDER CREEK				10503 METRIC DR	
SAN ANTONIO	TX 78247			DALLAS TX	75243
Phone (210) 590-2107	Fax (210) 590-3143			PHONE: (972) 644-2076	FAX: (972) 644-5650
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 07/12/2019	

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 101793			Owner Information	
BOULDER OAKS				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
14038 BOULDER OAKS				9901 LINN STATION ROAD	
SAN ANTONIO	TX 78247			LOUISVILLE KY	40223
Phone (210) 490-4656	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 11/01/2019	

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 003668	Owner Information			
BOULDER OAKS		REACHING MAXIMUM INDEPENDENCE INC			
14022 BOULDER OAKS		6336 MONTGOMERY DR			
SAN ANTONIO	TX 78247	SAN ANTONIO TX 78239			
Phone (210) 494-4915	Fax	PHONE: (210) 656-6674 FAX: (210) 656-0199			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 04/29/2020			

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007409	Owner Information			
BREES		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
222 BREES		9901 LINN STATION ROAD			
SAN ANTONIO	TX 78209	LOUISVILLE KY 40223			
Phone (210) 820-3712	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2369			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 12/01/2018			

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 106866	Owner Information			
BROOKHOLLOW		DECEMBER NINE COMPANY LTD			
14026 BROOKHOLLOW BLVD.		20 FOUNDERS BLVD			
SAN ANTONIO	TX 78232	EL PASO TX 79906			
Phone (210) 656-6674	Fax (210) 656-0199	PHONE: (915) 843-7773 FAX: (915) 843-7784			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 07/13/2019			

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 106502	Owner Information			
BURR HILL		SOUTH TEXAS COMMUNITY LIVING CORP			
16402 BURR HILL STREET		18 AUGUSTA PINES DR ,STE 140 E			
SAN ANTONIO	TX 78247	SPRING TX 77389			
Phone (210) 494-1030	Fax (210) 494-7228	PHONE: (281) 351-1758 FAX: (210) 255-4500			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 5			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 01/25/2019			

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007487	Owner Information			
CADES COVE HOUSE		COMPLETE LIFE CARE			
6647 CADES COVE		6647 CADES COVE			
SAN ANTONIO	TX 78238	SAN ANTONIO TX 78238			
Phone (210) 520-0774	Fax (210) 520-7260	PHONE: (210) 520-0774 FAX: (210) 520-7260			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 12/03/2019			

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007348	Owner Information			
CHISOLM TRAIL		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
2815 CHISOLM TRL		9901 LINN STATION ROAD			
SAN ANTONIO	TX 78217	LOUISVILLE KY 40223			
Phone (210) 820-3650	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2369			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 12/01/2018			

County BEXAR Reg Svcs: TEAM ICF-IID Region 08 - SAN ANTONIO

Facility Information: Facility ID: 007553

COUNCIL OAKS AT ALMARION WAY
9430 ALMARION WAY
SAN ANTONIO TX 78250

Phone (210) 684-7510 Fax (512) 346-4125

TOTAL Lic Capacity: 0 TITLE 18: 0 ICF/IID: 6
Cert Alzh Capacity: 0 TITLE19: 0
PRIVATE Beds: 0 TITLE 18/19: 0

Owner Information

COUNCIL OAKS COMMUNITY OPTIONS LTD
11901 TOEPPERWEIN ,STE 1001
SAN ANTONIO TX 78233

PHONE: (210) 646-0717 FAX: (210) 599-9789
PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED
License Exp Dt: 11/01/2019

County BEXAR Reg Svcs: TEAM ICF-IID Region 08 - SAN ANTONIO

Facility Information: Facility ID: 003698

COUNCIL OAKS AT BEECH TRAIL
7031 BEECH TRAIL
SAN ANTONIO TX 78244

Phone (210) 666-1224 Fax

TOTAL Lic Capacity: 0 TITLE 18: 0 ICF/IID: 6
Cert Alzh Capacity: 0 TITLE19: 0
PRIVATE Beds: 0 TITLE 18/19: 0

Owner Information

COUNCIL OAKS COMMUNITY OPTIONS LTD
11901 TOEPPERWEIN ,STE 1001
SAN ANTONIO TX 78233

PHONE: (210) 646-0717 FAX: (210) 599-9789
PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED
License Exp Dt: 11/01/2019

County BEXAR Reg Svcs: TEAM ICF-IID Region 08 - SAN ANTONIO

Facility Information: Facility ID: 003844

COUNCIL OAKS AT CHERRY GLADE
8303 CHERRY GLADE
SAN ANTONIO TX 78244

Phone (210) 658-9288 Fax (210) 599-9789

TOTAL Lic Capacity: 0 TITLE 18: 0 ICF/IID: 6
Cert Alzh Capacity: 0 TITLE19: 0
PRIVATE Beds: 0 TITLE 18/19: 0

Owner Information

COUNCIL OAKS COMMUNITY OPTIONS LTD
11901 TOEPPERWEIN ,STE 1001
SAN ANTONIO TX 78233

PHONE: (210) 646-0717 FAX: (210) 599-9789
PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED
License Exp Dt: 02/01/2020

County BEXAR Reg Svcs: TEAM ICF-IID Region 08 - SAN ANTONIO

Facility Information: Facility ID: 007234

COUNCIL OAKS AT CLOUDY RIDGE
6124 CLOUDY RIDGE
SAN ANTONIO TX 78247

Phone (210) 637-6506 Fax

TOTAL Lic Capacity: 0 TITLE 18: 0 ICF/IID: 6
Cert Alzh Capacity: 0 TITLE19: 0
PRIVATE Beds: 0 TITLE 18/19: 0

Owner Information

COUNCIL OAKS COMMUNITY OPTIONS LTD
11901 TOEPPERWEIN ,STE 1001
SAN ANTONIO TX 78233

PHONE: (210) 646-0717 FAX: (210) 599-9789
PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED
License Exp Dt: 11/01/2019

County BEXAR Reg Svcs: TEAM ICF-IID Region 08 - SAN ANTONIO

Facility Information: Facility ID: 007466

COUNCIL OAKS AT COUNTRY CROSS
6815 COUNTRY CROSS
SAN ANTONIO TX 78240

Phone (210) 697-9760 Fax

TOTAL Lic Capacity: 0 TITLE 18: 0 ICF/IID: 6
Cert Alzh Capacity: 0 TITLE19: 0
PRIVATE Beds: 0 TITLE 18/19: 0

Owner Information

COUNCIL OAKS COMMUNITY OPTIONS LTD
11901 TOEPPERWEIN ,STE 1001
SAN ANTONIO TX 78233

PHONE: (210) 646-0717 FAX: (210) 599-9789
PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED
License Exp Dt: 11/01/2019

County BEXAR Reg Svcs: TEAM ICF-IID Region 08 - SAN ANTONIO

Facility Information: Facility ID: 007337

COUNCIL OAKS AT SHALLOW CREEK
8211 SHALLOW CREEK
SAN ANTONIO TX 78251

Phone (210) 680-2778 Fax

TOTAL Lic Capacity: 0 TITLE 18: 0 ICF/IID: 6
Cert Alzh Capacity: 0 TITLE19: 0
PRIVATE Beds: 0 TITLE 18/19: 0

Owner Information

COUNCIL OAKS COMMUNITY OPTIONS LTD
11901 TOEPPERWEIN ,STE 1001
SAN ANTONIO TX 78233

PHONE: (210) 646-0717 FAX: (210) 599-9789
PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED
License Exp Dt: 11/01/2019

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007546			Owner Information	
COUNCIL OAKS AT SHALLOW RIDGE				COUNCIL OAKS COMMUNITY OPTIONS LTD	
8722 SHALLOW RIDGE				11901 TOEPPERWEIN	,STE 1001
SAN ANTONIO	TX 78239			SAN ANTONIO	TX 78233
Phone (210) 590-2912	Fax			PHONE: (210) 646-0717	FAX: (210) 599-9789
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt:	11/01/2019

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 003816			Owner Information	
COVENANT HOME				MISSION ROAD DEVELOPMENTAL CENTER	
131 BURR RD				8706 MISSION RD	
SAN ANTONIO	TX 78209			SAN ANTONIO	TX 78214
Phone (210) 828-1424	Fax (210) 828-1246			PHONE: (210) 334-2437	FAX: (210) 922-6006
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 10			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt:	10/03/2018

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007558			Owner Information	
CRATER LAKE HOME				BEXAR COUNTY HOME CARE INC	
5707 CRATER LAKE				PO BOX 100347	
SAN ANTONIO	TX 78244			SAN ANTONIO	TX 78201
Phone (210) 447-7233	Fax (210) 661-2620			PHONE: (210) 661-6262	FAX: (210) 661-2620
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt:	04/08/2019

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007214			Owner Information	
CYPRESS HOLLOW				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
13811 CYPRESS HOLLOW				9901 LINN STATION ROAD	
SAN ANTONIO	TX 78232			LOUISVILLE	KY 40223
Phone (210) 491-0903	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt:	12/01/2018

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007449			Owner Information	
DAWNWOOD				R & K SPECIALIZED HOMES INC	
8358 DAWNWOOD				1550 NE LOOP 410	,STE 206
SAN ANTONIO	TX 78250			SAN ANTONIO	TX 78209
Phone (210) 521-5253	Fax			PHONE: (210) 805-0802	FAX: (210) 805-0744
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt:	08/05/2018

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 104357			Owner Information	
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
2114 OAK CREEK				9901 LINN STATION ROAD	
SAN ANTONIO	TX 78232			LOUISVILLE	KY 40223
Phone (210) 491-4448	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt:	04/14/2019

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 104356	Owner Information			
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
3015 FALL WAY		9901 LINN STATION ROAD			
SAN ANTONIO TX 78247		LOUISVILLE KY 40223			
Phone (210) 499-1282	Fax	PHONE: (502) 394-2100	FAX: (502) 394-2369		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 03/03/2019			

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 104351	Owner Information			
EDUCARE COMMUNITY LIVING CORPORATION-TEXAS		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
3003 PEBBLE TRAIL		9901 LINN STATION ROAD			
SAN ANTONIO TX 78232		LOUISVILLE KY 40223			
Phone (210) 494-4560	Fax	PHONE: (502) 394-2100	FAX: (502) 394-2369		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 05/11/2019			

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 104350	Owner Information			
EDUCARE COMMUNITY LIVING CORPORATION-TEXAS		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
2531 GREAT OAKS DRIVE		9901 LINN STATION ROAD			
SAN ANTONIO TX 78232		LOUISVILLE KY 40223			
Phone (210) 491-5977	Fax	PHONE: (502) 394-2100	FAX: (502) 394-2369		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 12/09/2018			

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 003718	Owner Information			
EISENHAEUER GROUP HOME		BEXAR CO BOARD OF TRUSTEES MHMR SVCS DBA THE CTR FOR HC SVCS			
2927 EISENHAEUER ROAD		3031 IH 10 WEST			
SAN ANTONIO TX 78209		SAN ANTONIO TX 78201			
Phone (210) 659-5857	Fax	PHONE:	FAX:		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 10			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	GOVERNMENT BASED	
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt:			

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007208	Owner Information			
EL DORADO ADULT LIVING CENTER		SPECIALIZED HOME LIFE			
12302 GRAN VISTA		PO BOX 33487			
SAN ANTONIO TX 78233		SAN ANTONIO TX 78265			
Phone (210) 599-8656	Fax (210) 599-8656	PHONE: (210) 599-8656	FAX: (210) 599-8656		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 10/26/2019			

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 003662	Owner Information			
ENCINO VALLEY		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
1906 ENCINO VALLEY		9901 LINN STATION ROAD			
SAN ANTONIO TX 78259		LOUISVILLE KY 40223			
Phone (210) 497-8162	Fax	PHONE: (502) 394-2100	FAX: (502) 394-2369		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 04/20/2018			

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007415	Owner Information			
FEATHER RIDGE		SOUTH TEXAS COMMUNITY LIVING CORP			
13055 FEATHER RIDGE		18 AUGUSTA PINES DR ,STE 140 E			
SAN ANTONIO	TX 78233	SPRING TX 77389			
Phone (210) 599-8965	Fax (210) 494-7228	PHONE: (281) 351-1758 FAX: (210) 255-4500			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 03/01/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007467	Owner Information			
FLORAL WAY COMMUNITY HOME		SOUTH TEXAS COMMUNITY LIVING CORP			
2934 FLORAL WAY		18 AUGUSTA PINES DR ,STE 140 E			
SAN ANTONIO	TX 78247	SPRING TX 77389			
Phone (210) 402-1267	Fax (210) 494-7228	PHONE: (281) 351-1758 FAX: (210) 255-4500			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 03/01/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007400	Owner Information			
FOREST NIGHT HOME		BEXAR COUNTY HOME CARE INC			
11209 FOREST NIGHT		PO BOX 100347			
SAN ANTONIO	TX 78233	SAN ANTONIO TX 78201			
Phone (210) 599-7441	Fax (210) 661-2620	PHONE: (210) 661-6262 FAX: (210) 661-2620			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 05/01/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007438	Owner Information			
FOUNTAIN LAKE		SOUTH TEXAS COMMUNITY LIVING CORP			
5227 FOUNTAIN LAKE		18 AUGUSTA PINES DR ,STE 140 E			
SAN ANTONIO	TX 78244	SPRING TX 77389			
Phone (210) 662-7076	Fax (210) 494-7228	PHONE: (281) 351-1758 FAX: (210) 255-4500			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 03/01/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 101796	Owner Information			
GRANADA		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
106 GRANADA		9901 LINN STATION ROAD			
SAN ANTONIO	TX 78216	LOUISVILLE KY 40223			
Phone (210) 438-9338	Fax (210) 558-9791	PHONE: (502) 394-2100 FAX: (502) 394-2369			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 11/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007364	Owner Information			
GREEN RUN		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
2947 GREEN RUN		9901 LINN STATION ROAD			
SAN ANTONIO	TX 78231-1612	LOUISVILLE KY 40223			
Phone (210) 493-9079	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2369			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/30/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007399			Owner Information	
HALCYON IN THE HEIGHTS				R & K SPECIALIZED HOMES INC	
236 HALCYON				1550 NE LOOP 410	,STE 206
SAN ANTONIO	TX 78209			SAN ANTONIO	TX 78209
Phone (210) 805-0885	Fax (210) 805-0744			PHONE: (210) 805-0802	FAX: (210) 805-0744
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 04/29/2018	

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007465			Owner Information	
HATHAWAY HOME				BEXAR COUNTY HOME CARE INC	
211 W HATHAWAY				PO BOX 100347	
SAN ANTONIO	TX 78209			SAN ANTONIO	TX 78201
Phone (210) 822-7829	Fax (210) 661-2620			PHONE: (210) 661-6262	FAX: (210) 661-2620
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 09/22/2019	

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007256			Owner Information	
HEREFORD HOUSE				AUTISTIC TREATMENT CENTER INC	
14433 HEREFORD				10503 METRIC DR	
SAN ANTONIO	TX 78217			DALLAS	TX 75243
Phone (210) 590-2107	Fax (210) 590-3143			PHONE: (972) 644-2076	FAX: (972) 644-5650
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 03/14/2020	

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007461			Owner Information	
HILLSIDE RIDGE HOUSE				GROWING CAPABILITIES INC	
14727 HILLSIDE RIDGE				18 AUGUSTA PINES STE 140E	
SAN ANTONIO	TX 78233			SPRING	TX 77389
Phone (210) 590-9151	Fax (210) 494-7228			PHONE: (281) 351-1758	FAX: (281) 255-4500
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 09/12/2019	

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007207			Owner Information	
HUNTERS CIRCLE				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
13230 N HUNTERS CIR				9901 LINN STATION ROAD	
SAN ANTONIO	TX 78230			LOUISVILLE	KY 40223
Phone (210) 493-5968	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 10/25/2019	

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007215			Owner Information	
INTRIGUE HOUSE				R & K SPECIALIZED HOMES INC	
11619 INTRIGUE				1550 NE LOOP 410	,STE 206
SAN ANTONIO	TX 78216			SAN ANTONIO	TX 78209
Phone (210) 979-0382	Fax (210) 979-0382			PHONE: (210) 805-0802	FAX: (210) 805-0744
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 11/20/2019	

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007527			Owner Information	
KNOB OAK				KNOB OAK INC	
9714 KNOB OAK				9714 KNOB OAK	
SAN ANTONIO	TX 78250			SAN ANTONIO	TX 78250
Phone (210) 680-6768	Fax (210) 520-0812			PHONE: (210) 690-6768	FAX: (210) 520-0812
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE PRIVATELY OWNED			
		License Exp Dt: 01/01/2019			

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007499			Owner Information	
KOPPLOW HOME				MISSION ROAD DEVELOPMENTAL CENTER	
460 KOPPLOW				8706 MISSION RD	
SAN ANTONIO	TX 78221			SAN ANTONIO	TX 78214
Phone (210) 921-9396	Fax (210) 924-9265			PHONE: (210) 334-2437	FAX: (210) 922-6006
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE PRIVATELY OWNED			
		License Exp Dt: 01/21/2020			

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007435			Owner Information	
LAKE SUNSET COURT				SOUTH TEXAS COMMUNITY LIVING CORP	
3507 LAKE SUNSET CT				18 AUGUSTA PINES DR	,STE 140 E
SAN ANTONIO	TX 78217			SPRING	TX 77389
Phone (210) 656-2106	Fax (210) 494-7228			PHONE: (281) 351-1758	FAX: (210) 255-4500
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE PRIVATELY OWNED			
		License Exp Dt: 03/01/2020			

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 106203			Owner Information	
LAKEWAY				SOUTH TEXAS COMMUNITY LIVING CORP	
4417 LAKEWAY				18 AUGUSTA PINES DR	,STE 140 E
SAN ANTONIO	TX 78244			SPRING	TX 77389
Phone (210) 662-5920	Fax (210) 494-7228			PHONE: (281) 351-1758	FAX: (210) 255-4500
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE PRIVATELY OWNED			
		License Exp Dt: 05/27/2019			

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 003935			Owner Information	
LAMBETH COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
4935 LAMBETH ST				9901 LINN STATION ROAD	
SAN ANTONIO	TX 78228			LOUISVILLE	KY 40223-3808
Phone (210) 509-9938	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE PRIVATELY OWNED			
		License Exp Dt: 10/20/2019			

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007458			Owner Information	
LARIMER SQUARE				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
6006 LARIMER SQ				9901 LINN STATION ROAD	
SAN ANTONIO	TX 78249			LOUISVILLE	KY 40223
Phone (210) 561-0303	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE PRIVATELY OWNED			
		License Exp Dt: 11/01/2019			

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 003775	Owner Information			
MABEE HOME		MISSION ROAD DEVELOPMENTAL CENTER			
7520 S SEA LN		8706 MISSION RD			
SAN ANTONIO	TX 78216	SAN ANTONIO TX 78214			
Phone (210) 377-1328	Fax (210) 377-1328	PHONE: (210) 334-2437 FAX: (210) 922-6006			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 12	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 10/22/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 003629	Owner Information			
MAYFAIR		REACHING MAXIMUM INDEPENDENCE INC			
3118 MAYFAIR		6336 MONTGOMERY DR			
SAN ANTONIO	TX 78217	SAN ANTONIO TX 78239			
Phone (210) 656-6674	Fax (210) 656-0199	PHONE: (210) 656-6674 FAX: (210) 656-0199			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 11/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007292	Owner Information			
MOCKINGBIRD HOME		MISSION ROAD DEVELOPMENTAL CENTER			
7618 MOCKINGBIRD LN		8706 MISSION RD			
SAN ANTONIO	TX 78229-2624	SAN ANTONIO TX 78214			
Phone (210) 349-8125	Fax (210) 349-8149	PHONE: (210) 334-2437 FAX: (210) 922-6006			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 07/18/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 003630	Owner Information			
NEW WORLD		REACHING MAXIMUM INDEPENDENCE INC			
7950 NEW WORLD		6336 MONTGOMERY DR			
SAN ANTONIO	TX 78239	SAN ANTONIO TX 78239			
Phone (210) 656-6674	Fax (210) 656-0199	PHONE: (210) 656-6674 FAX: (210) 656-0199			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 12/05/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 104625	Owner Information			
OASIS HOME		WHITBY ROAD ALLIANCE INC			
6487 WHITBY RD		6487 WHITBY RD			
SAN ANTONIO	TX 78240	SAN ANTONIO TX 78240-2198			
Phone (210) 696-2410	Fax (210) 699-1866	PHONE: (210) 696-2410 FAX: (210) 699-1866			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 8	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 08/10/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007365	Owner Information			
PARK HAVEN HOME		BEXAR COUNTY HOME CARE INC			
6738 PARK HAVEN		PO BOX 100347			
SAN ANTONIO	TX 78244	SAN ANTONIO TX 78201			
Phone (210) 661-1338	Fax (210) 661-2620	PHONE: (210) 661-6262 FAX: (210) 661-2620			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/31/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 003649	Owner Information			
PEBBLE BOW		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
2643 PEBBLE BOW		9901 LINN STATION ROAD			
SAN ANTONIO	TX 78232	LOUISVILLE KY 40223			
Phone (210) 491-0610	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2369			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 03/01/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 003603	Owner Information			
PEPPERIDGE ADULT LIVING CENTER		SPECIALIZED HOME LIFE			
4611 WETZ		PO BOX 33487			
SAN ANTONIO	TX 78217	SAN ANTONIO TX 78265			
Phone (210) 599-8656	Fax	PHONE: (210) 599-8656 FAX: (210) 599-8656			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 06/01/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007508	Owner Information			
QUAIL RUN		COMPLETE LIFE CARE			
7422 QUAIL RUN		6647 CADES COVE			
SAN ANTONIO	TX 78209	SAN ANTONIO TX 78238			
Phone (210) 805-8950	Fax (210) 520-7260	PHONE: (210) 520-0774 FAX: (210) 520-7260			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 02/05/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 104491	Owner Information			
R & K SPECIALIZED HOMES INC		R & K SPECIALIZED HOMES INC			
15910 QUAIL CIRCLE		1550 NE LOOP 410 ,STE 206			
SAN ANTONIO	TX 78247	SAN ANTONIO TX 78209			
Phone (210) 805-0802	Fax (210) 805-0744	PHONE: (210) 805-0802 FAX: (210) 805-0744			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 11/23/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007564	Owner Information			
R & K SPECIALIZED HOMES INC		R & K SPECIALIZED HOMES INC			
6706 TIMBERHILL		1550 NE LOOP 410 ,STE 206			
SAN ANTONIO	TX 78238	SAN ANTONIO TX 78209			
Phone (210) 805-0802	Fax (210) 805-0744	PHONE: (210) 805-0802 FAX: (210) 805-0744			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 09/08/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 104154	Owner Information			
R&K SPECIALIZED HOMES INC		R & K SPECIALIZED HOMES INC			
10214 SQUANTO		1550 NE LOOP 410 ,STE 206			
SAN ANTONIO	TX 78230	SAN ANTONIO TX 78209			
Phone (210) 805-0802	Fax (210) 805-0744	PHONE: (210) 805-0802 FAX: (210) 805-0744			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 05/19/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 104296			Owner Information	
R&K SPECIALIZED HOMES INC				R & K SPECIALIZED HOMES INC	
4703 SHADY BREEZE				1550 NE LOOP 410	,STE 206
SAN ANTONIO	TX 78217			SAN ANTONIO	TX 78209
Phone (210) 805-0802	Fax (210) 805-0744			PHONE: (210) 805-0802	FAX: (210) 805-0744
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 07/14/2020	

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 106756			Owner Information	
R&K SPECIALIZED HOMES INC				R & K SPECIALIZED HOMES INC	
8007 CLYDE DENT				1550 NE LOOP 410	,STE 206
SAN ANTONIO	TX 78250			SAN ANTONIO	TX 78209
Phone (210) 805-0802	Fax (210) 805-0744			PHONE: (210) 805-0802	FAX: (210) 805-0744
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 06/01/2019	

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 105215			Owner Information	
R&K SPECIALIZED HOMES, INC				R & K SPECIALIZED HOMES INC	
8711 OAK LEDGE DR.				1550 NE LOOP 410	,STE 206
SAN ANTONIO	TX 78217			SAN ANTONIO	TX 78209
Phone (210) 805-0802	Fax			PHONE: (210) 805-0802	FAX: (210) 805-0744
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 11/14/2018	

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007478			Owner Information	
REGENCY COMMUNITY SERVICES INC PINETREE				REGENCY COMMUNITY SERVICES INC	
2002 PINETREE LN				2391 NE LOOP 410	,STE 403
SAN ANTONIO	TX 78232			SAN ANTONIO	TX 78217
Phone (210) 403-9372	Fax (210) 495-1538			PHONE: (210) 403-9372	FAX: (210) 495-1538
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 10/01/2019	

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 104052			Owner Information	
ROLLING MEADOWS GROUP HOME				UCG CENTRAL TEXAS HOLDINGS LLC	
7419 OBBLIGATO				2006 N WHEELER	
SAN ANTONIO	TX 78266			VICTORIA	TX 77901
Phone (210) 651-1851	Fax (214) 723-5331			PHONE: (830) 372-2920	FAX: (214) 723-5331
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 09/01/2019	

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007362			Owner Information	
RUSTLING WAY				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
6342 RUSTLING WAY				9901 LINN STATION ROAD	
SAN ANTONIO	TX 78249			LOUISVILLE	KY 40223
Phone (210) 697-9511	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/27/2020	

County BEXAR Reg Svcs: TEAM ICF-IID Region 08 - SAN ANTONIO

Facility Information: Facility ID: 007287

SAGE TRAIL
14231 SAGE TRL
SAN ANTONIO

TX 78231

Phone (210) 493-8809

Fax

TOTAL Lic Capacity: 0

TITLE 18: 0

ICF/IID: 6

Cert Alzh Capacity: 0

TITLE19: 0

PRIVATE Beds: 0

TITLE 18/19: 0

Owner Information

EDUCARE COMMUNITY LIVING CORPORATION - TEXAS

9901 LINN STATION ROAD

LOUISVILLE KY

40223

PHONE: (502) 394-2100

FAX: (502) 394-2369

PROGRAM TYPE: ICF/IID

SERVICE TYPE PRIVATELY OWNED

License Exp Dt: 12/01/2018

County BEXAR Reg Svcs: TEAM ICF-IID Region 08 - SAN ANTONIO

Facility Information: Facility ID: 007114

SAN ANTONIO STATE SUPPORTED LIVING CENTER
6711 S NEW BRAUNFELS AVE
SAN ANTONIO

TX 78223

Phone (210) 532-9610

Fax (210) 531-5183

TOTAL Lic Capacity: 0

TITLE 18: 0

ICF/IID: 339

Cert Alzh Capacity: 0

TITLE19: 0

PRIVATE Beds: 0

TITLE 18/19: 0

Owner Information

DADS

PO BOX 12668

AUSTIN TX

78711

PHONE: (512) 454-3761

FAX:

PROGRAM TYPE: ICF/IID

SERVICE TYPE STATE SCHOOL/STATE CENTER

License Exp Dt:

County BEXAR Reg Svcs: TEAM ICF-IID Region 08 - SAN ANTONIO

Facility Information: Facility ID: 007811

SHADYWOOD
215 SHADYWOOD
SAN ANTONIO

TX 78216

Phone (210) 829-0024

Fax

TOTAL Lic Capacity: 0

TITLE 18: 0

ICF/IID: 6

Cert Alzh Capacity: 0

TITLE19: 0

PRIVATE Beds: 0

TITLE 18/19: 0

Owner Information

EDUCARE COMMUNITY LIVING CORPORATION - TEXAS

9901 LINN STATION ROAD

LOUISVILLE KY

40223

PHONE: (502) 394-2100

FAX: (502) 394-2369

PROGRAM TYPE: ICF/IID

SERVICE TYPE PRIVATELY OWNED

License Exp Dt: 11/01/2019

County BEXAR Reg Svcs: TEAM ICF-IID Region 08 - SAN ANTONIO

Facility Information: Facility ID: 007603

SILVER QUAIL
8706 SILVER QUAIL
SAN ANTONIO

TX 78250

Phone (210) 509-3548

Fax (210) 509-0586

TOTAL Lic Capacity: 0

TITLE 18: 0

ICF/IID: 6

Cert Alzh Capacity: 0

TITLE19: 0

PRIVATE Beds: 0

TITLE 18/19: 0

Owner Information

HOME AT SILVER QUAIL INC

8706 SILVER QUAIL

SAN ANTONIO TX

78250

PHONE: (210) 509-0114

FAX: (210) 509-0586

PROGRAM TYPE: ICF/IID

SERVICE TYPE PRIVATELY OWNED

License Exp Dt: 10/01/2019

County BEXAR Reg Svcs: TEAM ICF-IID Region 08 - SAN ANTONIO

Facility Information: Facility ID: 007481

SPRING DOVE
5822 SPRING DOVE
SAN ANTONIO

TX 78247

Phone (210) 590-1346

Fax (210) 494-7228

TOTAL Lic Capacity: 0

TITLE 18: 0

ICF/IID: 6

Cert Alzh Capacity: 0

TITLE19: 0

PRIVATE Beds: 0

TITLE 18/19: 0

Owner Information

SOUTH TEXAS COMMUNITY LIVING CORP

18 AUGUSTA PINES DR ,STE 140 E

SPRING TX

77389

PHONE: (281) 351-1758

FAX: (210) 255-4500

PROGRAM TYPE: ICF/IID

SERVICE TYPE PRIVATELY OWNED

License Exp Dt: 03/01/2020

County BEXAR Reg Svcs: TEAM ICF-IID Region 08 - SAN ANTONIO

Facility Information: Facility ID: 003681

SPRING HARVEST HOUSE
9714 SPRING HARVEST
SAN ANTONIO

TX 78254-6105

Phone (210) 681-8776

Fax

TOTAL Lic Capacity: 0

TITLE 18: 0

ICF/IID: 6

Cert Alzh Capacity: 0

TITLE19: 0

PRIVATE Beds: 0

TITLE 18/19: 0

Owner Information

EDUCARE COMMUNITY LIVING CORPORATION - TEXAS

9901 LINN STATION ROAD

LOUISVILLE KY

40223

PHONE: (502) 394-2100

FAX: (502) 394-2369

PROGRAM TYPE: ICF/IID

SERVICE TYPE PRIVATELY OWNED

License Exp Dt: 06/20/2020

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 101810	Owner Information			
STORMY SUNSET		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
5223 STORMY SUNSET		9901 LINN STATION ROAD			
SAN ANTONIO	TX 78247	LOUISVILLE KY 40223			
Phone (210) 590-6745	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2369			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 11/01/2017			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 003633	Owner Information			
SUNNY GROVE		REACHING MAXIMUM INDEPENDENCE INC			
4706 SUNNY GROVE		6336 MONTGOMERY DR			
SAN ANTONIO	TX 78217	SAN ANTONIO TX 78239			
Phone (210) 655-9353	Fax (210) 656-0199	PHONE: (210) 656-6674 FAX: (210) 656-0199			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 12/18/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007520	Owner Information			
SWANDALE		DREAMS COME TRUE INC			
3242 SWANDALE		3242 SWANDALE ST			
SAN ANTONIO	TX 78230	SAN ANTONIO TX 78230			
Phone (210) 979-6420	Fax (210) 308-7411	PHONE: (210) 979-6420 FAX: (210) 308-7411			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 03/25/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007639	Owner Information			
THATCH		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
8820 THATCH		9901 LINN STATION ROAD			
SAN ANTONIO	TX 78240	LOUISVILLE KY 40223			
Phone (210) 509-8189	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2369			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 12/01/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 003696	Owner Information			
TIMBER MEADOW		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
5401 TIMBER MEADOW		9901 LINN STATION ROAD			
SAN ANTONIO	TX 78250	LOUISVILLE KY 40223			
Phone (210) 680-1818	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2369			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 08/29/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 101823	Owner Information			
VISTA BRIAR		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
17002 VISTA BRIAR DR		9901 LINN STATION ROAD			
SAN ANTONIO	TX 78247	LOUISVILLE KY 40223			
Phone (210) 599-4030	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2369			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 11/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007488			Owner Information	
VISTA CREEK COMMUNITY HOME				SOUTH TEXAS COMMUNITY LIVING CORP	
5403 VISTA CREEK				18 AUGUSTA PINES DR	,STE 140 E
SAN ANTONIO	TX 78247			SPRING	TX 77389
Phone (210) 599-3624		Fax (210) 494-7228		PHONE: (281) 351-1758	FAX: (210) 255-4500
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 03/01/2020	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 102604			Owner Information	
VISTA RUN				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
5303 VISTA RUN				9901 LINN STATION ROAD	
SAN ANTONIO	TX 78247			LOUISVILLE	KY 40223
Phone (210) 653-8261		Fax		PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 11/01/2019	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007291			Owner Information	
WELLES HARBOR				REACHING MAXIMUM INDEPENDENCE INC	
8730 WELLES HARBOR				6336 MONTGOMERY DR	
SAN ANTONIO	TX 78240			SAN ANTONIO	TX 78239
Phone (210) 558-6998		Fax (210) 656-0199		PHONE: (210) 656-6674	FAX: (210) 656-0199
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 07/09/2020	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007420			Owner Information	
WHISPER VALLEY				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
10934 WHISPER VALLEY				9901 LINN STATION ROAD	
SAN ANTONIO	TX 78230			LOUISVILLE	KY 40223
Phone (210) 492-3727		Fax		PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 11/01/2019	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007319			Owner Information	
WOODLAND HILLS				R & K SPECIALIZED HOMES INC	
9418 WOODLAND HILLS				1550 NE LOOP 410	,STE 206
SAN ANTONIO	TX 78250			SAN ANTONIO	TX 78209
Phone (210) 680-3632		Fax		PHONE: (210) 805-0802	FAX: (210) 805-0744
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 09/27/2019	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007250			Owner Information	
COUNCIL OAKS AT PHOENIX				COUNCIL OAKS COMMUNITY OPTIONS LTD	
8418 PHOENIX				11901 TOEPPERWEIN	,STE 1001
SELMA	TX 78154			SAN ANTONIO	TX 78233
Phone (210) 945-8038		Fax		PHONE: (210) 646-0717	FAX: (210) 599-9789
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 11/01/2019	
PRIVATE Beds: 0	TITLE 18/19: 0				

County **BEXAR** Reg Svcs: **TEAM ICF-IID** Region **08 - SAN ANTONIO**

Facility Information: Facility ID: 003948

GUILFORD FORGE COMMUNITY HOME
250 GUILFORD FORGE
UNIVERSAL CITY TX 78148-3615

Phone (210) 658-0412

Fax

TOTAL Lic Capacity: 0

TITLE 18: 0

ICF/IID: 6

Cert Alzh Capacity: 0

TITLE19: 0

PRIVATE Beds: 0

TITLE 18/19: 0

Owner Information

EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP

9901 LINN STATION ROAD

LOUISVILLE KY

40223-3808

PHONE: (502) 394-2100

FAX: (502) 394-2285

PROGRAM TYPE: ICF/IID

SERVICE TYPE PRIVATELY OWNED

License Exp Dt: 01/01/2019

County **BOWIE** Reg Svcs: **ICF/IID TEAM** Region **04 - TYLER**

Facility Information: Facility ID: 003645

EVERGREEN NORTHWOOD COMMUNITY HOME
113 NORTHWOOD
NASH TX 75569

Phone (903) 831-4239

Fax (903) 792-1861

TOTAL Lic Capacity: 0

TITLE 18: 0

ICF/IID: 6

Cert Alzh Capacity: 0

TITLE19: 0

PRIVATE Beds: 0

TITLE 18/19: 0

Owner Information

EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC

10810 SANDEN DR

DALLAS TX

75238

PHONE: (972) 386-4834

FAX:

PROGRAM TYPE: ICF/IID

SERVICE TYPE PRIVATELY OWNED

License Exp Dt: 02/23/2020

County **BOWIE** Reg Svcs: **ICF/IID TEAM** Region **04 - TYLER**

Facility Information: Facility ID: 003628

EVERGREEN COOPER LANE COMMUNITY HOME
3312 COOPER LN
TEXARKANA TX 75503

Phone (903) 831-4632

Fax (903) 792-1861

TOTAL Lic Capacity: 0

TITLE 18: 0

ICF/IID: 6

Cert Alzh Capacity: 0

TITLE19: 0

PRIVATE Beds: 0

TITLE 18/19: 0

Owner Information

EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC

10810 SANDEN DR

DALLAS TX

75238

PHONE: (972) 386-4834

FAX:

PROGRAM TYPE: ICF/IID

SERVICE TYPE PRIVATELY OWNED

License Exp Dt: 11/21/2019

County **BOWIE** Reg Svcs: **ICF/IID TEAM** Region **04 - TYLER**

Facility Information: Facility ID: 007248

EVERGREEN FORTUNE COMMUNITY HOME
3002 FORTUNE AVE
TEXARKANA TX 75503

Phone (903) 838-5625

Fax (903) 792-1861

TOTAL Lic Capacity: 0

TITLE 18: 0

ICF/IID: 6

Cert Alzh Capacity: 0

TITLE19: 0

PRIVATE Beds: 0

TITLE 18/19: 0

Owner Information

EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC

10810 SANDEN DR

DALLAS TX

75238

PHONE: (972) 386-4834

FAX:

PROGRAM TYPE: ICF/IID

SERVICE TYPE PRIVATELY OWNED

License Exp Dt: 03/20/2020

County **BOWIE** Reg Svcs: **ICF/IID TEAM** Region **04 - TYLER**

Facility Information: Facility ID: 003637

EVERGREEN MARYLAND COMMUNITY HOME
106 MARYLAND
TEXARKANA TX 75501

Phone (903) 831-4967

Fax (903) 792-1861

TOTAL Lic Capacity: 0

TITLE 18: 0

ICF/IID: 6

Cert Alzh Capacity: 0

TITLE19: 0

PRIVATE Beds: 0

TITLE 18/19: 0

Owner Information

EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC

10810 SANDEN DR

DALLAS TX

75238

PHONE: (972) 386-4834

FAX:

PROGRAM TYPE: ICF/IID

SERVICE TYPE PRIVATELY OWNED

License Exp Dt: 01/31/2020

County **BOWIE** Reg Svcs: **ICF/IID TEAM** Region **04 - TYLER**

Facility Information: Facility ID: 003638

EVERGREEN MEADOW LANE COMMUNITY HOME
#20 MEADOW LN
TEXARKANA TX 75503

Phone (903) 792-2529

Fax (903) 792-1861

TOTAL Lic Capacity: 0

TITLE 18: 0

ICF/IID: 6

Cert Alzh Capacity: 0

TITLE19: 0

PRIVATE Beds: 0

TITLE 18/19: 0

Owner Information

EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC

10810 SANDEN DR

DALLAS TX

75238

PHONE: (972) 386-4834

FAX:

PROGRAM TYPE: ICF/IID

SERVICE TYPE PRIVATELY OWNED

License Exp Dt: 12/22/2018

County **BOWIE** Reg Svcs: ICF/IID TEAM Region 04 - TYLER

Facility Information: Facility ID: 007203
 EVERGREEN MOORES LANE COMMUNITY HOME
 3611 MOORES LN
 TEXARKANA TX 75503
 Phone (903) 832-2682 Fax (903) 792-1861
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
 EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC
 10810 SANDEN DR
 DALLAS TX 75238
PHONE: (972) 386-4834 **FAX:**
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 10/10/2019

County **BOWIE** Reg Svcs: ICF/IID TEAM Region 04 - TYLER

Facility Information: Facility ID: 007403
 EVERGREEN PINE KNOLL COMMUNITY HOME
 3603 PINE KNOLL
 TEXARKANA TX 75503
 Phone (903) 793-0193 Fax (903) 793-3129
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
 EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC
 10810 SANDEN DR
 DALLAS TX 75238
PHONE: (972) 386-4834 **FAX:**
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 03/05/2020

County **BOWIE** Reg Svcs: ICF/IID TEAM Region 04 - TYLER

Facility Information: Facility ID: 007617
 NEW HORIZONS ELIZABETH
 4820 ELIZABETH ST
 TEXARKANA TX 75503
 Phone (903) 794-0509 Fax (903) 793-6460
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
 HORIZONS GENERAL PARTNERSHIP
 4904 ELIZABETH ST
 TEXARKANA TX 75503
PHONE: (903) 794-0509 **FAX:** (903) 793-6460
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 07/22/2018

County **BOWIE** Reg Svcs: ICF/IID TEAM Region 04 - TYLER

Facility Information: Facility ID: 007408
 NEW HORIZONS MAGNOLIA
 4125 MAGNOLIA ST
 TEXARKANA TX 75503
 Phone (903) 794-0509 Fax (903) 793-6460
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
 HORIZONS GENERAL PARTNERSHIP
 4904 ELIZABETH ST
 TEXARKANA TX 75503
PHONE: (903) 794-0509 **FAX:** (903) 793-6460
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 05/15/2020

County **BOWIE** Reg Svcs: ICF/IID TEAM Region 04 - TYLER

Facility Information: Facility ID: 007569
 NEW HORIZONS STILLWELL
 2611 STILLWELL DR
 TEXARKANA TX 75503
 Phone (903) 794-0509 Fax (903) 793-6460
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
 HORIZONS GENERAL PARTNERSHIP
 4904 ELIZABETH ST
 TEXARKANA TX 75503
PHONE: (903) 794-0509 **FAX:** (903) 793-6460
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 11/23/2019

County **BOWIE** Reg Svcs: ICF/IID TEAM Region 04 - TYLER

Facility Information: Facility ID: 007407
 NEW HORIZONS WEST 27TH ST
 404 W 27TH ST
 TEXARKANA TX 75503
 Phone (903) 794-0509 Fax (903) 793-6460
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
 HORIZONS GENERAL PARTNERSHIP
 4904 ELIZABETH ST
 TEXARKANA TX 75503
PHONE: (903) 794-0509 **FAX:** (903) 793-6460
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 05/13/2020

County	BRAZORIA	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003925	Owner Information			
HIGHLAND GROUP HOME		EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST			
1304 HIGHLAND		9901 LINN STATION ROAD			
ALVIN	TX 77512	LOUISVILLE KY 40223-3808			
Phone (281) 388-2726	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2249			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 03/01/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BRAZORIA	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003618	Owner Information			
TOVREA		EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST			
802 TOVREA		9901 LINN STATION ROAD			
ALVIN	TX 77512	LOUISVILLE KY 40223-3808			
Phone (281) 331-7413	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2249			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 07/20/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BRAZORIA	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 105082	Owner Information			
ARCOLA		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
800 N ARCOLA		9901 LINN STATION ROAD			
ANGLETON	TX 77515	LOUISVILLE KY 40223			
Phone (979) 848-8600	Fax (979) 345-4969	PHONE: (502) 394-2100 FAX: (502) 394-2369			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 08/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BRAZORIA	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007626	Owner Information			
OAK TREE		EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST			
1811 OAKTREE CIR		9901 LINN STATION ROAD			
PEARLAND	TX 77581	LOUISVILLE KY 40223-3808			
Phone (281) 992-8176	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2249			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 09/07/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BRAZORIA	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003963	Owner Information			
SOMERSET GROUP HOME		EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST			
1117 CHESTERWOOD		9901 LINN STATION ROAD			
PEARLAND	TX 77581	LOUISVILLE KY 40223-3808			
Phone (281) 992-8510	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2249			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 02/28/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BRAZOS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007662	Owner Information			
FAMILY TREE		THE MHMR AUTHORITY OF BRAZOS VALLEY			
408 N WASHINGTON AVE		P.O. BOX 4588			
BRYAN	TX 77803	BRYAN TX 77805			
Phone (979) 361-9875	Fax	PHONE: (979) 361-9800 FAX:			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 8	PROGRAM TYPE: ICF/IID SERVICE TYPE GOVERNMENT BASED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt:			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BRAZOS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007561	Owner Information			
MOSAIC		MOSAIC			
3706 CARTER CREEK PKWY		2245 MIDWAY ROAD			,STE 300
BRYAN	TX 77801	CARROLLTON		TX	75006
Phone (979) 823-7622	Fax (979) 775-5733	PHONE:	(972) 866-9989	FAX:	(972) 991-0834
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID:	6	PROGRAM TYPE:	ICF/IID
Cert Alzh Capacity: 0	TITLE19: 0	SERVICE TYPE:	PRIVATELY OWNED	License Exp Dt:	01/01/2019
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BROWN	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 007325	Owner Information			
CENTRAL TEXAS MHMR CENTER		CENTRAL TEXAS MHMR CENTER			
2209 ELEVENTH ST		408 MULBERRY DR			
BROWNWOOD	TX 76801	PHONE:	(325) 646-9574	FAX:	(325) 646-7911
Phone (325) 646-6952	Fax	PROGRAM TYPE:	ICF/IID	SERVICE TYPE:	GOVERNMENT BASED
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID:	6	License Exp Dt:	
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BROWN	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 003734	Owner Information			
OPPORTUNITY DEVELOPMENT CENTER 1		CENTRAL TEXAS MHMR CENTER			
1600 STEWART ST		408 MULBERRY DR			
BROWNWOOD	TX 76801	PHONE:	(325) 646-9574	FAX:	(325) 646-7911
Phone (325) 643-5565	Fax (325) 643-3966	PROGRAM TYPE:	ICF/IID	SERVICE TYPE:	GOVERNMENT BASED
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID:	13	License Exp Dt:	
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BROWN	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 003840	Owner Information			
OPPORTUNITY DEVELOPMENT CENTER 2		CENTRAL TEXAS MHMR CENTER			
403 MULBERRY DR		408 MULBERRY DR			
BROWNWOOD	TX 76801	PHONE:	(325) 646-9574	FAX:	(325) 646-7911
Phone (325) 643-1336	Fax (325) 643-3966	PROGRAM TYPE:	ICF/IID	SERVICE TYPE:	GOVERNMENT BASED
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID:	13	License Exp Dt:	
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BURNET	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 003675	Owner Information			
BERTRAM COMMUNITY RESIDENCE		D & S RESIDENTIAL SERVICES LP			
648 W CEDAR ST		8911 N CAPITAL OF TX HWY			,BLDG 1 STE 1300
BERTRAM	TX 78605	AUSTIN	TX		78759
Phone (512) 355-3005	Fax (512) 327-5355	PHONE:	(512) 327-2325	FAX:	(512) 327-5355
TOTAL Lic Capacity: 0	TITLE 18: 0	PROGRAM TYPE:	ICF/IID	SERVICE TYPE:	PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt:	12/01/2019		
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BURNET	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007505	Owner Information			
BLUEBONNET COMMUNITY RESIDENCE		D & S RESIDENTIAL SERVICES LP			
1260 HWY 29 W		8911 N CAPITAL OF TX HWY			,BLDG 1 STE 1300
BERTRAM	TX 78605	AUSTIN	TX		78759
Phone (512) 355-3012	Fax (512) 327-5355	PHONE:	(512) 327-2325	FAX:	(512) 327-5355
TOTAL Lic Capacity: 0	TITLE 18: 0	PROGRAM TYPE:	ICF/IID	SERVICE TYPE:	PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt:	12/01/2019		
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BURNET	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007450	Owner Information			
WOODVIEW COMMUNITY RESIDENCE		D & S RESIDENTIAL SERVICES LP			
407 CR 320		8911 N CAPITAL OF TX HWY		.BLDG 1 STE 1300	
BERTRAM	TX 78605	AUSTIN TX		78759	
Phone (512) 355-3213	Fax (512) 327-5355	PHONE: (512) 327-2325	FAX: (512) 327-5355		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 12/01/2019			

County	BURNET	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 003879	Owner Information			
HIGHLAND LAKES COMMUNITY RESIDENCE		D & S RESIDENTIAL SERVICES LP			
705 KINCHELOE		8911 N CAPITAL OF TX HWY		.BLDG 1 STE 1300	
BURNET	TX 78611	AUSTIN TX		78759	
Phone (512) 756-4404	Fax (512) 327-5355	PHONE: (512) 327-2325	FAX: (512) 327-5355		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 12/01/2019			

County	BURNET	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007221	Owner Information			
SUNSET COMMUNITY RESIDENCE		D & S RESIDENTIAL SERVICES LP			
313 SUNSET DR		8911 N CAPITAL OF TX HWY		.BLDG 1 STE 1300	
BURNET	TX 78611	AUSTIN TX		78759	
Phone (512) 756-6782	Fax (512) 327-5355	PHONE: (512) 327-2325	FAX: (512) 327-5355		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 12/01/2019			

County	BURNET	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 003763	Owner Information			
BURNET COUNTY COMMUNITY RESIDENCE		D & S RESIDENTIAL SERVICES LP			
1513 BLUEBONNET DR		8911 N CAPITAL OF TX HWY		.BLDG 1 STE 1300	
MARBLE FALLS	TX 78654	AUSTIN TX		78759	
Phone (830) 693-3449	Fax (512) 327-5355	PHONE: (512) 327-2325	FAX: (512) 327-5355		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 8	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 12/01/2019			

County	CALDWELL	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007624	Owner Information			
CENTURY HOUSE		UCG CENTRAL TEXAS HOLDINGS LLC			
1604 CENTURY OAKS		2006 N WHEELER			
LOCKHART	TX 78644	VICTORIA TX		77901	
Phone (512) 398-6721	Fax (214) 723-5331	PHONE: (830) 372-2920	FAX: (214) 723-5331		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 09/01/2019			

County	CALDWELL	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 003949	Owner Information			
LOCKHART COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
1501 SUNRISE TER DR		9901 LINN STATION ROAD			
LOCKHART	TX 78644	LOUISVILLE KY		40223-3808	
Phone (512) 376-6550	Fax (512) 302-3978	PHONE: (502) 394-2100	FAX: (502) 394-2285		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 01/01/2019			

County	CALHOUN	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 003955	Owner Information			
CALHOUN HOME		UCG CENTRAL TEXAS HOLDINGS LLC			
102 BURNET RD		2006 N WHEELER			
PORT LAVACA	TX 77979	VICTORIA TX 77901			
Phone (512) 552-4316	Fax	PHONE: (830) 372-2920 FAX: (214) 723-5331			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 03/01/2018			

County	CAMERON	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 003744	Owner Information			
CARING PALMS HEALTH CARE CENTER		CARING PALMS HEALTH CARE CENTER INC			
1415 W WASHINGTON ST		1415 W. WASHINGTON STREET			
BROWNSVILLE	TX 78520	BROWNSVILLE TX 78520			
Phone (956) 546-3714	Fax	PHONE: (817) 992-2028 FAX:			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 72			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 04/01/2020			

County	CAMERON	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 007559	Owner Information			
CASA LINDA GROUP HOME		VALLEY RESIDENTIAL CORPORATION			
8 CASA LINDA		8 CASA LINDA			
BROWNSVILLE	TX 78521	BROWNSVILLE TX 78521			
Phone (956) 546-4668	Fax (956) 546-1636	PHONE: (956) 546-4668 FAX: (956) 546-1636			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 09/22/2019			

County	CAMERON	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 007244	Owner Information			
ADRIAN COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
2214 ADRIAN ST		9901 LINN STATION ROAD			
HARLINGEN	TX 78550-7411	LOUISVILLE KY 40223-3808			
Phone (956) 428-3874	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2285			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 01/01/2019			

County	CAMERON	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 003954	Owner Information			
DOMINION COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
133 W DOMINION		9901 LINN STATION ROAD			
HARLINGEN	TX 78550-3825	LOUISVILLE KY 40223-3808			
Phone (956) 421-4035	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2285			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 01/01/2019			

County	CAMERON	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 003983	Owner Information			
EAST WASHINGTON COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
1907 E WASHINGTON AVE		9901 LINN STATION ROAD			
HARLINGEN	TX 78550-5744	LOUISVILLE KY 40223-3808			
Phone (956) 423-1942	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2285			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 01/01/2019			

County	CAMERON	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 007236			Owner Information	
MARIPOSA COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
2505 MARIPOSA				9901 LINN STATION ROAD	
HARLINGEN	TX 78550-7853			LOUISVILLE	KY 40223-3808
Phone (956) 428-1666	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 01/01/2019	

County	CAMERON	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 007112			Owner Information	
RIO GRANDE STATE CENTER				DADS	
1401 S RANGERVILLE RD				PO BOX 12668	
HARLINGEN	TX 78550			AUSTIN	TX 78711
Phone (956) 364-8000	Fax (956) 364-8487			PHONE: (512) 454-3761	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 110			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE STATE SCHOOL/STATE CENTER
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt:	

County	CAMERON	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 003979			Owner Information	
SAM HOUSTON COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
580 N SAM HOUSTON BLVD				9901 LINN STATION ROAD	
SAN BENITO	TX 78586-4669			LOUISVILLE	KY 40223-3808
Phone (956) 399-1020	Fax (512) 328-8211			PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 01/01/2019	

County	CASS	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 003699			Owner Information	
EVERGREEN CHOCTAW COMMUNITY HOME				EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC	
1313 CHOCTAW				10810 SANDEN DR	
ATLANTA	TX 75551			DALLAS	TX 75238
Phone (903) 796-9619	Fax (903) 792-1861			PHONE: (972) 386-4834	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 09/18/2019	

County	CASS	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 007432			Owner Information	
EVERGREEN CLEARVIEW COMMUNITY HOME				EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC	
101 CLEARVIEW				10810 SANDEN DR	
ATLANTA	TX 75551			DALLAS	TX 75238
Phone (903) 796-5552	Fax (903) 792-1861			PHONE: (972) 386-4834	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 07/09/2020	

County	CHEROKEE	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 010279			Owner Information	
ATCHISON GROUP HOME				BLUEBONNET HOMES INC	
RR 2 BOX 796 514 CR 4204				128 S MAGDALEN	
JACKSONVILLE	TX 75766			SAN ANGELO	TX 76903
Phone (903) 586-3419	Fax			PHONE: (325) 658-6664	FAX: (325) 659-3769
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 11/01/2018	

County	CHEROKEE	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 010278			Owner Information	
DOGWOOD GROUP HOME				BLUEBONNET HOMES INC	
432 DOGWOOD ST				128 S MAGDALEN	
JACKSONVILLE	TX 75766			SAN ANGELO TX	76903
Phone (903) 586-8556	Fax			PHONE: (325) 658-6664	FAX: (325) 659-3769
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt:	11/01/2018

County	CHEROKEE	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 010355			Owner Information	
SAN ANTONIO GROUP HOME				BLUEBONNET HOMES INC	
602 DALLAS STREET				128 S MAGDALEN	
JACKSONVILLE	TX 75766			SAN ANGELO TX	76903
Phone (903) 541-4919	Fax (903) 586-9120			PHONE: (325) 658-6664	FAX: (325) 659-3769
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt:	11/01/2018

County	CHEROKEE	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 007648			Owner Information	
FOREST HILLS GROUP HOME				ANDERSON CHEROKEE COMMUNITY ENRICHMENT SERVICES	
803 SHARON ST				913 N JACKSON	
RUSK	TX 75785			JACKSONVILLE TX	75766
Phone (903) 683-6151	Fax			PHONE: (903) 586-5507	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
				License Exp Dt:	

County	CHEROKEE	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 007649			Owner Information	
PECAN GROVE HOME				ANDERSON CHEROKEE COMMUNITY ENRICHMENT SERVICES	
619 E FOURTH ST				913 N JACKSON	
RUSK	TX 75785			JACKSONVILLE TX	75766
Phone (903) 683-6547	Fax			PHONE: (903) 586-5507	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
				License Exp Dt:	

County	COLLIN	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007421			Owner Information	
CHERRYWOOD COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
2900 PORT O CALL				9901 LINN STATION ROAD	
PLANO	TX 75075			LOUISVILLE KY	40223-3808
Phone (972) 867-4159	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt:	12/05/2019

County	COLLIN	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007306			Owner Information	
COLLIN COUNTY MHMR AT MULLINS				LIFEPATH SYSTEMS	
1313 MULLINS				1111	
PLANO	TX 75025				
Phone (214) 424-4814	Fax				
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
				License Exp Dt:	

County **COLLIN** Reg Svcs: **IID TEAM** Region **03 - ARLINGTON**

Facility Information: **Facility ID:** 007269 **Owner Information**
 CROSS BEND HOUSE LIFEPATH SYSTEMS
 3019 CROSS BEND PLANO TX 75023 1111 TX
Phone (214) 596-8916 **Fax**
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PHONE:** **FAX:**
Cert Alzh Capacity: 0 **TITLE19:** 0 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** GOVERNMENT BASED
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:**

County **COLLIN** Reg Svcs: **IID TEAM** Region **03 - ARLINGTON**

Facility Information: **Facility ID:** 007493 **Owner Information**
 LONGHORN COMMUNITY HOME EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP
 957 LONGHORN DR 9901 LINN STATION ROAD
 PLANO TX 75023 LOUISVILLE KY 40223-3808
Phone (972) 517-3762 **Fax** **PHONE:** (502) 394-2100 **FAX:** (502) 394-2285
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0 **License Exp Dt:** 01/01/2019
PRIVATE Beds: 0 **TITLE 18/19:** 0

County **COLLIN** Reg Svcs: **IID TEAM** Region **03 - ARLINGTON**

Facility Information: **Facility ID:** 007402 **Owner Information**
 RIVERBEND COMMUNITY HOME EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP
 3700 GRIFBRICK 9901 LINN STATION ROAD
 PLANO TX 75075-1514 LOUISVILLE KY 40223-3808
Phone (972) 612-0394 **Fax** **PHONE:** (502) 394-2100 **FAX:** (502) 394-2285
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0 **License Exp Dt:** 01/01/2019
PRIVATE Beds: 0 **TITLE 18/19:** 0

County **COLORADO** Reg Svcs: **UNIT 21 (ICF/MR)** Region **06 - HOUSTON**

Facility Information: **Facility ID:** 003993 **Owner Information**
 WEIMAR COMMUNITY RESIDENCE KENMAR RESIDENTIAL SERVICES INCORPORATED
 104 WEST SAINT CHARLES 33 CYPRESS BLVD ,SUITE 100
 WEIMAR TX 78962 ROUND ROCK TX 78665
Phone (979) 725-8826 **Fax** **PHONE:** (512) 336-0800 **FAX:** (512) 336-0812
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0 **License Exp Dt:** 03/15/2020
PRIVATE Beds: 0 **TITLE 18/19:** 0

County **COMAL** Reg Svcs: **TEAM ICF-IID** Region **08 - SAN ANTONIO**

Facility Information: **Facility ID:** 003611 **Owner Information**
 BESS HOUSE ANIOL III LLC
 157 BESS 750 RUSK AVE
 NEW BRAUNFELS TX 78130 NEW BRAUNFELS TX 78130
Phone (830) 620-6174 **Fax** (830) 629-2373 **PHONE:** (713) 271-7777 **FAX:**
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0 **License Exp Dt:** 09/01/2019
PRIVATE Beds: 0 **TITLE 18/19:** 0

County **COMAL** Reg Svcs: **TEAM ICF-IID** Region **08 - SAN ANTONIO**

Facility Information: **Facility ID:** 003997 **Owner Information**
 EARL HOUSE ANIOL III LLC
 926 EARL DR 750 RUSK AVE
 NEW BRAUNFELS TX 78130 NEW BRAUNFELS TX 78130
Phone (830) 620-0141 **Fax** (830) 629-2373 **PHONE:** (713) 271-7777 **FAX:**
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0 **License Exp Dt:** 09/01/2019
PRIVATE Beds: 0 **TITLE 18/19:** 0

County	COMAL	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007260			Owner Information	
GRANADA HOUSE				ANIOL III LLC	
457 GRANADA				750 RUSK AVE	
NEW BRAUNFELS	TX 78130			NEW BRAUNFELS	TX 78130
Phone (830) 620-0025	Fax (830) 629-2373			PHONE: (713) 271-7777	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 09/01/2019	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	COMAL	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007233			Owner Information	
MARIGOLD HOUSE				ANIOL III LLC	
1639 MARIGOLD				750 RUSK AVE	
NEW BRAUNFELS	TX 78130			NEW BRAUNFELS	TX 78130
Phone (830) 620-9604	Fax (830) 629-2373			PHONE: (713) 271-7777	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 09/01/2019	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	COMAL	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007232			Owner Information	
RAPIDS HOUSE				ANIOL III LLC	
1220 RAPIDS RD				750 RUSK AVE	
NEW BRAUNFELS	TX 78130			NEW BRAUNFELS	TX 78130
Phone (830) 620-0759	Fax (830) 629-2373			PHONE: (713) 271-7777	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 09/01/2019	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	COMAL	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 003811			Owner Information	
RIVER GARDENS				ANIOL III LLC	
750 RUSK AVE				750 RUSK AVE	
NEW BRAUNFELS	TX 78130			NEW BRAUNFELS	TX 78130
Phone (830) 629-4400	Fax (830) 629-2373			PHONE: (713) 271-7777	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 160		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 09/01/2017	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	COMAL	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007241			Owner Information	
SPRINGHILL HOUSE				ANIOL III LLC	
984 SPRINGHILL DR				750 RUSK AVE	
NEW BRAUNFELS	TX 78130			NEW BRAUNFELS	TX 78130
Phone (830) 629-7545	Fax (830) 629-2373			PHONE: (713) 271-7777	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 09/01/2019	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	COMAL	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 003617			Owner Information	
TIMBERHILL HOUSE				ANIOL III LLC	
1374 TIMBERHILL				750 RUSK AVE	
NEW BRAUNFELS	TX 78130			NEW BRAUNFELS	TX 78130
Phone (830) 629-5336	Fax (830) 629-2373			PHONE: (713) 271-7777	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 09/01/2019	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007641	Owner Information			
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
701 DIRECTORS DRIVE		9901 LINN STATION ROAD			
ALINGTON TX 76011		LOUISVILLE KY 40223			
Phone (972) 445-1856	Fax	PHONE: (502) 394-2100	FAX: (502) 394-2369		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 01/01/2020			

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003902	Owner Information			
MOSAIC		MOSAIC			
2321 GREENMEADOW		2245 MIDWAY ROAD ,STE 300			
CARROLLTON TX 75006		CARROLLTON TX 75006			
Phone (972) 866-9989	Fax (972) 991-0834	PHONE: (972) 866-9989	FAX: (972) 991-0834		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 01/01/2019			

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003968	Owner Information			
MOSAIC		MOSAIC			
2100 CEDAR CIR		2245 MIDWAY ROAD ,STE 300			
CARROLLTON TX 75006		CARROLLTON TX 75006			
Phone (972) 418-9989	Fax (972) 991-0834	PHONE: (972) 866-9989	FAX: (972) 991-0834		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 01/01/2019			

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003950	Owner Information			
MOSAIC		MOSAIC			
1515 NORTHLAND		2245 MIDWAY ROAD ,STE 300			
CARROLLTON TX 75006		CARROLLTON TX 75006			
Phone (972) 866-9989	Fax (972) 991-0834	PHONE: (972) 866-9989	FAX: (972) 991-0834		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 01/01/2019			

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 100368	Owner Information			
14 FERRIS CREEK		AUTISTIC TREATMENT CENTER INC			
9814 FERRIS CREEK		10503 METRIC DR			
DALLAS TX 75243		DALLAS TX 75243			
Phone (972) 644-7521	Fax (972) 644-5650	PHONE: (972) 644-2076	FAX: (972) 644-5650		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 05/07/2019			

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 100939	Owner Information			
23 FERRIS CREEK		AUTISTIC TREATMENT CENTER INC			
12323 FERRIS CREEK		10503 METRIC DR			
DALLAS TX 75243		DALLAS TX 75243			
Phone (972) 644-2079	Fax (972) 644-5650	PHONE: (972) 644-2076	FAX: (972) 644-5650		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 07/01/2020			

County **DALLAS** Reg Svcs: **IID TEAM** Region **03 - ARLINGTON**

Facility Information: Facility ID: 010175
 27 FERRIS CREEK
 12327 FERRIS CREEK
 DALLAS TX 75243

Phone (972) 644-1064 **Fax** (972) 644-5650

TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
 AUTISTIC TREATMENT CENTER INC
 10503 METRIC DR
 DALLAS TX 75243
PHONE: (972) 644-2076 **FAX:** (972) 644-5650
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 07/23/2019

County **DALLAS** Reg Svcs: **IID TEAM** Region **03 - ARLINGTON**

Facility Information: Facility ID: 100362
 ABILITY CONNECTION TEXAS JUBILEE HOUSE
 3108 JUBILEE TR
 DALLAS TX 75229

Phone (214) 350-0282 **Fax** (214) 247-4505

TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
 ABILITY CONNECTION TEXAS
 8802 HARRY HINES BLVD
 DALLAS TX 75235-1716
PHONE: (214) 351-2500 **FAX:** (972) 476-1256
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 12/01/2018

County **DALLAS** Reg Svcs: **IID TEAM** Region **03 - ARLINGTON**

Facility Information: Facility ID: 007321
 BRADDOCK HOUSE
 6520 BRADDOCK PL
 DALLAS TX 75232

Phone (214) 339-1914 **Fax** (903) 454-3363

TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
 COMMUNITY ACCESS INC
 2040 SHILOH RD
 TYLER TX 75703
PHONE: (903) 579-8527 **FAX:** (903) 526-0881
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 06/01/2019

County **DALLAS** Reg Svcs: **IID TEAM** Region **03 - ARLINGTON**

Facility Information: Facility ID: 003756
 EDUCARE COMMUNITY LIVING CORPORATION - TEXAS
 5922 LEWISBURG
 DALLAS TX 75237

Phone (972) 283-9057 **Fax** (972) 929-1145

TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
 EDUCARE COMMUNITY LIVING CORPORATION - TEXAS
 9901 LINN STATION ROAD
 LOUISVILLE KY 40223
PHONE: (502) 394-2100 **FAX:** (502) 394-2369
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 04/01/2020

County **DALLAS** Reg Svcs: **IID TEAM** Region **03 - ARLINGTON**

Facility Information: Facility ID: 007374
 EDUCARE COMMUNITY LIVING CORPORATION - TEXAS
 3111 LEHARVE
 DALLAS TX 75211

Phone (214) 467-9462 **Fax** (214) 333-2010

TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
 EDUCARE COMMUNITY LIVING CORPORATION - TEXAS
 9901 LINN STATION ROAD
 LOUISVILLE KY 40223
PHONE: (502) 394-2100 **FAX:** (502) 394-2369
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 05/01/2020

County **DALLAS** Reg Svcs: **IID TEAM** Region **03 - ARLINGTON**

Facility Information: Facility ID: 003796
 EDUCARE COMMUNITY LIVING CORPORATION - TEXAS
 14163 HAYMEADOW DR
 DALLAS TX 75240

Phone (972) 386-0402 **Fax** (972) 239-7420

TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
 EDUCARE COMMUNITY LIVING CORPORATION - TEXAS
 9901 LINN STATION ROAD
 LOUISVILLE KY 40223
PHONE: (502) 394-2100 **FAX:** (502) 394-2369
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 04/01/2018

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003835			Owner Information	
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
14255 HAYMEADOW DRIVE				9901 LINN STATION ROAD	
DALLAS	TX 75240			LOUISVILLE	KY 40223
Phone (972) 239-6643		Fax (972) 239-7421		PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 04/01/2018	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003783			Owner Information	
HENRY HOUSE				MONARCH HOLDING INC	
7153 PINEBERRY				812 LIVE OAK	
DALLAS	TX 75249			DE SOTO	TX 75115
Phone (972) 780-9388		Fax (972) 224-0904		PHONE: (972) 224-8530	FAX: (972) 224-0904
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 8		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 09/01/2019	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 104764			Owner Information	
ST NICHOLAS OPERATIONS LLC				ST NICHOLAS OPERATIONS LLC	
4612 HEATHERBROOK DR				4612 HEATHERBROOK DR	
DALLAS	TX 75244			DALLAS	TX 75244
Phone (792) 239-0121		Fax (214) 723-5331		PHONE: (972) 233-4366	FAX: (214) 922-4144
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 02/22/2018	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 104131			Owner Information	
DEVONSHIRE HOME				DAYBREAK INC	
1225 DEVONSHIRE				920 PRAIRIE CREEK DR	
DESOTO	TX 75115			DESOTO	TX 75115
Phone (972) 230-2445		Fax (817) 447-3323		PHONE: (972) 223-6259	FAX: (972) 224-0904
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 09/01/2019	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007252			Owner Information	
LIVE OAK				MONARCH HOLDING INC	
812 LIVE OAK				812 LIVE OAK	
DESOTO	TX 75115			DE SOTO	TX 75115
Phone (972) 224-8530		Fax (972) 224-0904		PHONE: (972) 224-8530	FAX: (972) 224-0904
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 09/01/2019	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 104122			Owner Information	
MEADOW HILL HOME				DAYBREAK INC	
517 MEADOW HILL				920 PRAIRIE CREEK DR	
DESOTO	TX 75115			DESOTO	TX 75115
Phone (817) 477-2700		Fax (972) 224-0904		PHONE: (972) 223-6259	FAX: (972) 224-0904
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 09/01/2019	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007651			Owner Information	
PRAIRIE CREEK				DAYBREAK INC	
920 PRAIRIE CREEK DR				920 PRAIRIE CREEK DR	
DESOTO	TX 75115			DESOTO	TX 75115
Phone (972) 223-1463	Fax (972) 224-0904			PHONE: (972) 223-6259	FAX: (972) 224-0904
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 09/01/2019	

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007652			Owner Information	
TATE				DAYBREAK INC	
525 TATE DR				920 PRAIRIE CREEK DR	
DESOTO	TX 75115			DESOTO	TX 75115
Phone (972) 223-6259	Fax (972) 224-0904			PHONE: (972) 223-6259	FAX: (972) 224-0904
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 09/01/2019	

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003890			Owner Information	
VALLEY GLEN				GREENBREAK INC	
219 VALLEY GLEN				234 BARRY LANE	
DESOTO	TX 75115			LANCASTER	TX 75146
Phone (972) 230-4643	Fax (972) 224-0904			PHONE: (972) 230-4643	FAX: (972) 224-0904
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 09/01/2019	

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003846			Owner Information	
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
402 W VINYARD				9901 LINN STATION ROAD	
DUNCANVILLE	TX 75137			LOUISVILLE	KY 40223
Phone (972) 296-7278	Fax (972) 286-9057			PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 04/01/2020	

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007644			Owner Information	
EVERGREEN HIDDEN COURT COMMUNITY HOME				EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC	
5322 HIDDEN CT				10810 SANDEN DR	
GARLAND	TX 75043			DALLAS	TX 75238
Phone (972) 226-8129	Fax (972) 386-9509			PHONE: (972) 386-4834	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 07/01/2018	

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007812			Owner Information	
EVERGREEN LIGHTHOUSE COMMUNITY HOME				EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC	
1205 WENDELL WAY				10810 SANDEN DR	
GARLAND	TX 75043			DALLAS	TX 75238
Phone (972) 303-0198	Fax			PHONE: (972) 386-4834	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 06/11/2019	

County **DALLAS** Reg Svcs: **IID TEAM** Region **03 - ARLINGTON**

Facility Information: Facility ID: 007640
 EVERGREEN PEBBLECREEK COMMUNITY HOME
 530 PEBBLECREEK DR
 GARLAND TX 75041
 Phone (972) 496-9243 Fax (972) 386-9509
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
 EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC
 10810 SANDEN DR
 DALLAS TX 75238
PHONE: (972) 386-4834 **FAX:**
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 07/01/2018

County **DALLAS** Reg Svcs: **IID TEAM** Region **03 - ARLINGTON**

Facility Information: Facility ID: 007813
 EVERGREEN PYRAMID COMMUNITY HOME
 706 PYRAMID
 GARLAND TX 75040
 Phone (972) 495-0077 Fax (972) 386-9509
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
 EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC
 10810 SANDEN DR
 DALLAS TX 75238
PHONE: (972) 386-4834 **FAX:**
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 08/05/2018

County **DALLAS** Reg Svcs: **IID TEAM** Region **03 - ARLINGTON**

Facility Information: Facility ID: 007621
 KNOLL POINT PLACE, LLC
 3446 KNOLL POINT DR
 GARLAND TX 75043
 Phone (972) 226-2620 Fax (972) 226-2620
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
 KNOLL POINT PLACE, LLC
 3446 KNOLL POINT DR
 GARLAND TX 75043
PHONE: (214) 384-9775 **FAX:** (972) 226-2620
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 08/01/2020

County **DALLAS** Reg Svcs: **IID TEAM** Region **03 - ARLINGTON**

Facility Information: Facility ID: 007404
 TRINITY MANOR
 2813 COUNTRY VALLEY RD
 GARLAND TX 75043
 Phone (972) 202-9700 Fax (469) 298-3736
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
 TRINITY ICF MR INC
 2813 COUNTRY VALLEY RD
 GARLAND TX 75043
PHONE: (972) 412-4990 **FAX:** (972) 412-4402
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 02/28/2019

County **DALLAS** Reg Svcs: **IID TEAM** Region **03 - ARLINGTON**

Facility Information: Facility ID: 007333
 1102 FORT SCOTT TRAIL
 1102 FORT SCOTT TRAIL
 GRAND PRAIRIE TX 75052
 Phone (972) 988-1217 Fax (972) 606-4792
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
 CALAB INC
 3803 S ROBINSON RD
 GRAND PRAIRIE TX 75052-1239
PHONE: (972) 263-2112 **FAX:** (972) 263-2115
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 09/01/2019

County **DALLAS** Reg Svcs: **IID TEAM** Region **03 - ARLINGTON**

Facility Information: Facility ID: 007266
 3502 GLENDA
 3502 GLENDA
 GRAND PRAIRIE TX 75051
 Phone (972) 263-6621 Fax (972) 606-4792
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
 CALAB INC
 3803 S ROBINSON RD
 GRAND PRAIRIE TX 75052-1239
PHONE: (972) 263-2112 **FAX:** (972) 263-2115
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 09/01/2019

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007531			Owner Information	
AMICUS AT WOODSIDE				AMICUS, INC	
2213 WOODSIDE DR				1129 N LITTLE SCHOOL RD	
GRAND PRAIRIE	TX 75051			ARLINGTON TX	76017-1900
Phone (972) 988-9336	Fax (817) 563-7906			PHONE: (817) 563-7900	FAX: (817) 563-7906
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/01/2020	

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007615			Owner Information	
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
4925 EMBERS TRAIL				9901 LINN STATION ROAD	
GRAND PRAIRIE	TX 75052			LOUISVILLE KY	40223
Phone (972) 647-0517	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/01/2020	

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007642			Owner Information	
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
1829 ANNA DR				9901 LINN STATION ROAD	
IRVING	TX 75061			LOUISVILLE KY	40223
Phone (972) 445-2250	Fax (972) 445-1695			PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/01/2020	

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003736			Owner Information	
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
2616 ALAN A DALE				9901 LINN STATION ROAD	
IRVING	TX 75061			LOUISVILLE KY	40223
Phone (972) 600-9535	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 04/01/2020	

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007810			Owner Information	
FULTON COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
2501 CRESTVIEW				9901 LINN STATION ROAD	
IRVING	TX 75062			LOUISVILLE KY	40223-3808
Phone (972) 252-1087	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 10/13/2019	

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007497			Owner Information	
MAYKUS COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
600 MAYKUS CT				9901 LINN STATION ROAD	
IRVING	TX 75061			LOUISVILLE KY	40223-3808
Phone (972) 251-4252	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/01/2019	

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007503			Owner Information	
RINDIE COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
1701 RINDIE ST				9901 LINN STATION ROAD	
IRVING	TX 75060-5925			LOUISVILLE	KY 40223-3808
Phone (972) 254-1332	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/01/2019	

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003947			Owner Information	
BARRY LANE				GREENBREAK INC	
234 BARRY LANE				234 BARRY LANE	
LANCASTER	TX 75146			LANCASTER	TX 75146
Phone (972) 227-5900	Fax (214) 224-0904			PHONE: (972) 230-4643	FAX: (972) 224-0904
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 09/01/2019	

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003666			Owner Information	
WILLOWOOD				MONARCH HOLDING INC	
731 WILLOWOOD				812 LIVE OAK	
LANCASTER	TX 75146			DE SOTO	TX 75115
Phone (972) 227-5123	Fax (972) 224-0904			PHONE: (972) 224-8530	FAX: (972) 224-0904
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 09/01/2019	

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003620			Owner Information	
EASTBROOK HOUSE				CALAB INC	
3313 EASTBROOK DR				3803 S ROBINSON RD	
MESQUITE	TX 75150			GRAND PRAIRIE	TX 75052-1239
Phone (972) 686-9478	Fax (972) 606-4792			PHONE: (972) 263-2112	FAX: (972) 263-2115
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 09/01/2018	

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007645			Owner Information	
EVERGREEN ISLANDVIEW COMMUNITY HOME				EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC	
1901 ISLAND VIEW				10810 SANDEN DR	
MESQUITE	TX 75149			DALLAS	TX 75238
Phone (972) 285-1061	Fax (972) 386-9509			PHONE: (972) 386-4834	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 07/01/2018	

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007647			Owner Information	
EVERGREEN VALLEY CREEK COMMUNITY HOME				EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC	
907 VALLEYCREEK DR				10810 SANDEN DR	
MESQUITE	TX 75181-2355			DALLAS	TX 75238
Phone (972) 222-6622	Fax (972) 386-9509			PHONE: (972) 386-4834	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 07/01/2020	

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003987			Owner Information	
HARMAN HOUSE				CALAB INC	
4237 ASHWOOD DR				3803 S ROBINSON RD	
MESQUITE	TX 75150			GRAND PRAIRIE TX	75052-1239
Phone (972) 613-7635		Fax (972) 606-4792		PHONE: (972) 263-2112	FAX: (972) 263-2115
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 09/01/2018	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007800			Owner Information	
ABILITY CONNECTION TEXAS ABILITY HOUSE				ABILITY CONNECTION TEXAS	
615-617 WOODHAVEN PL.				8802 HARRY HINES BLVD	
RICHARDSON	TX 75080			DALLAS TX	75235-1716
Phone (214) 351-2500		Fax (972) 476-1256		PHONE: (214) 351-2500	FAX: (972) 476-1256
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 04/30/2020	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003994			Owner Information	
ABILITY CONNECTION TEXAS WENTWORTH HOUSE				ABILITY CONNECTION TEXAS	
642 WENTWORTH DR				8802 HARRY HINES BLVD	
RICHARDSON	TX 75081-5622			DALLAS TX	75235-1716
Phone (214) 247-4505		Fax (214) 755-1735		PHONE: (214) 351-2500	FAX: (972) 476-1256
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 03/29/2018	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007280			Owner Information	
MOSAIC				MOSAIC	
1509 VERSAILLES				2245 MIDWAY ROAD	,STE 300
RICHARDSON	TX 75081			CARROLLTON TX	75006
Phone (972) 866-9989		Fax (972) 991-0834		PHONE: (972) 866-9989	FAX: (972) 991-0834
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 01/01/2019	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003901			Owner Information	
MOSAIC				MOSAIC	
1809 AUBURN				2245 MIDWAY ROAD	,STE 300
RICHARDSON	TX 75081			CARROLLTON TX	75006
Phone (972) 866-9989		Fax (972) 991-0834		PHONE: (972) 866-9989	FAX: (972) 991-0834
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 01/01/2019	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	DENTON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007667			Owner Information	
BELL COMMUNITY RESIDENCE				KENMAR RESIDENTIAL SERVICES INCORPORATED	
2402 BERNARD				33 CYPRESS BLVD	,SUITE 100
DENTON	TX 76205			ROUND ROCK TX	78665
Phone (940) 387-1314		Fax (940) 566-2371		PHONE: (512) 336-0800	FAX: (512) 336-0812
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 03/15/2020	
PRIVATE Beds: 0	TITLE 18/19: 0				

County **DENTON** Reg Svcs: **IID TEAM** Region **03 - ARLINGTON**
Facility Information: **Facility ID:** 003922 **Owner Information**
 CANDLEBERRY EDUCARE COMMUNITY LIVING CORPORATION - TEXAS
 2721 THUNDERBIRD ST 9901 LINN STATION ROAD
 DENTON TX 76201 LOUISVILLE KY 40223
Phone (940) 566-1079 **Fax** (940) 382-9521 **PHONE:** (502) 394-2100 **FAX:** (502) 394-2369
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE:** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 10/01/2019

County **DENTON** Reg Svcs: **IID TEAM** Region **03 - ARLINGTON**
Facility Information: **Facility ID:** 007668 **Owner Information**
 CARTER COMMUNITY RESIDENCE KENMAR RESIDENTIAL SERVICES INCORPORATED
 3805 CAMELOT 33 CYPRESS BLVD ,SUITE 100
 DENTON TX 76205 ROUND ROCK TX 78665
Phone (940) 382-4216 **Fax** **PHONE:** (512) 336-0800 **FAX:** (512) 336-0812
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE:** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 03/15/2020

County **DENTON** Reg Svcs: **IID TEAM** Region **03 - ARLINGTON**
Facility Information: **Facility ID:** 007670 **Owner Information**
 DAVIS COMMUNITY RESIDENCE KENMAR RESIDENTIAL SERVICES INCORPORATED
 1426 RUDDLELL 33 CYPRESS BLVD ,SUITE 100
 DENTON TX 76201 ROUND ROCK TX 78665
Phone (940) 566-8631 **Fax** **PHONE:** (512) 336-0800 **FAX:** (512) 336-0812
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE:** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 03/15/2020

County **DENTON** Reg Svcs: **IID TEAM** Region **03 - ARLINGTON**
Facility Information: **Facility ID:** 007102 **Owner Information**
 DENTON STATE SUPPORTED LIVING CENTER DADS
 3980 STATE SCHOOL RD PO BOX 12668
 DENTON TX 76210 AUSTIN TX 78711
Phone (940) 891-0342 **Fax** (940) 591-3300 **PHONE:** (512) 454-3761 **FAX:**
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 716 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE:** STATE SCHOOL/STATE CENTER
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:**

County **DENTON** Reg Svcs: **IID TEAM** Region **03 - ARLINGTON**
Facility Information: **Facility ID:** 007206 **Owner Information**
 EDUCARE COMMUNITY LIVING CORPORATION - TEXAS EDUCARE COMMUNITY LIVING CORPORATION - TEXAS
 7501 RIVERCHASE TRL 9901 LINN STATION ROAD
 DENTON TX 76210 LOUISVILLE KY 40223
Phone (940) 382-7900 **Fax** **PHONE:** (502) 394-2100 **FAX:** (502) 394-2369
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE:** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 04/01/2018

County **DENTON** Reg Svcs: **IID TEAM** Region **03 - ARLINGTON**
Facility Information: **Facility ID:** 007247 **Owner Information**
 EDUCARE COMMUNITY LIVING CORPORATION-TEXAS EDUCARE COMMUNITY LIVING CORPORATION - TEXAS
 3612 BIG HORN TRL 9901 LINN STATION ROAD
 DENTON TX 76210 LOUISVILLE KY 40223
Phone (940) 383-1520 **Fax** **PHONE:** (502) 394-2100 **FAX:** (502) 394-2369
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE:** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 03/18/2020

County	DENTON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007669			Owner Information	
NEWTON COMMUNITY RESIDENCE				KENMAR RESIDENTIAL SERVICES INCORPORATED	
3112 CEDAR HILL				33 CYPRESS BLVD	,SUITE 100
DENTON	TX 76205			ROUND ROCK	TX 78665
Phone (940) 566-6746	Fax			PHONE: (512) 336-0800	FAX: (512) 336-0812
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 03/15/2020	

County	DENTON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007671			Owner Information	
OAKBEND COMMUNITY RESIDENCE				KENMAR RESIDENTIAL SERVICES INCORPORATED	
1430 N RUDELL				33 CYPRESS BLVD	,SUITE 100
DENTON	TX 76201			ROUND ROCK	TX 78665
Phone (940) 387-0831	Fax			PHONE: (512) 336-0800	FAX: (512) 336-0812
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 03/15/2020	

County	DENTON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007442			Owner Information	
OAKRIDGE GROUP HOME				INNOVATIVE OUTCOMES INC	
2421 OAKRIDGE				2100 PARKSIDE DR	
DENTON	TX 76201			DENTON	TX 76201
Phone (940) 387-9710	Fax (940) 387-7508			PHONE: (940) 383-8367	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/01/2019	

County	DENTON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003805			Owner Information	
SANDY OAKS I				INNOVATIVE OUTCOMES INC	
1475 S TRINITY RD				2100 PARKSIDE DR	
DENTON	TX 76208			DENTON	TX 76201
Phone (940) 383-1907	Fax (940) 381-0854			PHONE: (940) 383-8367	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/01/2019	

County	DENTON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003837			Owner Information	
SANDY OAKS II				INNOVATIVE OUTCOMES INC	
1475 S TRINITY RD				2100 PARKSIDE DR	
DENTON	TX 76208			DENTON	TX 76201
Phone (940) 387-1508	Fax (940) 381-0854			PHONE: (940) 383-8367	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/03/2019	

County	DENTON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007489			Owner Information	
COUNTRY HOME				WANDA D DENT	
901 CROSS TIMBERS DR				901 CROSS TIMBERS DR	
DOUBLE OAK	TX 75077			DOUBLE OAK	TX 75077
Phone (972) 539-2557	Fax (877) 203-9287			PHONE: (972) 539-2557	FAX: (877) 203-9287
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 12/18/2019	

County	DENTON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003886			Owner Information	
LAUREL HOUSE				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
50 N SHARON DR				9901 LINN STATION ROAD	
KRUM	TX 76249			LOUISVILLE	KY 40223
Phone (817) 482-6400	Fax (940) 382-9521			PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 10/01/2019	

County	DENTON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003894			Owner Information	
PINON HOUSE				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
4520 MILLER ROAD				9901 LINN STATION ROAD	
KRUM	TX 76249-6811			LOUISVILLE	KY 40223
Phone (817) 387-1265	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 10/01/2019	

County	DENTON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003640			Owner Information	
PONDEROSA				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
9554 RECTOR ROAD				9901 LINN STATION ROAD	
SANGER	TX 76266			LOUISVILLE	KY 40223
Phone (940) 458-4684	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/23/2020	

County	EASTLAND	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 003814			Owner Information	
ROCK HOUSE SPRINGS				ROCK HOUSE SUPPORT SERVICES INC	
1105 LAGO VISTA				2252 LINGLEVILLE ROAD HWY 8	
EASTLAND	TX 76448			STEPHENVILLE	TX 76401
Phone (254) 629-8671	Fax (254) 629-8610			PHONE: (254) 968-4004	FAX: (254) 965-8653
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 08/01/2020	

County	EASTLAND	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 007650			Owner Information	
ROCK HOUSE SPRINGS II				ROCK HOUSE SUPPORT SERVICES INC	
401 LENS				2252 LINGLEVILLE ROAD HWY 8	
EASTLAND	TX 76448			STEPHENVILLE	TX 76401
Phone (254) 629-8689	Fax (254) 629-8610			PHONE: (254) 968-4004	FAX: (254) 965-8653
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 08/01/2020	

County	ECTOR	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 003757			Owner Information	
MARIAH FLATS				D & S RESIDENTIAL SERVICES LP	
10036 W WESTLAND DR				8911 N CAPITAL OF TX HWY	.BLDG 1 STE 1300
ODESSA	TX 79764			AUSTIN	TX 78759
Phone (432) 381-0741	Fax (512) 327-5355			PHONE: (512) 327-2325	FAX: (512) 327-5355
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 10			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 12/01/2019	

County	ECTOR	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 003616			Owner Information	
MORRIS HOUSE				PERMIAN BASIN MHMR	
5256 MORRIS ST				401 E ILLINOIS AVE	,STE 401
ODESSA	TX 79764			MIDLAND	TX 79701
Phone (432) 530-2267	Fax			PHONE: (432) 570-3385	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
				License Exp Dt:	

County	ECTOR	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 007238			Owner Information	
PARKER HOUSE				ROCK HOUSE SUPPORT SERVICES INC	
1510 PARKER DR				2252 LINGLEVILLE ROAD HWY 8	
ODESSA	TX 79761			STEPHENVILLE	TX 76401
Phone (432) 362-3072	Fax (432) 682-6167			PHONE: (254) 968-4004	FAX: (254) 965-8653
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt:	10/01/2018

County	EL PASO	Reg Svcs:	ICF/IID	Region	10 - EL PASO
Facility Information:	Facility ID: 003834			Owner Information	
CASA DE LA PROMESA				EL PASO COMMUNITY MHMR CENTER	
5310 BLANCO ST				PO BOX 9997	
EL PASO	TX 79990			EL PASO	TX 79990
Phone (915) 778-0879	Fax			PHONE:	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 8			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
				License Exp Dt:	

County	EL PASO	Reg Svcs:	ICF/IID	Region	10 - EL PASO
Facility Information:	Facility ID: 003918			Owner Information	
CASA NORTON				EL PASO COMMUNITY MHMR CENTER	
8824 NORTON				PO BOX 9997	
EL PASO	TX 79904			EL PASO	TX 79990
Phone (915) 759-2867	Fax			PHONE:	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
				License Exp Dt:	

County	EL PASO	Reg Svcs:	ICF/IID	Region	10 - EL PASO
Facility Information:	Facility ID: 007116			Owner Information	
EL PASO STATE SUPPORTED LIVING CENTER				DADS	
6700 DELTA DRIVE				PO BOX 12668	
EL PASO	TX 79905			AUSTIN	TX 78711
Phone (915) 782-6300	Fax (915) 782-6336			PHONE: (512) 454-3761	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 155			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE STATE SCHOOL/STATE CENTER
				License Exp Dt:	

County	EL PASO	Reg Svcs:	ICF/IID	Region	10 - EL PASO
Facility Information:	Facility ID: 003873			Owner Information	
NEW HOPE COMMUNITY LIVING III				DECEMBER NINE COMPANY LTD	
3204 DUNDEE ST				20 FOUNDERS BLVD	
EL PASO	TX 79925			EL PASO	TX 79906
Phone (915) 591-3779	Fax (915) 843-7784			PHONE: (915) 843-7773	FAX: (915) 843-7784
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt:	03/01/2020

County	EL PASO	Reg Svcs:	ICF/IID	Region	10 - EL PASO
Facility Information:	Facility ID: 003876			Owner Information	
NEW HOPE COMMUNITY LIVING IV				DECEMBER NINE COMPANY LTD	
11608 BLUEBONNET CT				20 FOUNDERS BLVD	
EL PASO TX 79936				EL PASO TX 79906	
Phone (915) 581-3515	Fax (915) 843-7784			PHONE: (915) 843-7773	FAX: (915) 843-7784
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE PRIVATELY OWNED			
				License Exp Dt: 09/29/2019	

County	EL PASO	Reg Svcs:	ICF/IID	Region	10 - EL PASO
Facility Information:	Facility ID: 007299			Owner Information	
NEW HOPE COMMUNITY LIVING IX				DECEMBER NINE COMPANY LTD	
4740 ROUND ROCK				20 FOUNDERS BLVD	
EL PASO TX 79924				EL PASO TX 79906	
Phone (915) 843-7773	Fax (915) 843-7784			PHONE: (915) 843-7773	FAX: (915) 843-7784
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE PRIVATELY OWNED			
				License Exp Dt: 02/24/2019	

County	EL PASO	Reg Svcs:	ICF/IID	Region	10 - EL PASO
Facility Information:	Facility ID: 003877			Owner Information	
NEW HOPE COMMUNITY LIVING V				DECEMBER NINE COMPANY LTD	
7721 INCA AVE				20 FOUNDERS BLVD	
EL PASO TX 79912				EL PASO TX 79906	
Phone (915) 833-3479	Fax (915) 843-7784			PHONE: (915) 843-7773	FAX: (915) 843-7784
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE PRIVATELY OWNED			
				License Exp Dt: 03/01/2020	

County	EL PASO	Reg Svcs:	ICF/IID	Region	10 - EL PASO
Facility Information:	Facility ID: 003932			Owner Information	
NEW HOPE COMMUNITY LIVING VI				DECEMBER NINE COMPANY LTD	
10520 SPRINGWOOD				20 FOUNDERS BLVD	
EL PASO TX 79936				EL PASO TX 79906	
Phone (915) 843-7773	Fax (915) 843-7784			PHONE: (915) 843-7773	FAX: (915) 843-7784
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE PRIVATELY OWNED			
				License Exp Dt: 09/25/2019	

County	EL PASO	Reg Svcs:	ICF/IID	Region	10 - EL PASO
Facility Information:	Facility ID: 003958			Owner Information	
NEW HOPE COMMUNITY LIVING VII				DECEMBER NINE COMPANY LTD	
4216 LA ADELITA DR				20 FOUNDERS BLVD	
EL PASO TX 79922				EL PASO TX 79906	
Phone (915) 584-8919	Fax (915) 544-7773			PHONE: (915) 843-7773	FAX: (915) 843-7784
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE PRIVATELY OWNED			
				License Exp Dt: 03/01/2020	

County	EL PASO	Reg Svcs:	ICF/IID	Region	10 - EL PASO
Facility Information:	Facility ID: 003614			Owner Information	
NEW HOPE COMMUNITY LIVING VIII				DECEMBER NINE COMPANY LTD	
7850 PECAN COURT				20 FOUNDERS BLVD	
EL PASO TX 79915				EL PASO TX 79906	
Phone (915) 772-1052	Fax (915) 843-7784			PHONE: (915) 843-7773	FAX: (915) 843-7784
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE PRIVATELY OWNED			
				License Exp Dt: 03/01/2020	

County	EL PASO	Reg Svcs:	ICF/IID	Region	10 - EL PASO
Facility Information:	Facility ID: 003726	Owner Information			
SU CASA		EL PASO COMMUNITY MHMR CENTER			
5314 BLANCO		PO BOX 9997			
EL PASO	TX 79905	EL PASO TX 79990			
Phone (915) 778-0935	Fax	PHONE:			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	FAX:		
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE: GOVERNMENT BASED			
		License Exp Dt:			

County	ELLIS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007588	Owner Information			
BRANDON WAY HOUSE		CEN-TEX ASSOCIATION FOR RETARDED CHILDREN			
209 BRANDON WAY		PO DRAWER 750			
RED OAK	TX 75154	MEXIA TX 76667			
Phone (972) 617-1219	Fax (972) 923-1472	PHONE: (254) 562-2891			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	FAX: (254) 562-7656		
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE: PRIVATELY OWNED			
		License Exp Dt: 02/09/2020			

County	ELLIS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007514	Owner Information			
AUBURN HOUSE		CEN-TEX ASSOCIATION FOR RETARDED CHILDREN			
115 AUBURN ST		PO DRAWER 750			
WAXAHACHIE	TX 75165	MEXIA TX 76667			
Phone (972) 937-5190	Fax (972) 937-5190	PHONE: (254) 562-2891			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	FAX: (254) 562-7656		
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE: PRIVATELY OWNED			
		License Exp Dt: 09/17/2018			

County	ELLIS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007532	Owner Information			
BRYN MAWR HOUSE		CEN-TEX ASSOCIATION FOR RETARDED CHILDREN			
109 BRYN MAWR		PO DRAWER 750			
WAXAHACHIE	TX 75165	MEXIA TX 76667			
Phone (972) 923-0748	Fax (972) 923-1472	PHONE: (254) 562-2891			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	FAX: (254) 562-7656		
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE: PRIVATELY OWNED			
		License Exp Dt: 05/18/2020			

County	ELLIS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007592	Owner Information			
ROCK SPRINGS HOUSE		CEN-TEX ASSOCIATION FOR RETARDED CHILDREN			
206 ROCK SPRINGS		PO DRAWER 750			
WAXAHACHIE	TX 75165	MEXIA TX 76667			
Phone (972) 937-9486	Fax (972) 923-1472	PHONE: (254) 562-2891			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	FAX: (254) 562-7656		
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE: PRIVATELY OWNED			
		License Exp Dt: 03/10/2020			

County	ERATH	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007373	Owner Information			
EAST ROCK		ROCK HOUSE SUPPORT SERVICES INC			
1485 BLACKJACK		2252 LINGLEVILLE ROAD HWY 8			
STEPHENVILLE	TX 76401	STEPHENVILLE TX 76401			
Phone (254) 968-6119	Fax (254) 968-6033	PHONE: (254) 968-4004			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	FAX: (254) 965-8653		
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE: PRIVATELY OWNED			
		License Exp Dt: 11/01/2018			

County	ERATH	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007552	Owner Information			
HARBIN HOUSE		ROCK HOUSE SUPPORT SERVICES INC			
909 HARBIN DR		2252 LINGLEVILLE ROAD HWY 8			
STEPHENVILLE	TX 76401	STEPHENVILLE TX 76401			
Phone (254) 965-7016	Fax (254) 968-6033	PHONE: (254) 968-4004	FAX: (254) 965-8653		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED		
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 11/01/2018			

County	ERATH	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003788	Owner Information			
NORTH ROCK 1		ROCK HOUSE SUPPORT SERVICES INC			
2250 LINGLEVILLE RD		2252 LINGLEVILLE ROAD HWY 8			
STEPHENVILLE	TX 76401	STEPHENVILLE TX 76401			
Phone (254) 965-6936	Fax (254) 968-6033	PHONE: (254) 968-4004	FAX: (254) 965-8653		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED		
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 11/01/2018			

County	ERATH	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003824	Owner Information			
NORTH ROCK 2		ROCK HOUSE SUPPORT SERVICES INC			
2248 LINGLEVILLE ROAD		2252 LINGLEVILLE ROAD HWY 8			
STEPHENVILLE	TX 76401	STEPHENVILLE TX 76401			
Phone (254) 965-6922	Fax (254) 968-6033	PHONE: (254) 968-4004	FAX: (254) 965-8653		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED		
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 11/01/2018			

County	ERATH	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003761	Owner Information			
ROCK HOUSE		ROCK HOUSE SUPPORT SERVICES INC			
2254 LINGLEVILLE RD		2252 LINGLEVILLE ROAD HWY 8			
STEPHENVILLE	TX 76401	STEPHENVILLE TX 76401			
Phone (254) 965-6915	Fax (254) 968-6033	PHONE: (254) 968-4004	FAX: (254) 965-8653		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED		
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 11/01/2018			

County	ERATH	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003766	Owner Information			
ROCK HOUSE 2		ROCK HOUSE SUPPORT SERVICES INC			
2326 DENMAN ST		2252 LINGLEVILLE ROAD HWY 8			
STEPHENVILLE	TX 76401	STEPHENVILLE TX 76401			
Phone (254) 968-6357	Fax (254) 968-6033	PHONE: (254) 968-4004	FAX: (254) 965-8653		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED		
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 11/01/2018			

County	ERATH	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007423	Owner Information			
WARM SPRINGS		ROCK HOUSE SUPPORT SERVICES INC			
788 N NEBLETT		2252 LINGLEVILLE ROAD HWY 8			
STEPHENVILLE	TX 76401	STEPHENVILLE TX 76401			
Phone (254) 965-2659	Fax (254) 968-6033	PHONE: (254) 968-4004	FAX: (254) 965-8653		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED		
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 11/01/2018			

County **FAYETTE** Reg Svcs: ICF-IID (AUSTIN REGION) Region 07 - AUSTIN

Facility Information: Facility ID: 007632 **Owner Information**
 GUY HOUSE JAMES-LEACH INC
 169 GUY STREET 339 W COLORADO
 LA GRANGE TX 78945 LA GRANGE TX 78945
Phone (979) 968-8068 **Fax** (979) 968-5210 **PHONE:** (979) 968-8502 **FAX:** (979) 968-5210
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 11/07/2018

County **FAYETTE** Reg Svcs: ICF-IID (AUSTIN REGION) Region 07 - AUSTIN

Facility Information: Facility ID: 003682 **Owner Information**
 MAIN STREET COMMUNITY RESIDENCE KENMAR RESIDENTIAL SERVICES INCORPORATED
 520 N MAIN 33 CYPRESS BLVD ,SUITE 100
 LA GRANGE TX 78945 ROUND ROCK TX 78665
Phone (409) 968-6188 **Fax** **PHONE:** (512) 336-0800 **FAX:** (512) 336-0812
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 03/15/2020

County **FAYETTE** Reg Svcs: ICF-IID (AUSTIN REGION) Region 07 - AUSTIN

Facility Information: Facility ID: 007227 **Owner Information**
 MONROE COMMUNITY RESIDENCE KENMAR RESIDENTIAL SERVICES INCORPORATED
 842 N MONROE 33 CYPRESS BLVD ,SUITE 100
 LA GRANGE TX 78945 ROUND ROCK TX 78665
Phone (979) 968-8821 **Fax** **PHONE:** (512) 336-0800 **FAX:** (512) 336-0812
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 03/15/2020

County **FAYETTE** Reg Svcs: ICF-IID (AUSTIN REGION) Region 07 - AUSTIN

Facility Information: Facility ID: 003678 **Owner Information**
 SHADY LANE COMMUNITY RESIDENCE KENMAR RESIDENTIAL SERVICES INCORPORATED
 542 EAST PECAN STREET 33 CYPRESS BLVD ,SUITE 100
 LA GRANGE TX 78945 ROUND ROCK TX 78665
Phone (512) 336-0800 **Fax** (512) 336-0812 **PHONE:** (512) 336-0800 **FAX:** (512) 336-0812
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 12/18/2019

County **FAYETTE** Reg Svcs: ICF-IID (AUSTIN REGION) Region 07 - AUSTIN

Facility Information: Facility ID: 007672 **Owner Information**
 FELICE SCHWARTZ COMMUNITY RESIDENCE BLUEBONNET TRAILS COMMUNITY MHMR
 2011 W US HWY 90 1111
 SCHULENBURG TX 78956 TX
Phone (409) 743-4490 **Fax** **PHONE:** **FAX:**
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** GOVERNMENT BASED
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:**

County **FAYETTE** Reg Svcs: ICF-IID (AUSTIN REGION) Region 07 - AUSTIN

Facility Information: Facility ID: 007673 **Owner Information**
 HIRSCH SCHWARTZ COMMUNITY RESIDENCE BLUEBONNET TRAILS COMMUNITY MHMR
 2021 W US HWY 90 1111
 SCHULENBURG TX 78956 TX
Phone (979) 743-4488 **Fax** **PHONE:** **FAX:**
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** GOVERNMENT BASED
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:**

County	FAYETTE	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007630			Owner Information	
JUSTICE HOUSE				JAMES-LEACH INC	
706 JUSTICE RD				339 W COLORADO	
WEST POINT	TX 78963			LA GRANGE	TX 78945
Phone (979) 242-3613	Fax (979) 968-5210			PHONE: (979) 968-8502	FAX: (979) 968-5210
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 10/07/2018	

County	FISHER	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 007267			Owner Information	
ANGEL HOUSE I				ANGEL CARE INC	
410 RICHARD				PO BOX 310	
ROTAN	TX 79546			ROTAN	TX 79546
Phone (325) 735-2049	Fax (325) 735-3357			PHONE: (325) 735-2512	FAX: (325) 735-3357
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 05/31/2020	

County	FISHER	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 007463			Owner Information	
ANGEL HOUSE II				ANGEL CARE INC	
712 E 6TH ST				PO BOX 310	
ROTAN	TX 79546			ROTAN	TX 79546
Phone (325) 735-2099	Fax (325) 735-3357			PHONE: (325) 735-2512	FAX: (325) 735-3357
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 09/17/2019	

County	FORT BEND	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003656			Owner Information	
UCG - SOUTHMEADOW HOUSE				FROSTVIEW LANE LLC	
2814 WHISPERING CREEK				820 PARK TWO	
FRESNO	TX 77545			SUGAR LAND	TX 77478
Phone (713) 776-0805	Fax (713) 271-7777			PHONE: (713) 835-0527	FAX: (713) 271-8585
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 09/01/2019	

County	FORT BEND	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007521			Owner Information	
HOUSTON IN A VISION II				HOUSTON IN-A-VISION INC	
3203 CYPRESS POINT DRIVE				6442 GLADEWELL	
MISSOURI CITY	TX 77459			HOUSTON	TX 77072
Phone (281) 416-0607	Fax (713) 271-8585			PHONE: (281) 495-7509	FAX: (713) 271-8585
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 09/01/2019	

County	FORT BEND	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 100346			Owner Information	
B TTC PIN OAK HOUSE				DADS	
1818 COLLINS RD BLDG A				PO BOX 12668	
RICHMOND	TX 77469			AUSTIN	TX 78711
Phone (281) 239-1122	Fax (281) 239-1144			PHONE: (512) 454-3761	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt:	

County	FORT BEND	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 100373			Owner Information	
BTTIC WILLOW GLEN HOUSE				DADS	
1818 COLLINS RD BLDG B				PO BOX 12668	
RICHMOND	TX 77469			AUSTIN TX 78711	
Phone (281) 239-1122	Fax (281) 239-1144			PHONE: (512) 454-3761	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt:	

County	FORT BEND	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007106			Owner Information	
RICHMOND STATE SUPPORTED LIVING CENTER				DADS	
2100 PRESTON ROAD				PO BOX 12668	
RICHMOND	TX 77469			AUSTIN TX 78711	
Phone (281) 232-2075	Fax (281) 344-4587			PHONE: (512) 454-3761	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 664			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE STATE SCHOOL/STATE CENTER
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt:	

County	GALVESTON	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003921			Owner Information	
VALERO				EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST	
1813 VALERO				9901 LINN STATION ROAD	
FRIENDSWOOD	TX 77546			LOUISVILLE KY 40223-3808	
Phone (281) 996-8808	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2249
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 05/16/2020	

County	GONZALES	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 003781			Owner Information	
GONZALES COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
310 DEWITT ST				9901 LINN STATION ROAD	
GONZALES	TX 78629-4210			LOUISVILLE KY 40223-3808	
Phone (830) 672-7421	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 8			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 01/01/2019	

County	GONZALES	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007653			Owner Information	
GONZALES COUNTY COMMUNITY RESIDENCE				KENMAR RESIDENTIAL SERVICES INCORPORATED	
3221 HWY 87 WEST				33 CYPRESS BLVD ,SUITE 100	
SMILEY	TX 78159			ROUND ROCK TX 78665	
Phone (830) 587-6157	Fax (830) 587-6408			PHONE: (512) 336-0800	FAX: (512) 336-0812
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 03/15/2020	

County	GONZALES	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007268			Owner Information	
SMILEY COMMUNITY RESIDENCE				KENMAR RESIDENTIAL SERVICES INCORPORATED	
282 FM 3234				33 CYPRESS BLVD ,SUITE 100	
SMILEY	TX 78159			ROUND ROCK TX 78665	
Phone (830) 587-6253	Fax (830) 587-6237			PHONE: (512) 336-0800	FAX: (512) 336-0812
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 03/15/2020	

County	GRAYSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003738			Owner Information	
ALTERNATE LIVING FACILITY I				MHMR SERVICES OF TEXOMA	
1101 S MIRICK AVE				315 W MCLAIN	,PO BOX 1087 (ZIP 75091)
DENISON	TX 75020			SHERMAN	TX 75092
Phone (903) 465-7383	Fax			PHONE:	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 10			
Cert Alzh Capacity: 0	TITLE19: 0				PROGRAM TYPE: ICF/IID
PRIVATE Beds: 0	TITLE 18/19: 0				SERVICE TYPE GOVERNMENT BASED
				License Exp Dt:	

County	GRAYSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003976			Owner Information	
ALTERNATE LIVING FACILITY III				MHMR SERVICES OF TEXOMA	
1100 WEST WALKER				315 W MCLAIN	,PO BOX 1087 (ZIP 75091)
DENISON	TX 75020			SHERMAN	TX 75092
Phone (903) 465-6434	Fax (903) 786-2902			PHONE:	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				PROGRAM TYPE: ICF/IID
PRIVATE Beds: 0	TITLE 18/19: 0				SERVICE TYPE GOVERNMENT BASED
				License Exp Dt:	

County	GRAYSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007314			Owner Information	
EDWARDS STREET HOUSE				EXCEPTIONALCARE INC	
603 EDWARDS ST				2402 W MORTON ST STE 140	
DENISON	TX 75020			DENISON	TX 75020
Phone (903) 463-6811	Fax (903) 465-8799			PHONE: (903) 465-8766	FAX: (903) 465-8799
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				PROGRAM TYPE: ICF/IID
PRIVATE Beds: 0	TITLE 18/19: 0				SERVICE TYPE PRIVATELY OWNED
				License Exp Dt:	09/01/2019

County	GRAYSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007638			Owner Information	
HYDE PARK HOUSE				EXCEPTIONALCARE INC	
1507 HYDE PARK AVE				2402 W MORTON ST STE 140	
DENISON	TX 75020			DENISON	TX 75020
Phone (903) 463-6922	Fax (903) 465-8799			PHONE: (903) 465-8766	FAX: (903) 465-8799
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				PROGRAM TYPE: ICF/IID
PRIVATE Beds: 0	TITLE 18/19: 0				SERVICE TYPE PRIVATELY OWNED
				License Exp Dt:	01/31/2019

County	GRAYSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007446			Owner Information	
LYNN STREET HOUSE				EXCEPTIONALCARE INC	
108 S LYNN ST				2402 W MORTON ST STE 140	
DENISON	TX 75020			DENISON	TX 75020
Phone (903) 465-2655	Fax (903) 465-8799			PHONE: (903) 465-8766	FAX: (903) 465-8799
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				PROGRAM TYPE: ICF/IID
PRIVATE Beds: 0	TITLE 18/19: 0				SERVICE TYPE PRIVATELY OWNED
				License Exp Dt:	08/04/2018

County	GRAYSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003769			Owner Information	
MHMR SVCS OF TEXOMA ALTERNATE LIVING FACILITY II				MHMR SERVICES OF TEXOMA	
1217 DESVOIGNES RD				315 W MCLAIN	,PO BOX 1087 (ZIP 75091)
DENISON	TX 75021			SHERMAN	TX 75092
Phone (903) 463-5210	Fax			PHONE:	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 10			
Cert Alzh Capacity: 0	TITLE19: 0				PROGRAM TYPE: ICF/IID
PRIVATE Beds: 0	TITLE 18/19: 0				SERVICE TYPE GOVERNMENT BASED
				License Exp Dt:	

County **GRAYSON** Reg Svcs: **IID TEAM** Region **03 - ARLINGTON**
Facility Information: **Facility ID:** 101455
 EVERGREEN CARRIAGE ESTATES COMMUNITY HOME
 2304 CARRIAGE ESTATES ROAD
 SHERMAN TX 75092
Phone (903) 813-3278 **Fax** (903) 893-6637
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
 EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC
 10810 SANDEN DR
 DALLAS TX 75238
PHONE: (972) 386-4834 **FAX:**
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 07/03/2019

County **GRAYSON** Reg Svcs: **IID TEAM** Region **03 - ARLINGTON**
Facility Information: **Facility ID:** 101453
 EVERGREEN NORTHBROOK COMMUNITY HOME
 1732 NORTHBROOK
 SHERMAN TX 75092
Phone (903) 870-2113 **Fax** (903) 893-6637
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
 EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC
 10810 SANDEN DR
 DALLAS TX 75238
PHONE: (972) 386-4834 **FAX:**
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 07/02/2019

County **GREGG** Reg Svcs: **ICF/IID TEAM** Region **04 - TYLER**
Facility Information: **Facility ID:** 007492
 MONTE CARLO COMMUNITY HOME
 12 MONTE CARLO
 GLADEWATER TX 75647
Phone (903) 845-6662 **Fax** (903) 295-7394
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
 H M S INVESTMENTS INC
 112 S WARD DR
 LONGVIEW TX 75604
PHONE: (903) 295-7391 **FAX:** (903) 295-7394
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 12/22/2019

County **GREGG** Reg Svcs: **ICF/IID TEAM** Region **04 - TYLER**
Facility Information: **Facility ID:** 007572
 TENERY STREET COMMUNITY HOME
 502 TENERY ST
 GLADEWATER TX 75647
Phone (903) 845-4275 **Fax** (903) 295-7394
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
 L M R HEALTHCARE SERVICES INC
 112 S WARD
 LONGVIEW TX 75604
PHONE: (903) 295-7391 **FAX:** (903) 295-7394
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 12/03/2019

County **GREGG** Reg Svcs: **ICF/IID TEAM** Region **04 - TYLER**
Facility Information: **Facility ID:** 007224
 EVERGREEN DANVILLE ROAD COMMUNITY HOME
 1104 DANVILLE RD
 KILGORE TX 75662
Phone (903) 984-9370 **Fax** (903) 792-1861
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
 EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC
 10810 SANDEN DR
 DALLAS TX 75238
PHONE: (972) 386-4834 **FAX:**
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 08/14/2018

County **GREGG** Reg Svcs: **ICF/IID TEAM** Region **04 - TYLER**
Facility Information: **Facility ID:** 007431
 ROYAL DRIVE COMMUNITY HOME
 3009 ROYAL DR
 KILGORE TX 75662
Phone (903) 984-0486 **Fax** (903) 295-7394
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
 S & H HOMES INC
 112 S WARD DR
 LONGVIEW TX 75604
PHONE: (903) 295-7391 **FAX:** (903) 295-7394
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 07/10/2020

County	GREGG	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 007541			Owner Information	
SCEYNE COMMUNITY HOME				R & K BARBER INC	
805 SCEYNE				112 S WARD	
KILGORE	TX 75662			LONGVIEW TX 75604	
Phone (903) 983-3679	Fax (903) 295-7394			PHONE: (903) 295-7391	FAX: (903) 295-7394
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 06/11/2020	

County	GREGG	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 007608			Owner Information	
CHAD COMMUNITY HOME				D & S RESIDENTIAL SERVICES LP	
1202 CHAD				8911 N CAPITAL OF TX HWY	.BLDG 1 STE 1300
LONGVIEW	TX 75604			AUSTIN TX 78759	
Phone (903) 759-5744	Fax			PHONE: (512) 327-2325	FAX: (512) 327-5355
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 12/01/2019	

County	GREGG	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 003714			Owner Information	
CONCORD MANOR				SABINE VALLEY CENTER	
414 S CENTER				PO BOX 6800	
LONGVIEW	TX 75601			LONGVIEW TX 75608	
Phone (903) 757-6040	Fax			PHONE:	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 12			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
				License Exp Dt:	

County	GREGG	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 007229			Owner Information	
EVERGREEN SPRING HILL COMMUNITY HOME				EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC	
225 SYBLE LN				10810 SANDEN DR	
LONGVIEW	TX 75605			DALLAS TX 75238	
Phone (903) 297-4422	Fax (903) 295-9993			PHONE: (972) 386-4834	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 12/29/2018	

County	GREGG	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 007359			Owner Information	
EVERGREEN STONE TRAIL COMMUNITY HOME				EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC	
1205 STONE TRAIL				10810 SANDEN DR	
LONGVIEW	TX 75604			DALLAS TX 75238	
Phone (903) 295-1277	Fax (903) 295-9993			PHONE: (972) 386-4834	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/23/2020	

County	GREGG	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 007261			Owner Information	
HARMONY HOUSE I I				HARMONY LIVING CENTERS INC	
1012 EAGLE HILL TRAIL				112 S WARD DR	
LONGVIEW	TX 75601			LONGVIEW TX 75604	
Phone (903) 758-2439	Fax (903) 295-7394			PHONE: (903) 295-7391	FAX: (903) 295-7394
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 02/27/2019	

County	GREGG	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 007255			Owner Information	
HONEYSUCKLE COMMUNITY HOME				D & S RESIDENTIAL SERVICES LP	
9 HONEYSUCKLE				8911 N CAPITAL OF TX HWY	,BLDG 1 STE 1300
LONGVIEW	TX 75604			AUSTIN TX	78759
Phone (903) 297-3056	Fax			PHONE: (512) 327-2325	FAX: (512) 327-5355
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 12/01/2019	

County	GREGG	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 105457			Owner Information	
LOYD COURT 1				PACE OPPORTUNITY CENTERS INC	
312 LOYD COURT				1101 JAYCEE DR	
LONGVIEW	TX 75605			LONGVIEW TX	75604
Phone (903) 663-9493	Fax (903) 238-9528			PHONE: (903) 238-9523	FAX: (903) 238-9528
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 03/19/2019	

County	GREGG	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 007587			Owner Information	
MARTIN COMMUNITY HOME				L M R HEALTHCARE SERVICES INC	
2809 CLENDENEN				112 S WARD	
LONGVIEW	TX 75601			LONGVIEW TX	75604
Phone (903) 758-6801	Fax (903) 295-7394			PHONE: (903) 295-7391	FAX: (903) 295-7394
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 09/24/2019	

County	GREGG	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 007495			Owner Information	
MELTON HOUSE				PACE OPPORTUNITY CENTERS INC	
517 MELTON				1101 JAYCEE DR	
LONGVIEW	TX 75602			LONGVIEW TX	75604
Phone (903) 753-4685	Fax (903) 238-9528			PHONE: (903) 238-9523	FAX: (903) 238-9528
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 09/01/2018	

County	GREGG	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 003624			Owner Information	
PINETREE RESIDENCE				SABINE VALLEY CENTER	
303 EVERGREEN				PO BOX 6800	
LONGVIEW	TX 75604			LONGVIEW TX	75608
Phone (903) 753-9804	Fax			PHONE:	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
				License Exp Dt:	

County	GREGG	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 007246			Owner Information	
PURDUE HOUSE				PACE OPPORTUNITY CENTERS INC	
1307 PURDUE DR				1101 JAYCEE DR	
LONGVIEW	TX 75601			LONGVIEW TX	75604
Phone (903) 553-0637	Fax (903) 238-9528			PHONE: (903) 238-9523	FAX: (903) 238-9528
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 09/01/2018	

County **GREGG** Reg Svcs: ICF/IID TEAM Region 04 - TYLER

Facility Information: Facility ID: 003623 Owner Information

TERI LYN SABINE VALLEY CENTER
 3704 TERI LYN PO BOX 6800
 LONGVIEW TX 75608

Phone (903) 753-9804 Fax
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PHONE:** **FAX:**
Cert Alzh Capacity: 0 **TITLE19:** 0 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** GOVERNMENT BASED
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:**

County **GREGG** Reg Svcs: ICF/IID TEAM Region 04 - TYLER

Facility Information: Facility ID: 007297 Owner Information

THELMA COMMUNITY HOME D & S RESIDENTIAL SERVICES LP
 1009 THELMA 8911 N CAPITAL OF TX HWY ,BLDG 1 STE 1300
 LONGVIEW TX 75604 AUSTIN TX 78759

Phone (903) 759-3890 Fax (512) 327-5355 **PHONE:** (512) 327-2325 **FAX:** (512) 327-5355

TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0 **License Exp Dt:** 12/01/2019
PRIVATE Beds: 0 **TITLE 18/19:** 0

County **GREGG** Reg Svcs: ICF/IID TEAM Region 04 - TYLER

Facility Information: Facility ID: 003765 Owner Information

TUPELO HOUSE PACE OPPORTUNITY CENTERS INC
 511 TUPELO 1101 JAYCEE DR
 LONGVIEW TX 75604

Phone (903) 238-9593 Fax (903) 238-9528 **PHONE:** (903) 238-9523 **FAX:** (903) 238-9528

TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 8 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0 **License Exp Dt:** 09/01/2018
PRIVATE Beds: 0 **TITLE 18/19:** 0

County **GUADALUPE** Reg Svcs: TEAM ICF-IID Region 08 - SAN ANTONIO

Facility Information: Facility ID: 003786 Owner Information

CASA GUADALUPE I UCG CENTRAL TEXAS HOLDINGS LLC
 957 KUNKEL ST 2006 N WHEELER
 SEGUIN TX 77901

Phone (830) 379-8539 Fax (214) 723-5331 **PHONE:** (830) 372-2920 **FAX:** (214) 723-5331

TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 8 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0 **License Exp Dt:** 09/01/2019
PRIVATE Beds: 0 **TITLE 18/19:** 0

County **GUADALUPE** Reg Svcs: TEAM ICF-IID Region 08 - SAN ANTONIO

Facility Information: Facility ID: 003830 Owner Information

CASA GUADALUPE II UCG CENTRAL TEXAS HOLDINGS LLC
 936 ZUNKER 2006 N WHEELER
 SEGUIN TX 77901

Phone (830) 372-2920 Fax (214) 723-5331 **PHONE:** (830) 372-2920 **FAX:** (214) 723-5331

TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 8 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0 **License Exp Dt:** 09/01/2019
PRIVATE Beds: 0 **TITLE 18/19:** 0

County **GUADALUPE** Reg Svcs: TEAM ICF-IID Region 08 - SAN ANTONIO

Facility Information: Facility ID: 007394 Owner Information

DOVE LANE EDUCARE COMMUNITY LIVING CORPORATION - TEXAS
 1427 DOVE LN 9901 LINN STATION ROAD
 SEGUIN TX 78155 LOUISVILLE KY 40223

Phone (830) 303-6830 Fax **PHONE:** (502) 394-2100 **FAX:** (502) 394-2369

TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0 **License Exp Dt:** 09/01/2018
PRIVATE Beds: 0 **TITLE 18/19:** 0

County **GUADALUPE** Reg Svcs: **TEAM ICF-IID** Region **08 - SAN ANTONIO**

Facility Information: Facility ID: 003943 **Owner Information**
MOSAIC
1622 WILLOW LN
SEGUIN TX 78155
2245 MIDWAY ROAD ,STE 300
CARROLLTON TX 75006
Phone (210) 967-0566 **Fax** (210) 967-6232
PHONE: (972) 866-9989 **FAX:** (972) 991-0834
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 01/01/2019

County **GUADALUPE** Reg Svcs: **TEAM ICF-IID** Region **08 - SAN ANTONIO**

Facility Information: Facility ID: 003999 **Owner Information**
MOSAIC
974 E CEDAR
SEGUIN TX 78155
2245 MIDWAY ROAD ,STE 300
CARROLLTON TX 75006
Phone (210) 967-0566 **Fax** (210) 967-6232
PHONE: (972) 866-9989 **FAX:** (972) 991-0834
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 01/01/2019

County **GUADALUPE** Reg Svcs: **TEAM ICF-IID** Region **08 - SAN ANTONIO**

Facility Information: Facility ID: 003627 **Owner Information**
RIVER OAK
1005 RIVER OAK DR
SEGUIN TX 78155
9901 LINN STATION ROAD
LOUISVILLE KY 40223
Phone (830) 303-6835 **Fax**
PHONE: (502) 394-2100 **FAX:** (502) 394-2369
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 05/20/2019

County **HALE** Reg Svcs: **HIGH PLAINS ICF/MR** Region **01 - LUBBOCK**

Facility Information: Facility ID: 003939 **Owner Information**
RILEY ARMSTRONG RESIDENTIAL FACILITY
2911 W 21ST ST
PLAINVIEW TX 79072
2700 YONKERS ST
PLAINVIEW TX 79072
Phone (806) 291-4455 **Fax**
PHONE: **FAX:**
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0
PROGRAM TYPE: ICF/IID **SERVICE TYPE** GOVERNMENT BASED
License Exp Dt:

County **HARDIN** Reg Svcs: **REGION 5 ICF/IID** Region **05 - BEAUMONT**

Facility Information: Facility ID: 003809 **Owner Information**
FRIES HOUSE
190 E AVE J
SILSBEE TX 77656
2203 KILGORE RD
BAYTOWN TX 77520
Phone (409) 385-4050 **Fax** (214) 723-5331
PHONE: (281) 837-1942 **FAX:** (281) 427-0586
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 8
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 09/01/2019

County **HARDIN** Reg Svcs: **REGION 5 ICF/IID** Region **05 - BEAUMONT**

Facility Information: Facility ID: 007554 **Owner Information**
ROOSEVELT COMMUNITY HOME
1020 ROOSEVELT DRIVE
SILSBEE TX 77656
4115 GALVESTON ROAD
HOUSTON TX 77017
Phone (409) 832-4112 **Fax** (409) 832-6974
PHONE: (713) 475-2220 **FAX:** (713) 475-2212
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 01/01/2019

County	HARDIN	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 007413			Owner Information	
WOODLEA COMMUNITY HOME				DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF BEAUMONT, LLC	
101 OGLESBEE RD				4115 GALVESTON ROAD	
SILSBEE	TX 77656			HOUSTON TX 77017	
Phone (409) 832-4112	Fax (409) 832-6974			PHONE: (713) 475-2220	FAX: (713) 475-2212
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/01/2019	

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007570			Owner Information	
BURNING TREE LIVING CENTER				DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF HOUSTON LLC	
4902 BURNING TREE				4115 GALVESTON RD	
BAYTOWN	TX 77521			HOUSTON TX 77017	
Phone (713) 475-2228	Fax (713) 475-2212			PHONE: (713) 475-2220	FAX: (713) 475-2332
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/01/2019	

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003605			Owner Information	
KILGORE HOUSE				ST GILES - BAYTOWN INC	
2203 KILGORE RD				2203 KILGORE RD	
BAYTOWN	TX 77520			BAYTOWN TX 77520	
Phone (281) 837-1942	Fax (281) 427-0586			PHONE: (281) 837-1942	FAX: (281) 427-0586
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 09/01/2019	

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007411			Owner Information	
MAPLEWOOD LIVING CENTER				DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF HOUSTON LLC	
706 MAPLEWOOD ST				4115 GALVESTON RD	
BAYTOWN	TX 77520			HOUSTON TX 77017	
Phone (713) 475-2228	Fax (713) 475-2212			PHONE: (713) 475-2220	FAX: (713) 475-2332
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/01/2019	

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003671			Owner Information	
MCFARLAND HOUSE				ST GILES - BAYTOWN INC	
1706 MCFARLAND				2203 KILGORE RD	
BAYTOWN	TX 77520			BAYTOWN TX 77520	
Phone (281) 837-8686	Fax (713) 271-8585			PHONE: (281) 837-1942	FAX: (281) 427-0586
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 09/01/2019	

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007381			Owner Information	
NORTH SHEPHERD HOUSE				ST GILES - BAYTOWN INC	
1112 N SHEPHERD				2203 KILGORE RD	
BAYTOWN	TX 77520			BAYTOWN TX 77520	
Phone (281) 837-6238	Fax (713) 271-8585			PHONE: (281) 837-1942	FAX: (281) 427-0586
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 09/01/2019	

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007565	Owner Information			
OLIVE LIVING CENTER		DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF HOUSTON LLC			
2301 OLIVE CIRCLE		4115 GALVESTON RD			
BAYTOWN	TX 77522	HOUSTON TX 77017			
Phone (713) 475-2228	Fax (713) 472-2212	PHONE: (713) 475-2220 FAX: (713) 472-2332			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007560	Owner Information			
CLASSIC GROUP HOME		SHIRLEY SHAW			
1454 SOMERCOTES LANE		18511 NORTH ROARING RIVER COURT			
CHANNELVIEW	TX 77530	HUMBLE TX 77346			
Phone (281) 452-4661	Fax (281) 452-4639	PHONE: (713) 979-6193 FAX: (281) 452-4639			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 09/23/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003654	Owner Information			
ARMADILLO TRAILS GROUP HOME		BETHESDA LUTHERAN COMMUNITIES INC			
16723 HUFFMEISTER ROAD		18937 K Z RD			
CYPRESS	TX 77429	CYPRESS TX 77433			
Phone (281) 516-4000	Fax (281) 351-5897	PHONE: (281) 516-4000 FAX: (281) 351-5897			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 03/10/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003608	Owner Information			
CYPRESS COTTAGE		REACH UNLIMITED INC			
11914 MUELLER CEMETERY RD		11832 MUELLER CEMETERY RD ,STE 200			
CYPRESS	TX 77429	CYPRESS TX 77429			
Phone (281) 373-9404	Fax (281) 373-3820	PHONE: (281) 213-2582 FAX: (281) 213-4545			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 06/14/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003655	Owner Information			
GOOD SAMARITAN GROUP HOME		BETHESDA LUTHERAN COMMUNITIES INC			
18937 K Z RD		18937 K Z RD			
CYPRESS	TX 77433	CYPRESS TX 77433			
Phone (281) 516-4000	Fax (281) 351-5897	PHONE: (281) 516-4000 FAX: (281) 351-5897			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 03/22/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003615	Owner Information			
KINGS COURT GROUP HOME		BETHESDA LUTHERAN COMMUNITIES INC			
17626 KINGS CT		18937 K Z RD			
CYPRESS	TX 77429	CYPRESS TX 77433			
Phone (281) 576-4000	Fax (281) 351-5897	PHONE: (281) 516-4000 FAX: (281) 351-5897			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 07/14/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003619			Owner Information	
MAVERICK VALLEY GROUP HOME				BETHESDA LUTHERAN COMMUNITIES INC	
14802 MAVERICK VALLEY LANE				18937 K Z RD	
CYPRESS	TX 77429			CYPRESS TX 77433	
Phone (281) 758-4865	Fax (281) 351-5897			PHONE: (281) 516-4000	FAX: (281) 351-5897
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE PRIVATELY OWNED			
		License Exp Dt: 07/31/2018			

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 010197			Owner Information	
MUELLER HOUSE				REACH UNLIMITED INC	
11910 MUELLER CEMETERY RD				11832 MUELLER CEMETERY RD ,STE 200	
CYPRESS	TX 77429			CYPRESS TX 77429	
Phone (281) 373-9406	Fax (281) 373-4074			PHONE: (281) 213-2582	FAX: (281) 213-4545
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 9			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE PRIVATELY OWNED			
		License Exp Dt: 09/24/2019			

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007283			Owner Information	
GARDEN LIVING CENTER				DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF HOUSTON LLC	
913 E X STREET				4115 GALVESTON RD	
DEER PARK	TX 77536			HOUSTON TX 77017	
Phone (713) 475-2228	Fax (713) 475-2212			PHONE: (713) 475-2220	FAX: (713) 472-2332
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE PRIVATELY OWNED			
		License Exp Dt: 01/01/2019			

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007424			Owner Information	
HENDERSON LIVING CENTER				DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF HOUSTON LLC	
2601 HENDERSON LN				4115 GALVESTON RD	
DEER PARK	TX 77536			HOUSTON TX 77017	
Phone (713) 475-2228	Fax (713) 475-2212			PHONE: (713) 475-2220	FAX: (713) 472-2332
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE PRIVATELY OWNED			
		License Exp Dt: 01/01/2019			

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007284			Owner Information	
WINDSOR LIVING CENTER				DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF HOUSTON LLC	
3602 WINDSOR LN				4115 GALVESTON RD	
DEER PARK	TX 77536			HOUSTON TX 77017	
Phone (713) 475-2228	Fax (713) 472-2212			PHONE: (713) 475-2220	FAX: (713) 472-2332
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE PRIVATELY OWNED			
		License Exp Dt: 01/01/2019			

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007661			Owner Information	
1801 BRANARD				ST GILES - BAYTOWN INC	
1801 BRANARD ST				2203 KILGORE RD	
HOUSTON	TX 77098			BAYTOWN TX 77520	
Phone (713) 524-7473	Fax (713) 524-4153			PHONE: (281) 837-1942	FAX: (281) 427-0586
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE PRIVATELY OWNED			
		License Exp Dt: 09/01/2019			

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007660			Owner Information	
616 WEST BELL				ST GILES - BAYTOWN INC	
616 W BELL ST				2203 KILGORE RD	
HOUSTON	TX 77019			BAYTOWN TX 77520	
Phone (713) 524-5392	Fax (713) 524-3821			PHONE: (281) 837-1942	FAX: (281) 427-0586
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 09/01/2019	

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007548			Owner Information	
APRIL WIND HOUSE				COMMUNITY HEALTHCARE SERVICES INC	
3015 APRIL WIND				3015 APRIL WIND DR	
HOUSTON	TX 77014			HOUSTON TX 77014	
Phone (281) 893-9090	Fax (281) 893-0707			PHONE: (281) 893-9090	FAX: (281) 893-0707
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 12/01/2019	

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 102827			Owner Information	
AVONDALE HOUSE				AVONDALE HOUSE	
5614 BENNING				3737 OMEARA DR	
HOUSTON	TX 77096			HOUSTON TX 77025	
Phone (713) 726-1239	Fax			PHONE: (713) 993-9589	FAX: (713) 993-0751
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 11/29/2018	

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 010183			Owner Information	
AVONDALE HOUSE I I I				AVONDALE HOUSE	
4826 MCDERMED				3737 OMEARA DR	
HOUSTON	TX 77035			HOUSTON TX 77025	
Phone (713) 993-9544	Fax (713) 993-0751			PHONE: (713) 993-9589	FAX: (713) 993-0751
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 02/07/2020	

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 010182			Owner Information	
AVONDALE HOUSE II				AVONDALE HOUSE	
8515 BLUEGATE				3737 OMEARA DR	
HOUSTON	TX 77025			HOUSTON TX 77025	
Phone (713) 993-9544	Fax (713) 993-0751			PHONE: (713) 993-9589	FAX: (713) 993-0751
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 10/08/2019	

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003914			Owner Information	
BEARCREEK				EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST	
5006 STANHOPE				9901 LINN STATION ROAD	
HOUSTON	TX 77064			LOUISVILLE KY 40223-3808	
Phone (281) 463-2227	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2249
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 05/02/2018	

County **HARRIS** Reg Svcs: UNIT 21 (ICF/MR) Region 06 - HOUSTON

Facility Information: Facility ID: 003859 Owner Information
 BEECHNUT HOUSE VITA-LIVING INC
 8114 BEECHNUT 3300 S GESSNER ,STE 150
 HOUSTON TX 77036 HOUSTON TX 77063
Phone (713) 779-2684 **Fax** (713) 981-4512
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PHONE:** (713) 292-1880 **FAX:** (713) 981-4512
Cert Alzh Capacity: 0 **TITLE19:** 0 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 03/26/2020

County **HARRIS** Reg Svcs: UNIT 21 (ICF/MR) Region 06 - HOUSTON

Facility Information: Facility ID: 007486 Owner Information
 BOSWORTH LIVING CENTER DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF HOUSTON LLC
 5126 BOSWORTH ST 4115 GALVESTON RD
 HOUSTON TX 77017 HOUSTON TX 77017
Phone (713) 475-2228 **Fax** (713) 475-2212
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PHONE:** (713) 475-2220 **FAX:** (713) 472-2332
Cert Alzh Capacity: 0 **TITLE19:** 0 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 01/01/2019

County **HARRIS** Reg Svcs: UNIT 21 (ICF/MR) Region 06 - HOUSTON

Facility Information: Facility ID: 003915 Owner Information
 BRIAR GROVE PARK EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST
 10038 BRIAR FOREST DR 9901 LINN STATION ROAD
 HOUSTON TX 77042 LOUISVILLE KY 40223-3808
Phone (713) 782-5454 **Fax**
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PHONE:** (502) 394-2100 **FAX:** (502) 394-2249
Cert Alzh Capacity: 0 **TITLE19:** 0 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 03/01/2020

County **HARRIS** Reg Svcs: UNIT 21 (ICF/MR) Region 06 - HOUSTON

Facility Information: Facility ID: 003895 Owner Information
 CAMPBELL HOUSE VITA-LIVING INC
 1825 CAMPBELL 3300 S GESSNER ,STE 150
 HOUSTON TX 77080 HOUSTON TX 77063
Phone (713) 827-1159 **Fax** (713) 827-1159
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PHONE:** (713) 292-1880 **FAX:** (713) 981-4512
Cert Alzh Capacity: 0 **TITLE19:** 0 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 08/21/2018

County **HARRIS** Reg Svcs: UNIT 21 (ICF/MR) Region 06 - HOUSTON

Facility Information: Facility ID: 003684 Owner Information
 CAREW HOUSE VITA-LIVING INC
 7410 CAREW STREET 3300 S GESSNER ,STE 150
 HOUSTON TX 77074 HOUSTON TX 77063
Phone (713) 271-9851 **Fax** (281) 492-8331
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PHONE:** (713) 292-1880 **FAX:** (713) 981-4512
Cert Alzh Capacity: 0 **TITLE19:** 0 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 02/23/2020

County **HARRIS** Reg Svcs: UNIT 21 (ICF/MR) Region 06 - HOUSTON

Facility Information: Facility ID: 003930 Owner Information
 COPPERFIELD EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST
 15311 FOREST TRAILS 9901 LINN STATION ROAD
 HOUSTON TX 77095 LOUISVILLE KY 40223-3808
Phone (281) 855-0857 **Fax**
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PHONE:** (502) 394-2100 **FAX:** (502) 394-2249
Cert Alzh Capacity: 0 **TITLE19:** 0 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 03/01/2020

County **HARRIS** Reg Svcs: UNIT 21 (ICF/MR) Region 06 - HOUSTON

Facility Information: Facility ID: 003643 **Owner Information**
 CUTTEN GREEN REACH UNLIMITED INC
 11519 COLONIAL TRAIL 11832 MUELLER CEMETERY RD ,STE 200
 HOUSTON TX 77066 CYPRESS TX 77429
Phone (281) 537-1679 **Fax** (281) 580-2951
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PHONE:** (281) 213-2582 **FAX:** (281) 213-4545
Cert Alzh Capacity: 0 **TITLE19:** 0 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 02/01/2020

County **HARRIS** Reg Svcs: UNIT 21 (ICF/MR) Region 06 - HOUSTON

Facility Information: Facility ID: 003960 **Owner Information**
 DEERFIELD EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST
 18006 LONGCLIFFE 9901 LINN STATION ROAD
 HOUSTON TX 77084 LOUISVILLE KY 40223-3808
Phone (281) 550-8604 **Fax**
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PHONE:** (502) 394-2100 **FAX:** (502) 394-2249
Cert Alzh Capacity: 0 **TITLE19:** 0 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 03/01/2018

County **HARRIS** Reg Svcs: UNIT 21 (ICF/MR) Region 06 - HOUSTON

Facility Information: Facility ID: 007616 **Owner Information**
 DESTINY HOUSE EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST
 8002 FAWN TERRACE 9901 LINN STATION ROAD
 HOUSTON TX 77071 LOUISVILLE KY 40223-3808
Phone (713) 283-0711 **Fax**
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PHONE:** (502) 394-2100 **FAX:** (502) 394-2249
Cert Alzh Capacity: 0 **TITLE19:** 0 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 07/31/2018

County **HARRIS** Reg Svcs: UNIT 21 (ICF/MR) Region 06 - HOUSTON

Facility Information: Facility ID: 003910 **Owner Information**
 DONSKY HOUSE MHMR AUTHORITY OF HARRIS COUNTY
 11511 BOB WHITE ST 2850 FANNIN
 HOUSTON TX 77035 HOUSTON TX 77265-5381
Phone (713) 728-4956 **Fax**
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PHONE:** (713) 750-5600 **FAX:**
Cert Alzh Capacity: 0 **TITLE19:** 0 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** GOVERNMENT BASED
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:**

County **HARRIS** Reg Svcs: UNIT 21 (ICF/MR) Region 06 - HOUSTON

Facility Information: Facility ID: 003980 **Owner Information**
 EBONY COMMUNITY HOME EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP
 2519 LOWER VALLEY DRIVE 9901 LINN STATION ROAD
 HOUSTON TX 77067-1901 LOUISVILLE KY 40223-3808
Phone (281) 586-7067 **Fax**
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PHONE:** (502) 394-2100 **FAX:** (502) 394-2285
Cert Alzh Capacity: 0 **TITLE19:** 0 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 01/01/2019

County **HARRIS** Reg Svcs: UNIT 21 (ICF/MR) Region 06 - HOUSTON

Facility Information: Facility ID: 007585 **Owner Information**
 FROSTVIEW HOUSE II D & D CARE HOMES INC
 15331 E ANTONE 4100 INTERNATIONAL PLAZA ,SUITE 800
 HOUSTON TX 77071 FT. WORTH TX 76109
Phone (713) 728-4148 **Fax** (713) 271-8585
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PHONE:** (817) 447-2700 **FAX:** (817) 447-3033
Cert Alzh Capacity: 0 **TITLE19:** 0 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 09/01/2019

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007437			Owner Information	
GREAT HOME CARE INC 12502 LIMA DRIVE HOUSTON	TX 77099			GREAT HOME CARE INC 12502 LIMA DRIVE HOUSTON TX 77099	
Phone (281) 530-8710	Fax (281) 568-5828			PHONE: (281) 568-3532	FAX: (281) 568-5828
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE PRIVATELY OWNED			
		License Exp Dt: 04/10/2020			

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003913			Owner Information	
HEARTHSTONE 7206 BENWICH CIRCLE HOUSTON	TX 77095			EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST 9901 LINN STATION ROAD LOUISVILLE KY 40223-3808	
Phone (281) 463-1034	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2249
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE PRIVATELY OWNED			
		License Exp Dt: 03/01/2020			

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003978			Owner Information	
HOPE HOUSE 9107 SPELLMAN HOUSTON	TX 77031			EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST 9901 LINN STATION ROAD LOUISVILLE KY 40223-3808	
Phone (713) 988-1461	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2249
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE PRIVATELY OWNED			
		License Exp Dt: 07/31/2018			

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007317			Owner Information	
HOUSTON IN A VISION 6442 GLADEWELL HOUSTON	TX 77072			HOUSTON IN-A-VISION INC 6442 GLADEWELL HOUSTON TX 77072	
Phone (281) 495-7509	Fax (713) 495-7509			PHONE: (281) 495-7509	FAX: (713) 271-8585
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE PRIVATELY OWNED			
		License Exp Dt: 09/01/2019			

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003907			Owner Information	
JERSEY VILLAGE 16130 ACAPULCO HOUSTON	TX 77040			EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST 9901 LINN STATION ROAD LOUISVILLE KY 40223-3808	
Phone (713) 896-8355	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2249
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE PRIVATELY OWNED			
		License Exp Dt: 03/01/2020			

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007597			Owner Information	
K AND K LIVING CENTER 2 16602 GAELDOM LN HOUSTON	TX 77084			K & K LIVING CENTER INC PO BOX 842679 HOUSTON TX 77284	
Phone (281) 859-9474	Fax (281) 859-8037			PHONE: (281) 859-9474	FAX: (281) 859-8037
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE PRIVATELY OWNED			
		License Exp Dt: 04/07/2020			

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007387			Owner Information	
K AND K LIVING CENTER INC				K & K LIVING CENTER INC	
16802 JUDY LEIGH DR				PO BOX 842679	
HOUSTON	TX 77084			HOUSTON TX 77284	
Phone (281) 859-9474	Fax (281) 859-8037			PHONE: (281) 859-9474	FAX: (281) 859-8037
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 03/30/2020	

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003746			Owner Information	
LAKELAND				EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST	
5706 PINEWILDE				9901 LINN STATION ROAD	
HOUSTON	TX 77066			LOUISVILLE KY 40223-3808	
Phone (281) 580-4103	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2249
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 10/09/2019	

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003729			Owner Information	
MAPLEWOOD SOUTH				EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST	
8111 BURNING HILLS				9901 LINN STATION ROAD	
HOUSTON	TX 77071			LOUISVILLE KY 40223-3808	
Phone (713) 271-2534	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2249
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 10/10/2018	

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003897			Owner Information	
MEMORIAL COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
17115 CAMBERWELL GREEN LANE				9901 LINN STATION ROAD	
HOUSTON	TX 77070-1817			LOUISVILLE KY 40223-3808	
Phone (281) 370-5702	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/01/2019	

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007239			Owner Information	
MERIDIAN LIVING CENTER				MERIDIAN LIVING CENTER INC	
7231 AUGUSTINE DR				#4 MOCKINGBIRD	
HOUSTON	TX 77036			HOUSTON TX 77074	
Phone (713) 272-9707	Fax (713) 778-9313			PHONE: (713) 778-9300	FAX: (713) 778-9313
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 02/15/2020	

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007428			Owner Information	
MERIDIAN LIVING CENTER I I				MERIDIAN LIVING CENTER INC	
10610 ODYSSEY CT				#4 MOCKINGBIRD	
HOUSTON	TX 77099			HOUSTON TX 77074	
Phone (281) 568-1338	Fax (713) 778-9300			PHONE: (713) 778-9300	FAX: (713) 778-9313
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 07/01/2020	

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007595			Owner Information	
PACE OPPORTUNITY CENTERS INC.				PACE OPPORTUNITY CENTERS INC	
4002 WYNE STREET				1101 JAYCEE DR	
HOUSTON TX 77017				LONGVIEW TX 75604	
Phone	(903) 238-9523	Fax	(903) 238-9528	PHONE:	(903) 238-9523
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
				License Exp Dt:	04/08/2020

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007275			Owner Information	
PEBBLESHIRE HOUSE				S&G COMMUNITY LIVING CENTER INC	
7865 PECAN VILLAS				7865 PECAN VILLAS	
HOUSTON TX 77061				HOUSTON TX 77061	
Phone	(713) 640-1044	Fax	(281) 334-7850	PHONE:	(713) 598-1471
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
				License Exp Dt:	05/01/2020

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007296			Owner Information	
PERIWINKLE HOUSE				JOHN M LUGAY	
1638 PERIWINKLE ST				17126 WUNDER HILL DR	
HOUSTON TX 77038				SPRING TX 77379	
Phone	(281) 448-9005	Fax	(281) 379-6068	PHONE:	(281) 379-4833
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
				License Exp Dt:	08/09/2018

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007384			Owner Information	
RAVENHEAD LIVING CENTER				DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF HOUSTON LLC	
314 RAVENHEAD ST				4115 GALVESTON RD	
HOUSTON TX 77034				HOUSTON TX 77017	
Phone	(713) 475-2228	Fax	(713) 475-2212	PHONE:	(713) 475-2220
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
				License Exp Dt:	01/01/2019

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003828			Owner Information	
ROSE HOUSE				EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST	
12711 SHANNON HILLS				9901 LINN STATION ROAD	
HOUSTON TX 77099				LOUISVILLE KY 40223-3808	
Phone	(281) 564-4256	Fax		PHONE:	(502) 394-2100
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
				License Exp Dt:	07/31/2018

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003888			Owner Information	
SABLE LANE COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
13403 SABLE LN				9901 LINN STATION ROAD	
HOUSTON TX 77014-2113				LOUISVILLE KY 40223-3808	
Phone	(281) 444-4120	Fax		PHONE:	(502) 394-2100
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
				License Exp Dt:	01/01/2019

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 010200			Owner Information	
SHADY VILLA PLACE				REACH UNLIMITED INC	
7715 SHADY VILLA LN				11832 MUELLER CEMETERY RD	,STE 200
HOUSTON	TX 77055			CYPRESS TX	77429
Phone (713) 956-7860		Fax (713) 956-4835		PHONE: (281) 213-2582	FAX: (281) 213-4545
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 9		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 09/27/2019	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003971			Owner Information	
SPRING SHADOWS				EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST	
2803 QUINCANNON				9901 LINN STATION ROAD	
HOUSTON	TX 77043			LOUISVILLE KY	40223-3808
Phone (713) 690-3127		Fax		PHONE: (502) 394-2100	FAX: (502) 394-2249
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 02/14/2020	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007472			Owner Information	
UCG - ALBURY HOUSE				FROSTVIEW LANE LLC	
11019 ALBURY				820 PARK TWO	
HOUSTON	TX 77096			SUGAR LAND TX	77478
Phone (713) 774-3656		Fax (281) 568-8125		PHONE: (713) 835-0527	FAX: (713) 271-8585
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 09/01/2019	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007263			Owner Information	
UCG - HUMMINGBIRD HOUSE				FROSTVIEW LANE LLC	
9726 S. HANWORTH DR.				820 PARK TWO	
HOUSTON	TX 77031			SUGAR LAND TX	77478
Phone (713) 271-7777		Fax (713) 271-8585		PHONE: (713) 835-0527	FAX: (713) 271-8585
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 09/01/2019	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007801			Owner Information	
UCG NIGHTINGALE I				FROSTVIEW LANE LLC	
13927 MAGNUS LANE				820 PARK TWO	
HOUSTON	TX 77083			SUGAR LAND TX	77478
Phone (713) 981-1571		Fax (713) 271-8585		PHONE: (713) 835-0527	FAX: (713) 271-8585
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 09/01/2019	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007806			Owner Information	
UCG NIGHTINGALE II				FROSTVIEW LANE LLC	
7327 BEECHNUT ST				820 PARK TWO	
HOUSTON	TX 77074			SUGAR LAND TX	77478
Phone (713) 541-2667		Fax (713) 271-8585		PHONE: (713) 835-0527	FAX: (713) 271-8585
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 09/01/2019	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007604	Owner Information			
UNITY HOUSE		EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST			
10507 OFFER ST		9901 LINN STATION ROAD			
HOUSTON	TX 77031	LOUISVILLE KY 40223-3808			
Phone (713) 776-0072	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2249			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 07/31/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007369	Owner Information			
WEST ROAD HOUSE		DIVERSITY GROUP LC			
7811 WEST ROAD		7807 LONG POINT #106			
HOUSTON	TX 77064	HOUSTON TX 77055			
Phone (713) 937-6908	Fax (281) 888-2785	PHONE: (281) 888-2490 FAX: (281) 888-2785			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 03/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003721	Owner Information			
WESTBURY HOUSE		MHMR AUTHORITY OF HARRIS COUNTY			
5707 WARM SPRINGS		2850 FANNIN			
HOUSTON	TX 77035	HOUSTON TX 77265-5381			
Phone (713) 723-5589	Fax	PHONE: (713) 750-5600 FAX:			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE GOVERNMENT BASED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt:			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003941	Owner Information			
WESTLAKE FOREST		EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST			
2422 HEATHER GOLD		9901 LINN STATION ROAD			
HOUSTON	TX 77084	LOUISVILLE KY 40223-3808			
Phone (281) 578-7050	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2249			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 03/01/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007571	Owner Information			
WESTVIEW I		QHS ENTERPRISES INC			
10018 WESTVIEW DR		2926 COLONEL COURT DR			
HOUSTON	TX 77055	RICHMOND TX 77406			
Phone (713) 722-7102	Fax (713) 722-7155	PHONE: (281) 375-5507 FAX:			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 11/19/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003940	Owner Information			
WOODEDGE		EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST			
11914 GREEN CREEK CIRCLE		9901 LINN STATION ROAD			
HOUSTON	TX 77070	LOUISVILLE KY 40223-3808			
Phone (281) 469-8589	Fax (512) 498-2777	PHONE: (502) 394-2100 FAX: (502) 394-2249			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/25/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007328	Owner Information			
TARA COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
13515 TARA OAK DRIVE		9901 LINN STATION ROAD			
JERSEY VILLAGE	TX 77065-3744	LOUISVILLE KY 40223-3808			
Phone (281) 894-2822	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2285			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003688	Owner Information			
APPLEWHITE		MHMR AUTHORITY OF HARRIS COUNTY			
526 APPLEWHITE DRIVE		2850 FANNIN			
KATY	TX 77450	HOUSTON TX 77265-5381			
Phone (713) 392-4482	Fax	PHONE: (713) 750-5600 FAX:			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE GOVERNMENT BASED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt:			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007540	Owner Information			
MEADOWPLACE LIVING CENTER		DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF HOUSTON LLC			
5205 MEADOW PLACE		4115 GALVESTON RD			
LA PORTE	TX 77571	HOUSTON TX 77017			
Phone (713) 475-2228	Fax (713) 475-2212	PHONE: (713) 475-2220 FAX: (713) 472-2332			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007462	Owner Information			
SHELL ROCK LIVING CENTER		DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF HOUSTON LLC			
9734 SHELL ROCK		4115 GALVESTON RD			
LA PORTE	TX 77571	HOUSTON TX 77017			
Phone (713) 475-2228	Fax (713) 472-2212	PHONE: (713) 475-2220 FAX: (713) 472-2332			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003694	Owner Information			
FELLOWS BLOCK		EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST			
3419 BOCA RATON DRIVE		9901 LINN STATION ROAD			
MISSOURI CITY	TX 77459	LOUISVILLE KY 40223-3808			
Phone (281) 835-9303	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2249			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 07/31/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007218	Owner Information			
FROSTVIEW HOUSE		FROSTVIEW LANE LLC			
7310 FROSTVIEW LN		820 PARK TWO			
MISSOURI CITY	TX 77489	SUGAR LAND TX 77478			
Phone (713) 835-0527	Fax (713) 271-8585	PHONE: (713) 835-0527 FAX: (713) 271-8585			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 09/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007346	Owner Information			
JUDY LIVING CENTER		DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF HOUSTON LLC			
2012 JUDY LN		4115 GALVESTON RD			
PASADENA	TX 77502	HOUSTON TX 77017			
Phone (713) 475-2228	Fax (713) 475-2212	PHONE: (713) 475-2220 FAX: (713) 472-2332			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007807	Owner Information			
PASADENA COTTAGE		MHMR AUTHORITY OF HARRIS COUNTY			
2122 WICHITA		2850 FANNIN			
PASADENA	TX 77502	HOUSTON TX 77265-5381			
Phone (713) 472-3470	Fax	PHONE: (713) 750-5600 FAX:			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE GOVERNMENT BASED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt:			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007818	Owner Information			
PASADENA COTTAGE B		MHMR AUTHORITY OF HARRIS COUNTY			
2122 WICHITA		2850 FANNIN			
PASADENA	TX 77502	HOUSTON TX 77265-5381			
Phone (713) 472-3470	Fax	PHONE: (713) 750-5600 FAX:			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE GOVERNMENT BASED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt:			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007322	Owner Information			
PONCA LIVING CENTER		DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF HOUSTON LLC			
4314 PONCA STREET		4115 GALVESTON RD			
PASADENA	TX 77504	HOUSTON TX 77017			
Phone (713) 475-2228	Fax (713) 475-2212	PHONE: (713) 475-2220 FAX: (713) 472-2332			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007336	Owner Information			
SAN JACINTO LIVING CENTER		DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF HOUSTON LLC			
2406 SAN JACINTO DR		4115 GALVESTON RD			
PASADENA	TX 77502	HOUSTON TX 77017			
Phone (713) 475-2228	Fax (713) 475-2212	PHONE: (713) 475-2220 FAX: (713) 472-2332			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007378	Owner Information			
GREEN VALLEY HOUSE		EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST			
5202 ALAMOSA LN		9901 LINN STATION ROAD			
SPRING	TX 77379	LOUISVILLE KY 40223-3808			
Phone (832) 717-0065	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2249			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 07/31/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003887	Owner Information			
MEADOWHILL COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
21710 MEADOWHILL DR		9901 LINN STATION ROAD			
SPRING	TX 77373	LOUISVILLE KY 40223-3808			
Phone (281) 353-7879	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2285			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003847	Owner Information			
PASSION HOUSE		EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST			
19110 CANDLETRAIL DRIVE		9901 LINN STATION ROAD			
SPRING	TX 77388	LOUISVILLE KY 40223-3808			
Phone (281) 528-9570	Fax (713) 434-5041	PHONE: (502) 394-2100 FAX: (502) 394-2249			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 07/31/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003990	Owner Information			
SPRING GROUP HOME		BETHESDA LUTHERAN COMMUNITIES INC			
17403 DEER CREEK		18937 K Z RD			
SPRING	TX 77379	CYPRESS TX 77433			
Phone (281) 576-4000	Fax (281) 351-5897	PHONE: (281) 516-4000 FAX: (281) 351-5897			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/25/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003892	Owner Information			
VERDECOVE COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
21023 VERDECOVE LANE		9901 LINN STATION ROAD			
SPRING	TX 77388-4342	LOUISVILLE KY 40223-3808			
Phone (281) 350-2836	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2285			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 105856	Owner Information			
CHOCTAW GROUP HOME		UCG CENTRAL TEXAS HOLDINGS LLC			
11719 COCONINO LANE		2006 N WHEELER			
TOMBALL	TX 77377	VICTORIA TX 77901			
Phone (281) 255-9006	Fax	PHONE: (830) 372-2920 FAX: (214) 723-5331			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 8	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 09/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	ICF/IID TEAM	Region	06 - HOUSTON
Facility Information:	Facility ID: 003817	Owner Information			
CHOCTAW GROUP HOME		UCG CENTRAL TEXAS HOLDINGS LLC			
11719 COCONINO LANE		2006 N WHEELER			
TOMBALL	TX 77377	VICTORIA TX 77901			
Phone (281) 255-9006	Fax (214) 723-5331	PHONE: (830) 372-2920 FAX: (214) 723-5331			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 8	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt:			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003607	Owner Information			
LIMERICK LANE		REACH UNLIMITED INC			
14119 LIMERICK LN		11832 MUELLER CEMETERY RD		,STE 200	
TOMBALL	TX 77375	CYPRESS TX		77429	
Phone (281) 351-6612	Fax (281) 357-4680	PHONE: (281) 213-2582	FAX: (281) 213-4545		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 06/13/2018			

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003986	Owner Information			
TOMBALL HILLS HOME		BETHESDA LUTHERAN COMMUNITIES INC			
31111 STELLA LN		18937 K Z RD			
TOMBALL	TX 77375	CYPRESS TX		77433	
Phone (281) 516-4000	Fax (281) 351-5897	PHONE: (281) 516-4000	FAX: (281) 351-5897		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 08/02/2018			

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003989	Owner Information			
WHITE RIVER		REACH UNLIMITED INC			
12335 WHITE RIVER		11832 MUELLER CEMETERY RD		,STE 200	
TOMBALL	TX 77375	CYPRESS TX		77429	
Phone (281) 351-9735	Fax (281) 351-5868	PHONE: (281) 213-2582	FAX: (281) 213-4545		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 01/18/2020			

County	HARRISON	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 007427	Owner Information			
PINE HAVEN		HARMONY LIVING CENTERS INC			
2402 PALATO DR		112 S WARD DR			
MARSHALL	TX 75670	LONGVIEW TX		75604	
Phone (903) 935-0468	Fax	PHONE: (903) 295-7391	FAX: (903) 295-7394		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 10/01/2018			

County	HARRISON	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 007440	Owner Information			
SUGAR CREEK		HARMONY LIVING CENTERS INC			
101 ROSEBUD DRIVE		112 S WARD DR			
MARSHALL	TX 75672	LONGVIEW TX		75604	
Phone (903) 935-0263	Fax (903) 934-8484	PHONE: (903) 295-7391	FAX: (903) 295-7394		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 10/01/2018			

County	HAYS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007542	Owner Information			
CEDAR VALLEY COMMUNITY RESIDENCE		D & S RESIDENTIAL SERVICES LP			
12800 DANIEL BOONE DR		8911 N CAPITAL OF TX HWY		,BLDG 1 STE 1300	
AUSTIN	TX 78737	AUSTIN TX		78759	
Phone (512) 288-4259	Fax (512) 327-5355	PHONE: (512) 327-2325	FAX: (512) 327-5355		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 07/01/2019			

County	HAYS		Reg Svcs:	ICF-IID (AUSTIN REGION)		Region	07 - AUSTIN		
Facility Information:	Facility ID:	104575			Owner Information				
SUN BONNET COMMUNITY RESIDENCE			D & S RESIDENTIAL SERVICES LP						
500 REBEL DRIVE			8911 N CAPITAL OF TX HWY						
BUDA			TX	78610			,BLDG 1 STE 1300		
Phone	(512) 312-2228	Fax	(512) 504-9639	AUSTIN TX		78759			
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PHONE:	(512) 327-2325	FAX:	(512) 327-5355
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:		ICF/IID		SERVICE TYPE	
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:		12/01/2019			

County	HAYS		Reg Svcs:	ICF-IID (AUSTIN REGION)		Region	07 - AUSTIN		
Facility Information:	Facility ID:	007300			Owner Information				
PEACHTREE COMMUNITY RESIDENCE			D & S RESIDENTIAL SERVICES LP						
101 SPRINGLAKE DR			8911 N CAPITAL OF TX HWY						
DRIPPING SPRINGS			TX	78620			,BLDG 1 STE 1300		
Phone	(512) 894-4230	Fax	(512) 327-7181	AUSTIN TX		78759			
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PHONE:	(512) 327-2325	FAX:	(512) 327-5355
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:		ICF/IID		SERVICE TYPE	
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:		12/01/2019			

County	HAYS		Reg Svcs:	ICF-IID (AUSTIN REGION)		Region	07 - AUSTIN		
Facility Information:	Facility ID:	007278			Owner Information				
LAGO VISTA			UCG CENTRAL TEXAS HOLDINGS LLC						
1129 LAGO VISTA			2006 N WHEELER						
SAN MARCOS			TX	78666			VICTORIA TX 77901		
Phone	(512) 392-0099	Fax	(214) 723-5331	AUSTIN TX		77901			
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PHONE:	(830) 372-2920	FAX:	(214) 723-5331
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:		ICF/IID		SERVICE TYPE	
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:		09/01/2019			

County	HAYS		Reg Svcs:	ICF-IID (AUSTIN REGION)		Region	07 - AUSTIN		
Facility Information:	Facility ID:	003919			Owner Information				
MOCKINGBIRD VILLA			UCG CENTRAL TEXAS HOLDINGS LLC						
1502 MOCKINGBIRD LN			2006 N WHEELER						
SAN MARCOS			TX	78666			VICTORIA TX 77901		
Phone	(512) 392-0088	Fax	(214) 723-5331	AUSTIN TX		77901			
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PHONE:	(830) 372-2920	FAX:	(214) 723-5331
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:		ICF/IID		SERVICE TYPE	
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:		09/01/2019			

County	HAYS		Reg Svcs:	ICF-IID (AUSTIN REGION)		Region	07 - AUSTIN		
Facility Information:	Facility ID:	003874			Owner Information				
RIO BLANCO			UCG CENTRAL TEXAS HOLDINGS LLC						
1010 E UHLAND RD			2006 N WHEELER						
SAN MARCOS			TX	78666			VICTORIA TX 77901		
Phone	(512) 392-0999	Fax	(214) 723-5331	AUSTIN TX		77901			
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PHONE:	(830) 372-2920	FAX:	(214) 723-5331
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:		ICF/IID		SERVICE TYPE	
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:		09/01/2019			

County	HAYS		Reg Svcs:	ICF-IID (AUSTIN REGION)		Region	07 - AUSTIN		
Facility Information:	Facility ID:	106850			Owner Information				
UCG - HARWOOD HOUSE			D & D CARE HOMES INC						
718 HARWOOD DR.			4100 INTERNATIONAL PLAZA						
SAN MARCOS			TX	78666			,SUITE 800		
Phone	(830) 629-4400	Fax		FT. WORTH TX		76109			
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6	PHONE:	(817) 447-2700	FAX:	(817) 447-3033
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:		ICF/IID		SERVICE TYPE	
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:		05/02/2020			

County	HENDERSON	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 010354			Owner Information	
ATHENS PLACE GROUP HOME				ANDREWS CENTER	
4875 FM 2709				2323 W FRONT ST	
ATHENS	TX 75751			TYLER	TX 75702
Phone (903) 675-6784	Fax			PHONE: (903) 567-1351	FAX: (903) 535-7384
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 8			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt:	

County	HIDALGO	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 003602			Owner Information	
207 ENFIELD				SOUTH TEXAS COMMUNITY LIVING CORP	
207 ENFIELD				18 AUGUSTA PINES DR	,STE 140 E
EDINBURG	TX 78539			SPRING	TX 77389
Phone (956) 631-0045	Fax (956) 631-6156			PHONE: (281) 351-1758	FAX: (210) 255-4500
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 03/01/2018	

County	HIDALGO	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 003956			Owner Information	
922 DIANA DRIVE				SOUTH TEXAS COMMUNITY LIVING CORP	
922 DIANA DRIVE				18 AUGUSTA PINES DR	,STE 140 E
EDINBURG	TX 78542			SPRING	TX 77389
Phone (956) 381-0026	Fax (956) 631-6156			PHONE: (281) 351-1758	FAX: (210) 255-4500
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 03/01/2020	

County	HIDALGO	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 007470			Owner Information	
32ND STREET NORTH GROUP HOME				SOUTH TEXAS COMMUNITY LIVING CORP	
5313 N 32ND ST				18 AUGUSTA PINES DR	,STE 140 E
MCALLEN	TX 78504			SPRING	TX 77389
Phone (956) 618-5745	Fax (956) 631-6156			PHONE: (281) 351-1758	FAX: (210) 255-4500
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 03/01/2020	

County	HIDALGO	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 007525			Owner Information	
6000 NORTH 26TH STREET				SOUTH TEXAS COMMUNITY LIVING CORP	
6000 N 26TH ST				18 AUGUSTA PINES DR	,STE 140 E
MCALLEN	TX 78504			SPRING	TX 77389
Phone (956) 631-3070	Fax (956) 631-6156			PHONE: (281) 351-1758	FAX: (210) 255-4500
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 03/01/2020	

County	HIDALGO	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 007507			Owner Information	
BRIARWOOD HOME				SOUTH TEXAS COMMUNITY LIVING CORP	
2406 BRIARWOOD				18 AUGUSTA PINES DR	,STE 140 E
MISSION	TX 78574			SPRING	TX 77389
Phone (956) 585-7192	Fax (956) 631-6156			PHONE: (281) 351-1758	FAX: (210) 255-4500
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 03/01/2020	

County	HOCKLEY	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:	Facility ID: 007455			Owner Information	
SUNRISE GROUP HOME				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
308 W 7TH STREET				9901 LINN STATION ROAD	
SUNDOWN	TX 79372			LOUISVILLE	KY 40223
Phone (806) 229-2153	Fax (806) 894-9605			PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 08/01/2019	

County	HOOD	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003779			Owner Information	
GRANBURY HOUSE				SOUTHERN CONCEPTS INC	
826 N. THORP SPRINGS ROAD				PO BOX 758	
GRANBURY	TX 76049			GRANBURY	TX 76048
Phone (817) 573-1559	Fax (817) 579-6611			PHONE: (817) 573-6922	FAX: (817) 579-6611
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 8			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 04/01/2020	

County	HOOD	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007382			Owner Information	
6TH AND MESQUITE				SOUTHERN CONCEPTS INC	
407 E SIXTH ST				PO BOX 758	
TOLAR	TX 76476			GRANBURY	TX 76048
Phone (254) 835-4977	Fax (817) 579-6611			PHONE: (817) 573-6922	FAX: (817) 579-6611
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 04/01/2018	

County	HOWARD	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 003792			Owner Information	
COMANCHE FLATS				D & S RESIDENTIAL SERVICES LP	
1315 BAYLOR				8911 N CAPITAL OF TX HWY	,BLDG 1 STE 1300
BIG SPRING	TX 79720			AUSTIN	TX 78759
Phone (432) 263-1408	Fax (512) 327-5355			PHONE: (512) 327-2325	FAX: (512) 327-5355
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 12/01/2019	

County	HUNT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003937			Owner Information	
BONNIE LEA GROUP HOME				LAKES REGIONAL MHMR CENTER	
3408 BONNIE LEA				400 AIRPORT RD	
GREENVILLE	TX 75402			TERRELL	TX 75160
Phone (903) 455-4476	Fax			PHONE: (972) 388-2000	FAX: (972) 563-5322
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt:	

County	HUNT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003669			Owner Information	
GARBER HOUSE				COMMUNITY ACCESS INC	
3506 GARBER CIR				2040 SHILOH RD	
GREENVILLE	TX 75402			TYLER	TX 75703
Phone (903) 454-3387	Fax (903) 450-4201			PHONE: (903) 579-8527	FAX: (903) 526-0881
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 04/01/2019	

County	HUNT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007205			Owner Information	
PATTI J HOUSE				COMMUNITY ACCESS INC	
100 PATTI J				2040 SHILOH RD	
GREENVILLE	TX 75402			TYLER	TX 75703
Phone (903) 454-2568	Fax (903) 450-4201			PHONE: (903) 579-8527	FAX: (903) 526-0881
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 04/01/2019	

County	HUNT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007549			Owner Information	
SAYLE STREET GROUP HOME				LAKES REGIONAL MHMR CENTER	
6518 SAYLE ST				400 AIRPORT RD	
GREENVILLE	TX 75402			TERRELL	TX 75160
Phone (903) 455-7270	Fax			PHONE: (972) 388-2000	FAX: (972) 563-5322
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
				License Exp Dt:	

County	HUNT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007282			Owner Information	
TERRY PLACE				COMMUNITY ACCESS INC	
2500 TERRY PL				2040 SHILOH RD	
GREENVILLE	TX 75402			TYLER	TX 75703
Phone (903) 455-4472	Fax (903) 454-3363			PHONE: (903) 579-8527	FAX: (903) 526-0881
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 04/01/2019	

County	HUNT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007460			Owner Information	
TURTLE CREEK FAMILY LIVING				LAKES REGIONAL MHMR CENTER	
505 ERMINE				400 AIRPORT RD	
GREENVILLE	TX 75401			TERRELL	TX 75160
Phone (903) 455-3987	Fax			PHONE: (972) 388-2000	FAX: (972) 563-5322
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
				License Exp Dt:	

County	HUNT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007543			Owner Information	
WINDY HILL GROUP HOME				LAKES REGIONAL MHMR CENTER	
5307 WINDY HILL RD				400 AIRPORT RD	
GREENVILLE	TX 75402			TERRELL	TX 75160
Phone (903) 454-7238	Fax			PHONE: (972) 388-2000	FAX: (972) 563-5322
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
				License Exp Dt:	

County	JASPER	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 007643			Owner Information	
WEST BAY HOUSE				THE BURKE CENTER	
46 WEST BAY				1111	
JASPER	TX 75951				TX
Phone (409) 384-2832	Fax			PHONE:	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
				License Exp Dt:	

County	JASPER	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 003906			Owner Information	
KIRBYVILLE GROUP HOME				THE BURKE CENTER	
703 W MARTIN LUTHER KING BLVD				4101 SOUTH MEDFORD DR	
KIRBYVILLE TX 75956				LUFKIN TX 75901	
Phone (409) 787-4132	Fax			PHONE:	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
				License Exp Dt:	

County	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 007457			Owner Information	
ADA LIVING CENTER				DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF BEAUMONT, LLC	
5010 ADA				4115 GALVESTON ROAD	
BEAUMONT TX 77706				HOUSTON TX 77017	
Phone (409) 832-4112	Fax (409) 832-6974			PHONE: (713) 475-2220	FAX: (713) 475-2212
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt:	01/01/2019

County	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 003965			Owner Information	
BUCKINGHAM GROUP HOME				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
3550 AUSTIN ST				9901 LINN STATION ROAD	
BEAUMONT TX 77706				LOUISVILLE KY 40223	
Phone (409) 892-6455	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt:	12/17/2019

County	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 003964			Owner Information	
CAMBRIDGE GROUP HOME				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
5155 CAMBRIDGE				9901 LINN STATION ROAD	
BEAUMONT TX 77707				LOUISVILLE KY 40223	
Phone (409) 838-4231	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt:	03/02/2018

County	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 003673			Owner Information	
CARNATION LIVING CENTER				DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF BEAUMONT, LLC	
6270 CARNATION				4115 GALVESTON ROAD	
BEAUMONT TX 77703				HOUSTON TX 77017	
Phone (409) 832-4112	Fax (409) 832-6974			PHONE: (713) 475-2220	FAX: (713) 475-2212
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt:	01/01/2019

County	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 007528			Owner Information	
CENTRAL HOUSE				ST GILES - BAYTOWN INC	
4655 HOLST ST				2203 KILGORE RD	
BEAUMONT TX 77708				BAYTOWN TX 77520	
Phone (409) 899-5646	Fax (409) 833-0229			PHONE: (281) 837-1942	FAX: (281) 427-0586
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt:	09/01/2019

County	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 003672	Owner Information			
CHERYL LIVING CENTER		DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF BEAUMONT, LLC			
3895 CHERYL DR		4115 GALVESTON ROAD			
BEAUMONT	TX 77706	HOUSTON TX 77017			
Phone (409) 832-4112	Fax (409) 832-6974	PHONE: (713) 475-2220 FAX: (713) 475-2212			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 003754	Owner Information			
COLE ROAD HOUSE		ST GILES - BAYTOWN INC			
5820 COLE RD		2203 KILGORE RD			
BEAUMONT	TX 77706	BAYTOWN TX 77520			
Phone (409) 896-2345	Fax (409) 835-0229	PHONE: (281) 837-1942 FAX: (281) 427-0586			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 09/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 003791	Owner Information			
HORIZON HOUSE		ST GILES - BAYTOWN INC			
4176 TREADWAY		2203 KILGORE RD			
BEAUMONT	TX 77706	BAYTOWN TX 77520			
Phone (409) 833-4550	Fax (409) 833-0229	PHONE: (281) 837-1942 FAX: (281) 427-0586			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 8	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 09/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 003689	Owner Information			
HUNTSMAN LIVING CENTER		DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF BEAUMONT, LLC			
535 CARNAHAN PLACE		4115 GALVESTON ROAD			
BEAUMONT	TX 77707	HOUSTON TX 77017			
Phone (409) 832-4112	Fax (409) 832-6974	PHONE: (713) 475-2220 FAX: (713) 475-2212			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 007307	Owner Information			
JERRY LIVING CENTER		DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF BEAUMONT, LLC			
4415 JERRY DR		4115 GALVESTON ROAD			
BEAUMONT	TX 77703	HOUSTON TX 77017			
Phone (409) 832-4112	Fax (409) 832-8044	PHONE: (713) 475-2220 FAX: (713) 475-2212			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 003966	Owner Information			
LANDIS GROUP HOME		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
9165 LANDIS		9901 LINN STATION ROAD			
BEAUMONT	TX 77707	LOUISVILLE KY 40223			
Phone (409) 860-4337	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2369			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 03/01/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 003674	Owner Information			
MCANELLY COMMUNITY HOME		DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF BEAUMONT, LLC			
5125 MCANELLY		4115 GALVESTON ROAD			
BEAUMONT	TX 77708	HOUSTON TX 77017			
Phone (409) 832-4112	Fax (409) 832-6974	PHONE: (713) 475-2220 FAX: (713) 475-2212			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 007405	Owner Information			
MEADOWICK LIVING CENTER		DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF BEAUMONT, LLC			
9640 MEADOWICK		4115 GALVESTON ROAD			
BEAUMONT	TX 77706	HOUSTON TX 77017			
Phone (409) 832-4112	Fax (409) 832-8044	PHONE: (713) 475-2220 FAX: (713) 475-2212			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 007326	Owner Information			
NORTH HOUSE		ST GILES - BAYTOWN INC			
8185 PARK N DR		2203 KILGORE RD			
BEAUMONT	TX 77708	BAYTOWN TX 77520			
Phone (409) 833-4550	Fax (409) 833-0229	PHONE: (281) 837-1942 FAX: (281) 427-0586			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 09/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 003690	Owner Information			
NOTTINGHAM LIVING CENTER		DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF BEAUMONT, LLC			
5965 NAVAJO TRAIL		4115 GALVESTON ROAD			
BEAUMONT	TX 77708	HOUSTON TX 77017			
Phone (409) 832-4112	Fax (409) 832-6974	PHONE: (713) 475-2220 FAX: (713) 475-2212			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 003692	Owner Information			
PINEHAVEN COMMUNITY HOME		DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF BEAUMONT, LLC			
10980 PINEHAVEN		4115 GALVESTON ROAD			
BEAUMONT	TX 77713	HOUSTON TX 77017			
Phone (409) 832-4112	Fax (409) 832-6974	PHONE: (713) 475-2220 FAX: (713) 475-2212			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 003693	Owner Information			
SAMS WAY LIVING CENTER		DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF BEAUMONT, LLC			
1760 SAMS WAY		4115 GALVESTON ROAD			
BEAUMONT	TX 77706	HOUSTON TX 77017			
Phone (409) 832-4112	Fax (409) 832-6974	PHONE: (713) 475-2220 FAX: (713) 475-2212			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 003967			Owner Information	
SAN DIEGO GROUP HOME				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
7585 SAN DIEGO				9901 LINN STATION ROAD	
BEAUMONT	TX 77708			LOUISVILLE	KY 40223
Phone (409) 892-1784	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 02/28/2020	

County	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 003677			Owner Information	
THOUSAND OAKS LIVING CENTER				DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF BEAUMONT, LLC	
8255 SHILOH				4115 GALVESTON ROAD	
BEAUMONT	TX 77706			HOUSTON	TX 77017
Phone (409) 832-4112	Fax (409) 832-6974			PHONE: (713) 475-2220	FAX: (713) 475-2212
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/01/2019	

County	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 007567			Owner Information	
GRIFFIN LIVING CENTER				DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF BEAUMONT, LLC	
3905 28TH STREET				4115 GALVESTON ROAD	
PORT ARTHUR	TX 77642			HOUSTON	TX 77017
Phone (409) 832-4112	Fax (409) 832-6974			PHONE: (713) 475-2220	FAX: (713) 475-2212
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/01/2019	

County	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 007574			Owner Information	
MODEL LIVING CENTER				DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF BEAUMONT, LLC	
411 5TH AVE				4115 GALVESTON ROAD	
PORT ARTHUR	TX 77642			HOUSTON	TX 77017
Phone (409) 832-4112	Fax (409) 832-6974			PHONE: (713) 475-2220	FAX: (713) 475-2212
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/01/2019	

County	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 007530			Owner Information	
SHERIDAN LIVING CENTER				DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF BEAUMONT, LLC	
2810 SHERIDAN				4115 GALVESTON ROAD	
PORT ARTHUR	TX 77640			HOUSTON	TX 77017
Phone (409) 983-3512	Fax (409) 832-6974			PHONE: (713) 475-2220	FAX: (713) 475-2212
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/01/2019	

County	JIM WELLS	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 007295			Owner Information	
GREEN ACRES				ASSISTED HOME CARE INC	
5927 S HWY 281				704 E FIRST ST	
ALICE	TX 78332			ALICE	TX 78332
Phone (888) 528-8750	Fax (361) 771-4311			PHONE: (888) 528-8750	FAX: (361) 881-4311
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 08/09/2018	

County	JIM WELLS	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 007309			Owner Information	
REYNOLDS HOME				ASSISTED HOME CARE INC	
601 N REYNOLDS				704 E FIRST ST	
ALICE	TX 78332			ALICE TX 78332	
Phone (361) 668-0126	Fax (361) 881-4311			PHONE: (888) 528-8750	FAX: (361) 881-4311
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 09/04/2019	

County	JOHNSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003929			Owner Information	
OAK HOUSE				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
208 ALVARADO OAKS DR				9901 LINN STATION ROAD	
ALVARADO	TX 76009			LOUISVILLE KY 40223	
Phone (817) 790-3476	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 10/01/2019	

County	JOHNSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003973			Owner Information	
EMERALD POINT				PECAN VALLEY MHMR REGION	
271 DIAMOND LN N				2101 WEST PEARL ST	
BURLESON	TX 76028			GRANBURY TX 76048	
Phone (817) 295-3056	Fax (817) 641-3619			PHONE:	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
				License Exp Dt:	

County	JOHNSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003961			Owner Information	
TURKEY PEAK				PECAN VALLEY MHMR REGION	
908 BROWNCREST				PO BOX 973	
BURLESON	TX 76028			STEPHENVILLE TX 76401	
Phone (817) 447-9104	Fax (817) 641-3619			PHONE:	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
				License Exp Dt:	

County	JOHNSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003822			Owner Information	
COMMUNITY LIVING CONCEPTS INC				COMMUNITY LIVING CONCEPTS INC	
2764 CO RD 310				110 E WALNUT ST	
CLEBURNE	TX 76031			KEENE TX 76059	
Phone (817) 774-3615	Fax (817) 558-9560			PHONE: (817) 558-9559	FAX: (817) 558-9560
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/09/2019	

County	JOHNSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007484			Owner Information	
FEATHERSTON				ROCK HOUSE SUPPORT SERVICES INC	
402 FEATHERSTON ST				2252 LINGLEVILLE ROAD HWY 8	
CLEBURNE	TX 76033			STEPHENVILLE TX 76401	
Phone (817) 645-4107	Fax (817) 556-3076			PHONE: (254) 968-4004	FAX: (254) 965-8653
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 11/01/2018	

County	JOHNSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003969			Owner Information	
HIGHLAND ESTATES				PECAN VALLEY MHMR REGION	
1018 HIGHLAND ROAD				2101 WEST PEARL ST	
CLEBURNE	TX 76031			GRANBURY TX	76048
Phone (817) 556-3720	Fax (817) 641-3619			PHONE:	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
				License Exp Dt:	

County	JOHNSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003962			Owner Information	
QUAIL PARK				PECAN VALLEY MHMR REGION	
805 QUAIL PARK LANE				2101 WEST PEARL ST	
CLEBURNE	TX 76031			GRANBURY TX	76048
Phone (817) 556-3720	Fax (817) 641-3619			PHONE:	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
				License Exp Dt:	

County	JOHNSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003970			Owner Information	
ROLLING ACRES				PECAN VALLEY MHMR REGION	
2901 FM 2280				2101 WEST PEARL ST	
CLEBURNE	TX 76031			GRANBURY TX	76048
Phone (817) 558-0642	Fax (817) 558-0952			PHONE:	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
				License Exp Dt:	

County	JOHNSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003924			Owner Information	
SPRUCE HOUSE				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
802 BERKLEY				9901 LINN STATION ROAD	
CLEBURNE	TX 76031			LOUISVILLE KY	40223
Phone (817) 517-5483	Fax (512) 338-4182			PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 12/03/2017	

County	JOHNSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003625			Owner Information	
BLUEBONNET RESIDENTIAL CENTER 1				SCP ACQUISITION PARTNERS LTD	
524 N PEARSON ST				4244 RIVER BIRCH RD	
GODLEY	TX 76044-3702			FORT WORTH TX	76137
Phone (817) 389-3442	Fax (817) 389-2354			PHONE: (817) 847-5741	FAX: (817) 847-5721
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 03/01/2020	

County	JOHNSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003622			Owner Information	
COMMUNITY LIVING CONCEPTS INC				COMMUNITY LIVING CONCEPTS INC	
802 DAVIS ST				110 E WALNUT ST	
GRANDVIEW	TX 76050			KEENE TX	76059
Phone (817) 558-9559	Fax (817) 558-9560			PHONE: (817) 558-9559	FAX: (817) 558-9560
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/09/2019	

County	JOHNSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003820			Owner Information	
COMMUNITY LIVING CONCEPTS INC				COMMUNITY LIVING CONCEPTS INC	
712 STADIUM DR				110 E WALNUT ST	
JOSHUA	TX 76058			KEENE TX 76059	
Phone (817) 774-3614		Fax (817) 558-9560		PHONE: (817) 558-9559	FAX: (817) 558-9560
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 01/09/2019	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	JOHNSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003972			Owner Information	
LITTLEBROOK ESTATES				PECAN VALLEY MHMR REGION	
105 LITTLEBROOK ROAD				2101 WEST PEARL ST	
JOSHUA	TX 76058			GRANBURY TX 76048	
Phone (817) 645-0634		Fax (817) 641-3619		PHONE:	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt:	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	JOHNSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007366			Owner Information	
COMMUNITY LIVING CONCEPTS INC				COMMUNITY LIVING CONCEPTS INC	
112 E WALNUT				110 E WALNUT ST	
KEENE	TX 76059			KEENE TX 76059	
Phone (817) 558-9559		Fax (817) 558-9560		PHONE: (817) 558-9559	FAX: (817) 558-9560
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 01/09/2019	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	JONES	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 003705			Owner Information	
SAGEBRUSH LIVING CENTER				SAGEBRUSH LIVING CENTER LTD	
1101 COLUMBIA ST				835 PROTON RD ,STE 108	
STAMFORD	TX 79553			SAN ANTONIO TX 78258	
Phone (325) 773-2791		Fax (325) 773-2448		PHONE: (210) 340-7155	FAX: (210) 340-4832
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 86		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 07/01/2019	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	LEE	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007583			Owner Information	
COUNTRY CLUB HOUSE				JAMES-LEACH INC	
1070 CR 227				339 W COLORADO	
GIDDINGS	TX 78942			LA GRANGE TX 78945	
Phone (979) 542-9315		Fax		PHONE: (979) 968-8502	FAX: (979) 968-5210
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 01/26/2020	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	LEE	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007523			Owner Information	
EDGEWOOD HOUSE				JAMES-LEACH INC	
486 EDGEWOOD				339 W COLORADO	
GIDDINGS	TX 78942			LA GRANGE TX 78945	
Phone (979) 542-0360		Fax		PHONE: (979) 968-8502	FAX: (979) 968-5210
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 04/08/2020	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	LEE	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007471			Owner Information	
JOEKEL HOUSE				JAMES-LEACH INC	
666 JOEKEL				339 W COLORADO	
GIDDINGS	TX 78942			LA GRANGE TX 78945	
Phone (979) 542-1877	Fax			PHONE: (979) 968-8502	FAX: (979) 968-5210
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 10/08/2019	

County	LEE	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007610			Owner Information	
WASHINGTON HOUSE				AUSTIN HEALTH RESOURCES INC	
259 CACTUS				9609 NEW FOUNDLAND CIRCLE	
GIDDINGS	TX 78942			AUSTIN TX 78758	
Phone (512) 835-8955	Fax (512) 835-8812			PHONE: (512) 835-8955	FAX: (512) 895-8812
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 06/01/2020	

County	LIBERTY	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003904			Owner Information	
LEE ST. COMMUNITY RESIDENCE				D & S RESIDENTIAL SERVICES LP	
802 LEE AVE				8911 N CAPITAL OF TX HWY ,BLDG 1 STE 1300	
CLEVELAND	TX 77327			AUSTIN TX 78759	
Phone (281) 592-3634	Fax (512) 327-5355			PHONE: (512) 327-2325	FAX: (512) 327-5355
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 09/01/2019	

County	LIBERTY	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003891			Owner Information	
LEGION ST. COMMUNITY RESIDENCE				D & S RESIDENTIAL SERVICES LP	
206 CHARLES BARKER				8911 N CAPITAL OF TX HWY ,BLDG 1 STE 1300	
CLEVELAND	TX 77327			AUSTIN TX 78759	
Phone (281) 592-6371	Fax (512) 327-5355			PHONE: (512) 327-2325	FAX: (512) 327-5355
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 09/01/2019	

County	LIBERTY	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003982			Owner Information	
AVENUE B COMMUNITY RESIDENCE				D & S RESIDENTIAL SERVICES LP	
201 AVENUE B				8911 N CAPITAL OF TX HWY ,BLDG 1 STE 1300	
LIBERTY	TX 77575			AUSTIN TX 78759	
Phone (409) 336-2629	Fax (512) 327-5355			PHONE: (512) 327-2325	FAX: (512) 327-5355
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 09/01/2019	

County	LIBERTY	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007566			Owner Information	
HOLLY ST. COMMUNITY RESIDENCE				D & S RESIDENTIAL SERVICES LP	
1420 HOLLY ST				8911 N CAPITAL OF TX HWY ,BLDG 1 STE 1300	
LIBERTY	TX 77575			AUSTIN TX 78759	
Phone (936) 336-3445	Fax (512) 327-5355			PHONE: (512) 327-2325	FAX: (512) 327-5355
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 09/01/2019	

County	LIMESTONE	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007512			Owner Information	
COMMERCE HOUSE				CEN-TEX ASSOCIATION FOR RETARDED CHILDREN	
811 E COMMERCE				PO DRAWER 750	
MEXIA	TX 76667			MEXIA TX 76667	
Phone (254) 562-6241	Fax (254) 562-5924			PHONE: (254) 562-2891	FAX: (254) 562-7656
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 03/02/2018	

County	LIMESTONE	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007513			Owner Information	
FAIRWAY HOUSE				CEN-TEX ASSOCIATION FOR RETARDED CHILDREN	
1000 FAIRWAY				PO DRAWER 750	
MEXIA	TX 76667			MEXIA TX 76667	
Phone (254) 562-7960	Fax (254) 562-5924			PHONE: (254) 562-2891	FAX: (254) 562-7656
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 03/03/2020	

County	LIMESTONE	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007105			Owner Information	
MEXIA STATE SUPPORTED LIVING CENTER				DADS	
HIGHWAY 171				PO BOX 12668	
MEXIA	TX 76667			AUSTIN TX 78711	
Phone (254) 562-2821	Fax (254) 562-1444			PHONE: (512) 454-3761	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 616			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE STATE SCHOOL/STATE CENTER
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt:	

County	LIMESTONE	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007586			Owner Information	
TYLER HOUSE				CEN-TEX ASSOCIATION FOR RETARDED CHILDREN	
830 E TYLER				PO DRAWER 750	
MEXIA	TX 76667			MEXIA TX 76667	
Phone (254) 562-6466	Fax (254) 562-5924			PHONE: (254) 562-2891	FAX: (254) 562-7656
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 02/05/2020	

County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:	Facility ID: 003908			Owner Information	
IDALOU COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
606 S MAIN				9901 LINN STATION ROAD	
IDALOU	TX 79329			LOUISVILLE KY 40223-3808	
Phone (806) 894-4902	Fax (806) 894-9605			PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 01/01/2019	

County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:	Facility ID: 007330			Owner Information	
23RD MANOR				ANNADALE MANOR INC.	
5423 23RD ST				7614 BAYLOR	
LUBBOCK	TX 79407			LUBBOCK TX 79416	
Phone (806) 632-6588	Fax			PHONE: (806) 632-6588	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 07/01/2019	

County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:	Facility ID: 003848			Owner Information	
41ST STREET COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
3615 41ST ST				9901 LINN STATION ROAD	
LUBBOCK	TX 79413			LOUISVILLE	KY 40223-3808
Phone (806) 894-4902	Fax (806) 894-9605			PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 01/01/2019	

County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:	Facility ID: 007344			Owner Information	
5735 DARTMOUTH DRIVE				CALAB INC	
5735 DARTMOUTH DR				3803 S ROBINSON RD	
LUBBOCK	TX 79416			GRAND PRAIRIE	TX 75052-1239
Phone (806) 793-6608	Fax (806) 767-0687			PHONE: (972) 263-2112	FAX: (972) 263-2115
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 09/01/2019	

County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:	Facility ID: 003679			Owner Information	
5TH STREET COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
7423 5TH ST				9901 LINN STATION ROAD	
LUBBOCK	TX 79416-6519			LOUISVILLE	KY 40223-3808
Phone (806) 894-4902	Fax (806) 894-9605			PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 01/01/2019	

County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:	Facility ID: 007447			Owner Information	
6603 DOVER AVENUE				CALAB INC	
6603 DOVER AVE				3803 S ROBINSON RD	
LUBBOCK	TX 79423			GRAND PRAIRIE	TX 75052-1239
Phone (806) 767-0685	Fax (806) 767-0687			PHONE: (972) 263-2112	FAX: (972) 263-2115
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 09/01/2019	

County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:	Facility ID: 007448			Owner Information	
7409 RICHMOND AVENUE				CALAB INC	
7409 RICHMOND AVE				3803 S ROBINSON RD	
LUBBOCK	TX 79424			GRAND PRAIRIE	TX 75052-1239
Phone (806) 795-8920	Fax (806) 767-0687			PHONE: (972) 263-2112	FAX: (972) 263-2115
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 09/01/2019	

County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:	Facility ID: 003881			Owner Information	
97TH STREET COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
2404 97TH ST				9901 LINN STATION ROAD	
LUBBOCK	TX 79423-4406			LOUISVILLE	KY 40223-3808
Phone (806) 894-4902	Fax (806) 894-9605			PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 01/01/2019	

County **LUBBOCK** Reg Svcs: HIGH PLAINS ICF/MR Region 01 - LUBBOCK

Facility Information: Facility ID: 007201 **Owner Information**
 AGNES DENT HOMES I CONNIE FULBRIGHT
 4805 16TH ST 4805 16TH ST
 LUBBOCK TX 79416 LUBBOCK TX 79416
Phone (806) 797-3660 **Fax** (806) 797-6681 **PHONE:** (806) 797-3660 **FAX:** (806) 797-6681
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 04/01/2020

County **LUBBOCK** Reg Svcs: HIGH PLAINS ICF/MR Region 01 - LUBBOCK

Facility Information: Facility ID: 007350 **Owner Information**
 B & B SERVICES BRANDIE FULBRIGHT
 5322 22ND ST 5322 22ND STREET
 LUBBOCK TX 79407 LUBBOCK TX 79407
Phone (210) 268-7759 **Fax** **PHONE:** (210) 268-1159 **FAX:** (361) 998-9748
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 10/01/2018

County **LUBBOCK** Reg Svcs: HIGH PLAINS ICF/MR Region 01 - LUBBOCK

Facility Information: Facility ID: 007334 **Owner Information**
 CAPROCK ROCK HOUSE SUPPORT SERVICES INC
 6201 LYNNHAVEN DR 2252 LINGLEVILLE ROAD HWY 8
 LUBBOCK TX 79413 STEPHENVILLE TX 76401
Phone (806) 799-1948 **Fax** (806) 785-7587 **PHONE:** (254) 968-4004 **FAX:** (254) 965-8653
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 10/01/2018

County **LUBBOCK** Reg Svcs: HIGH PLAINS ICF/MR Region 01 - LUBBOCK

Facility Information: Facility ID: 007443 **Owner Information**
 HOFFMAN HOUSE WESTVIEW RESIDENTIAL SERVICES INC
 3412 85TH ST 3104 43RD
 LUBBOCK TX 79423 LUBBOCK TX 79413
Phone (806) 795-9632 **Fax** (806) 771-7609 **PHONE:** (806) 781-1898 **FAX:** (806) 785-4684
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 09/01/2018

County **LUBBOCK** Reg Svcs: HIGH PLAINS ICF/MR Region 01 - LUBBOCK

Facility Information: Facility ID: 003872 **Owner Information**
 JUNEAU COMMUNITY HOME EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP
 2502 JUNEAU AVE 9901 LINN STATION ROAD
 LUBBOCK TX 79407 LOUISVILLE KY 40223-3808
Phone (806) 894-4902 **Fax** (806) 894-9605 **PHONE:** (502) 394-2100 **FAX:** (502) 394-2285
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 01/01/2019

County **LUBBOCK** Reg Svcs: HIGH PLAINS ICF/MR Region 01 - LUBBOCK

Facility Information: Facility ID: 003807 **Owner Information**
 LUBBOCK REGIONAL M H M R 2 EAST LUBBOCK REGIONAL M H M R CENTER
 8405 19TH STREET 1210 TEXAS AVENUE
 LUBBOCK TX 79407 LUBBOCK TX 79407
Phone (806) 792-1359 **Fax** (806) 741-0913 **PHONE:** **FAX:**
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** GOVERNMENT BASED
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:**

County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:	Facility ID: 003704	Owner Information			
LUBBOCK REGIONAL MHMR CENTER 1 30TH ST		LUBBOCK REGIONAL M H M R CENTER			
1711 30TH ST		1210 TEXAS AVENUE			
LUBBOCK	TX 79408	LUBBOCK TX 79407			
Phone (806) 799-1998	Fax	PHONE:		FAX:	
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID		
Cert Alzh Capacity: 0	TITLE19: 0	SERVICE TYPE GOVERNMENT BASED			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt:			

County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:	Facility ID: 007654	Owner Information			
LUBBOCK REGIONAL MHMR CENTER 3 CENTRAL		LUBBOCK REGIONAL M H M R CENTER			
6302 34TH ST		1210 TEXAS AVENUE			
LUBBOCK	TX 79407	LUBBOCK TX 79407			
Phone (806) 791-5408	Fax	PHONE:		FAX:	
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID		
Cert Alzh Capacity: 0	TITLE19: 0	SERVICE TYPE GOVERNMENT BASED			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt:			

County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:	Facility ID: 007107	Owner Information			
LUBBOCK STATE SUPPORTED LIVING CENTER		DADS			
3401 N UNIVERSITY AVE		PO BOX 12668			
LUBBOCK	TX 79415	AUSTIN TX 78711			
Phone (806) 763-7041	Fax	PHONE: (512) 454-3761		FAX:	
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 436	PROGRAM TYPE: ICF/IID		
Cert Alzh Capacity: 0	TITLE19: 0	SERVICE TYPE STATE SCHOOL/STATE CENTER			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt:			

County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:	Facility ID: 003917	Owner Information			
MOSAIC		MOSAIC			
3425 GRINNELL		2245 MIDWAY ROAD ,STE 300			
LUBBOCK	TX 79415	CARROLLTON TX 75006			
Phone (806) 794-9334	Fax (806) 794-9337	PHONE: (972) 866-9989		FAX: (972) 991-0834	
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID		
Cert Alzh Capacity: 0	TITLE19: 0	SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 01/01/2019			

County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:	Facility ID: 003951	Owner Information			
MOSAIC		MOSAIC			
5814 6TH ST		2245 MIDWAY ROAD ,STE 300			
LUBBOCK	TX 79416	CARROLLTON TX 75006			
Phone (806) 794-9334	Fax (806) 794-9337	PHONE: (972) 866-9989		FAX: (972) 991-0834	
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID		
Cert Alzh Capacity: 0	TITLE19: 0	SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 01/01/2019			

County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:	Facility ID: 007591	Owner Information			
MOSAIC		MOSAIC			
3419 54TH ST		2245 MIDWAY ROAD ,STE 300			
LUBBOCK	TX 79412	CARROLLTON TX 75006			
Phone (806) 794-9334	Fax (806) 794-9337	PHONE: (972) 866-9989		FAX: (972) 991-0834	
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID		
Cert Alzh Capacity: 0	TITLE19: 0	SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 01/01/2019			

County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:	Facility ID: 007491	Owner Information			
ANNADALE MANOR INC. 10702 COUNTY RD 1300 WOLFFORTH	TX 79382	ANNADALE MANOR INC. 7614 BAYLOR LUBBOCK TX 79416			
Phone (806) 866-9186	Fax (806) 924-7773	PHONE: (806) 632-6588	FAX:		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0		License Exp Dt: 04/01/2020		
PRIVATE Beds: 0	TITLE 18/19: 0				

County	MADISON	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007557	Owner Information			
MOSAIC 103 E VISER MADISONVILLE	TX 77864	MOSAIC 2245 MIDWAY ROAD ,STE 300 CARROLLTON TX 75006			
Phone (979) 823-7622	Fax (979) 775-5733	PHONE: (972) 866-9989	FAX: (972) 991-0834		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0		License Exp Dt: 01/01/2019		
PRIVATE Beds: 0	TITLE 18/19: 0				

County	MCLENNAN	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 003826	Owner Information			
NORTHWEST WACO LIVING RESIDENCE 2323 N 39TH ST WACO	TX 76708	HEART OF TEXAS REGIONAL MHMR CENTER 110 S 12TH ST WACO TX 76703			
Phone (254) 752-7230	Fax (254) 752-1931	PHONE:	FAX:		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 8	PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED	
Cert Alzh Capacity: 0	TITLE19: 0		License Exp Dt:		
PRIVATE Beds: 0	TITLE 18/19: 0				

County	MCLENNAN	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007628	Owner Information			
WEST WARD GROUP HOME 108 WEST WARD WACO	TX 76706	HEART OF TEXAS REGIONAL MHMR CENTER 110 S 12TH ST WACO TX 76703			
Phone (254) 662-6144	Fax	PHONE:	FAX:		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED	
Cert Alzh Capacity: 0	TITLE19: 0		License Exp Dt:		
PRIVATE Beds: 0	TITLE 18/19: 0				

County	MEDINA	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007327	Owner Information			
28TH STREET COMMUNITY HOME 1506 28TH ST HONDO	TX 78861-3208	EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP 9901 LINN STATION ROAD LOUISVILLE KY 40223-3808			
Phone (830) 741-4624	Fax	PHONE: (502) 394-2100	FAX: (502) 394-2285		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0		License Exp Dt: 01/01/2019		
PRIVATE Beds: 0	TITLE 18/19: 0				

County	MIDLAND	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 003959	Owner Information			
BARNEY GREATHOUSE MEMORIAL HOME 3005 W GOLFCOURSE RD MIDLAND	TX 79701	MARC INC 2701 NORTH A ST MIDLAND TX 79705			
Phone (432) 695-9028	Fax (432) 695-9909	PHONE: (432) 695-9901	FAX:		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0		License Exp Dt: 01/23/2020		
PRIVATE Beds: 0	TITLE 18/19: 0				

County	MIDLAND	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 007279			Owner Information	
CAMARIE PLACE				MARC INC	
2302 CAMARIE				2701 NORTH A ST	
MIDLAND	TX 79705			MIDLAND TX	79705
Phone (432) 695-9919	Fax (432) 695-9909			PHONE: (432) 695-9901	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 06/25/2020	

County	MIDLAND	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 003984			Owner Information	
LINDORA WAY				MARC INC	
2000 LINDORA WAY				2701 NORTH A ST	
MIDLAND	TX 79707			MIDLAND TX	79705
Phone (432) 695-9035	Fax (432) 695-9909			PHONE: (432) 695-9901	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 12/13/2019	

County	MIDLAND	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 003819			Owner Information	
MARCWOOD ONE				MARC INC	
2801 NORTH A ST				2701 NORTH A ST	
MIDLAND	TX 79705			MIDLAND TX	79705
Phone (432) 695-9901	Fax (432) 695-9909			PHONE: (432) 695-9901	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 11/01/2019	

County	MIDLAND	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 003787			Owner Information	
MARCWOOD TWO				MARC INC	
2901 NORTH A ST				2701 NORTH A ST	
MIDLAND	TX 79705			MIDLAND TX	79705
Phone (432) 695-9901	Fax (432) 695-9909			PHONE: (432) 695-9901	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 11/01/2019	

County	MIDLAND	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 007243			Owner Information	
ROCK HOUSE MICHIGAN				ROCK HOUSE SUPPORT SERVICES INC	
811 W MICHIGAN				2252 LINGLEVILLE ROAD HWY 8	
MIDLAND	TX 79701			STEPHENVILLE TX	76401
Phone (432) 682-1424	Fax (432) 685-6167			PHONE: (254) 968-4004	FAX: (254) 965-8653
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 10/01/2018	

County	MIDLAND	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 007618			Owner Information	
ROCK HOUSE SPENCE				ROCK HOUSE SUPPORT SERVICES INC	
4403 SPENCE				2252 LINGLEVILLE ROAD HWY 8	
MIDLAND	TX 79707			STEPHENVILLE TX	76401
Phone (432) 699-4128	Fax (432) 682-6167			PHONE: (254) 968-4004	FAX: (254) 965-8653
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 10/01/2018	

County	MIDLAND	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 003642			Owner Information	
ROCK HOUSE TRAIL				ROCK HOUSE SUPPORT SERVICES INC	
2806 ARROWHEAD TRAILS				2252 LINGLEVILLE ROAD HWY 8	
MIDLAND	TX 79705			STEPHENVILLE TX 76401	
Phone (432) 694-8351	Fax (432) 682-6167			PHONE: (254) 968-4004	FAX: (254) 965-8653
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 10/01/2018	

County	MIDLAND	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 003657			Owner Information	
ROCK HOUSE TREVINO				ROCK HOUSE SUPPORT SERVICES INC	
4314 TREVINO				2252 LINGLEVILLE ROAD HWY 8	
MIDLAND	TX 79705			STEPHENVILLE TX 76401	
Phone (432) 685-5057	Fax (432) 682-6167			PHONE: (254) 968-4004	FAX: (254) 965-8653
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 10/01/2018	

County	MIDLAND	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 003985			Owner Information	
SAINT ANDREWS				MARC INC	
4512 SAINT ANDREWS				2701 NORTH A ST	
MIDLAND	TX 79707			MIDLAND TX 79705	
Phone (432) 695-9920	Fax (432) 695-9909			PHONE: (432) 695-9901	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 12/13/2019	

County	MIDLAND	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 007612			Owner Information	
WEST ROCK				ROCK HOUSE SUPPORT SERVICES INC	
708 DEVONIAN				2252 LINGLEVILLE ROAD HWY 8	
MIDLAND	TX 79703			STEPHENVILLE TX 76401	
Phone (432) 697-8320	Fax (432) 682-6167			PHONE: (254) 968-4004	FAX: (254) 965-8653
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 10/01/2018	

County	MILLS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007625			Owner Information	
JOHNSON HOMES				TDAF LLC	
210 CR 112				PO BOX 27	
GOLDTHWAITE	TX 76844			GOLDTHWAITE TX 76844	
Phone (325) 985-3544	Fax (325) 985-3575			PHONE: (325) 985-3544	FAX: (325) 985-3575
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 04/10/2020	

County	MONTGOMERY	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003882			Owner Information	
NORTH THOMPSON COMMUNITY RESIDENCE				D & S RESIDENTIAL SERVICES LP	
2223 N THOMPSON ST				8911 N CAPITAL OF TX HWY	.BLDG 1 STE 1300
CONROE	TX 77303			AUSTIN TX 78759	
Phone (936) 760-3659	Fax (512) 327-6355			PHONE: (512) 327-2325	FAX: (512) 327-5355
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 09/01/2019	

County	MONTGOMERY	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003905			Owner Information	
PATRICIA ST COMMUNITY RESIDENCE				D & S RESIDENTIAL SERVICES LP	
104 PATRICIA ST				8911 N CAPITAL OF TX HWY	,BLDG 1 STE 1300
CONROE	TX 77301			AUSTIN TX	78759
Phone (936) 760-4074	Fax (512) 327-5355			PHONE: (512) 327-2325	FAX: (512) 327-5355
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 09/01/2019	

County	MONTGOMERY	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003883			Owner Information	
SHENANDOAH COMMUNITY RESIDENCE				D & S RESIDENTIAL SERVICES LP	
28902 ENCHANTED DRIVE				8911 N CAPITAL OF TX HWY	,BLDG 1 STE 1300
SHENANDOAH	TX 77381			AUSTIN TX	78759
Phone (281) 292-3712	Fax (512) 327-5355			PHONE: (512) 327-2325	FAX: (512) 327-5355
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 09/01/2019	

County	NACOGDOCHES	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 007658			Owner Information	
NACOGDOCHES HOUSE				THE BURKE CENTER	
2712 S E STALLINGS DR				4101 SOUTH MEDFORD DR	
NACOGDOCHES	TX 75961			LUFKIN TX	75901
Phone (936) 564-3147	Fax			PHONE:	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 12			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt:	

County	NAVARRO	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003773			Owner Information	
45TH STREET I COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
1348 N 45TH ST				9901 LINN STATION ROAD	
CORSICANA	TX 75110-1733			LOUISVILLE KY	40223-3808
Phone (903) 872-2200	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 01/01/2019	

County	NAVARRO	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003836			Owner Information	
45TH STREET I I COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
1348 1/2 N 45TH ST				9901 LINN STATION ROAD	
CORSICANA	TX 75110-1733			LOUISVILLE KY	40223-3808
Phone (903) 872-2200	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 01/01/2019	

County	NAVARRO	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007222			Owner Information	
BOYD COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
109 BOYD AVE				9901 LINN STATION ROAD	
CORSICANA	TX 75110-1937			LOUISVILLE KY	40223-3808
Phone (903) 872-8074	Fax (817) 549-6505			PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 01/01/2019	

County	NAVARRO	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007445	Owner Information			
DONAHO HOUSE		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
1516 W 5TH AVE		9901 LINN STATION ROAD			
CORSICANA	TX 75110-4207	LOUISVILLE KY 40223-3808			
Phone (903) 872-9568	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2285			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	NAVARRO	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007217	Owner Information			
EDWARDS COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
701 W 4TH AVE		9901 LINN STATION ROAD			
CORSICANA	TX 75110-4551	LOUISVILLE KY 40223-3808			
Phone (903) 872-8006	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2285			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	NAVARRO	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007335	Owner Information			
HARMONY HOUSE I V		HARMONY LIVING CENTERS INC			
720 SE CR 0025		112 S WARD DR			
CORSICANA	TX 75110	LONGVIEW TX 75604			
Phone (903) 872-2423	Fax (903) 295-7394	PHONE: (903) 295-7391 FAX: (903) 295-7394			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 08/09/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	NAVARRO	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007315	Owner Information			
HARMONY HOUSE III		HARMONY LIVING CENTERS INC			
509 LAKEWOOD		112 S WARD DR			
CORSICANA	TX 75110	LONGVIEW TX 75604			
Phone (903) 872-1234	Fax (903) 872-3864	PHONE: (903) 295-7391 FAX: (903) 295-7394			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 09/11/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	NAVARRO	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007454	Owner Information			
HARMONY HOUSE V I		HARMONY LIVING CENTERS INC			
430 MADISON AVE		112 S WARD DR			
CORSICANA	TX 75110	LONGVIEW TX 75604			
Phone (903) 874-2661	Fax (903) 295-7394	PHONE: (903) 295-7391 FAX: (903) 295-7394			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 08/25/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	NAVARRO	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007506	Owner Information			
OAKLAWN HOUSE		CEN-TEX ASSOCIATION FOR RETARDED CHILDREN			
1102 OAKLAWN		PO DRAWER 750			
CORSICANA	TX 75110	MEXIA TX 76667			
Phone (903) 872-6083	Fax (903) 872-0895	PHONE: (254) 562-2891 FAX: (254) 562-7656			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 02/03/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	NAVARRO	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007577	Owner Information			
SUNSET ACRES HOUSE		CEN-TEX ASSOCIATION FOR RETARDED CHILDREN			
5835 NW COUNTY RD 2091		PO DRAWER 750			
CORSICANA	TX 75110	MEXIA TX 76667			
Phone (903) 872-6138	Fax (903) 872-0895	PHONE: (254) 562-2891 FAX: (254) 562-7656			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 12/14/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	NAVARRO	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007519	Owner Information			
TAMMY HOUSE		CEN-TEX ASSOCIATION FOR RETARDED CHILDREN			
1312 TAMMY		PO DRAWER 750			
CORSICANA	TX 75110	MEXIA TX 76667			
Phone (903) 872-6086	Fax (903) 872-0895	PHONE: (254) 562-2891 FAX: (254) 562-7656			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 03/23/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	NEWTON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 003996	Owner Information			
NEWTON GROUP HOME		THE BURKE CENTER			
700 MCMAHON		4101 SOUTH MEDFORD DR			
NEWTON	TX 75966	LUFKIN TX 75901			
Phone (409) 379-3335	Fax	PHONE: FAX:			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE GOVERNMENT BASED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt:			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	NOLAN	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 007225	Owner Information			
HACKBERRY HOUSE		LIVING RESOURCES LLC			
1916 LAKEVIEW		3125 S 27TH ST			
SWEETWATER	TX 79556	ABILENE TX 79605			
Phone (325) 235-2568	Fax (325) 235-1364	PHONE: (325) 695-2112 FAX: (325) 794-0023			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/23/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	NOLAN	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 007657	Owner Information			
WALNUT CREEK HOME		LIVING RESOURCES LLC			
301 W AVE D		3125 S 27TH ST			
SWEETWATER	TX 79556	ABILENE TX 79605			
Phone (325) 235-2568	Fax (325) 235-1364	PHONE: (325) 695-2112 FAX: (325) 794-0023			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	NUECES	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 007511	Owner Information			
BROCKHAMPTON HOUSE		LMS CONCEPTS INC			
6102 BROCKHAMPTON		PO BOX 270755			
CORPUS CHRISTI	TX 78414	CORPUS CHRISTI TX 78427-0755			
Phone (361) 992-7763	Fax (361) 852-2181	PHONE: (361) 854-9332 FAX: (361) 852-2181			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 02/12/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	NUECES	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 007124	Owner Information			
CASTLE RIVER		DADS			
4013 CASTLE RIDGE		PO BOX 12668			
CORPUS CHRISTI	TX 78410	AUSTIN TX 78711			
Phone (361) 241-9526	Fax	PHONE: (512) 454-3761	FAX:		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 5	PROGRAM TYPE: ICF/IID	SERVICE TYPE: STATE SCHOOL/STATE CENTER	
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt:			

County	NUECES	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 007111	Owner Information			
CORPUS CHRISTI STATE SUPPORTED LIVING CENTER		DADS			
902 AIRPORT RD		PO BOX 12668			
CORPUS CHRISTI	TX 78405	AUSTIN TX 78711			
Phone (361) 888-5301	Fax (361) 844-7621	PHONE: (512) 454-3761	FAX:		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 432	PROGRAM TYPE: ICF/IID	SERVICE TYPE: STATE SCHOOL/STATE CENTER	
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt:			

County	NUECES	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 007581	Owner Information			
CROSSGATE HOUSE		ANCHOR HABILITATION SERVICES LLC			
5502 CROSSGATE N		18443 REDLAND RD			
CORPUS CHRISTI	TX 78413	SAN ANTONIO TX 78259-3571			
Phone (361) 657-0247	Fax (361) 657-0250	PHONE: (361) 657-0247	FAX: (361) 657-0250		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE: PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 09/01/2018			

County	NUECES	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 003660	Owner Information			
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
5310 WENTWORTH		9901 LINN STATION ROAD			
CORPUS CHRISTI	TX 78413	LOUISVILLE KY 40223			
Phone (361) 906-1005	Fax	PHONE: (502) 394-2100	FAX: (502) 394-2369		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE: PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 08/01/2019			

County	NUECES	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 007258	Owner Information			
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
4913 EIDER		9901 LINN STATION ROAD			
CORPUS CHRISTI	TX 78413	LOUISVILLE KY 40223			
Phone (361) 994-9103	Fax	PHONE: (502) 394-2100	FAX: (502) 394-2369		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE: PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 08/01/2019			

County	NUECES	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 003664	Owner Information			
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
9230 EVENING STAR		9901 LINN STATION ROAD			
CORPUS CHRISTI	TX 78410	LOUISVILLE KY 40223			
Phone (361) 241-0365	Fax	PHONE: (502) 394-2100	FAX: (502) 394-2369		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE: PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 08/01/2019			

County	NUECES	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 003858	Owner Information			
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
4038 KILLARMET		9901 LINN STATION ROAD			
CORPUS CHRISTI TX 78413		LOUISVILLE KY 40223			
Phone (361) 852-3928	Fax	PHONE: (502) 394-2100	FAX: (502) 394-2369		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 08/01/2019			

County	NUECES	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 007265	Owner Information			
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
409 SHERIDAN		9901 LINN STATION ROAD			
CORPUS CHRISTI TX 78412		LOUISVILLE KY 40223			
Phone (361) 993-2950	Fax	PHONE: (502) 394-2100	FAX: (502) 394-2369		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 08/01/2019			

County	NUECES	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 003659	Owner Information			
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
5502 BOWIE		9901 LINN STATION ROAD			
CORPUS CHRISTI TX 78415-1965		LOUISVILLE KY 40223			
Phone (361) 854-7333	Fax	PHONE: (502) 394-2100	FAX: (502) 394-2369		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 08/27/2019			

County	NUECES	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 007433	Owner Information			
EDUCARE COMMUNITY LIVING CORPORATION-TEXAS		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
4053 MOUNTAIN VIEW		9901 LINN STATION ROAD			
CORPUS CHRISTI TX 78410		LOUISVILLE KY 40223			
Phone (361) 241-9921	Fax	PHONE: (502) 394-2100	FAX: (502) 394-2369		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 09/01/2019			

County	NUECES	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 007363	Owner Information			
EDUCARE COMMUNITY LIVING CORPORATION-TEXAS		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
9329 MOON LIGHT DR		9901 LINN STATION ROAD			
CORPUS CHRISTI TX 78409		LOUISVILLE KY 40223			
Phone (361) 242-1641	Fax	PHONE: (502) 394-2100	FAX: (502) 394-2369		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 09/01/2019			

County	NUECES	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 105083	Owner Information			
NELON		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
11730 NELON		9901 LINN STATION ROAD			
CORPUS CHRISTI TX 78414		LOUISVILLE KY 40223			
Phone (361) 241-7077	Fax (361) 854-7578	PHONE: (502) 394-2100	FAX: (502) 394-2369		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 08/01/2019			

County	NUECES	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 007123			Owner Information	
RIVER FOREST				DADS	
5021 CALALLEN DRIVE				PO BOX 12668	
CORPUS CHRISTI	TX 78410			AUSTIN TX 78711	
Phone (361) 241-5312	Fax			PHONE: (512) 454-3761	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 5			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE: STATE SCHOOL/STATE CENTER
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt:	

County	NUECES	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 007391			Owner Information	
WINTERPARK HOUSE				ANCHOR HABILITATION SERVICES LLC	
7022 WINTERPARK				18443 REDLAND RD	
CORPUS CHRISTI	TX 78413			SAN ANTONIO TX 78259-3571	
Phone (361) 657-0247	Fax (361) 657-0250			PHONE: (361) 657-0247	FAX: (361) 657-0250
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE: PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 09/01/2018	

County	ORANGE	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 003871			Owner Information	
CYPRESS STREET GROUP HOME				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
1302 W CYPRESS AVE				9901 LINN STATION ROAD	
ORANGE	TX 77630			LOUISVILLE KY 40223	
Phone (409) 882-9442	Fax (409) 882-9900			PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE: PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 08/01/2019	

County	ORANGE	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 007482			Owner Information	
WESTMONT COMMUNITY HOME				DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF BEAUMONT, LLC	
2204 N 24TH STREET				4115 GALVESTON ROAD	
ORANGE	TX 77630			HOUSTON TX 77017	
Phone (409) 832-4112	Fax (409) 832-6974			PHONE: (713) 475-2220	FAX: (713) 475-2212
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE: PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 01/01/2019	

County	PALO PINTO	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003946			Owner Information	
NORTHWEST 23RD STREET				PECAN VALLEY MHMR REGION	
202 NW 23RD ST				PO BOX 973	
MINERAL WELLS	TX 76067			STEPHENVILLE TX 76401	
Phone (817) 328-1508	Fax (817) 965-7806			PHONE:	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE: GOVERNMENT BASED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt:	

County	PARKER	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007223			Owner Information	
ELM COURT				MAINSTREAM HABILITATION SERVICES OF TEXAS INC	
928 ELM COURT				1649 SE PARKWAY	
AZLE	TX 76020			AZLE TX 76020	
Phone (817) 270-2747	Fax (817) 270-1477			PHONE: (817) 270-2747	FAX: (817) 270-1477
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE: PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 07/11/2019	

County	PARKER	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007209	Owner Information			
TANGLEWOOD		MAINSTREAM HABILITATION SERVICES OF TEXAS INC			
1613 TANGLEWOOD		1649 SE PARKWAY			
AZLE	TX 76020	AZLE TX 76020			
Phone (817) 270-2747	Fax (817) 270-1477	PHONE: (817) 270-2747 FAX: (817) 270-1477			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 07/11/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	PARKER	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003610	Owner Information			
MILL STREET		PECAN VALLEY MHMR REGION			
1212 S MILL ST		PO BOX 973			
WEATHERFORD	TX 76086	STEPHENVILLE TX 76401			
Phone (817) 598-0559	Fax (817) 599-7636	PHONE: FAX:			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE GOVERNMENT BASED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt:			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	POLK	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 007537	Owner Information			
NEW DAY HOUSE		NEW DAY INTERMEDIATE CARE LLC			
4530 HWY 190 E		11722 GRAY FOREST TRAIL			
LIVINGSTON	TX 77351	TOMBALL TX 77377			
Phone (936) 327-7075	Fax (936) 327-5143	PHONE: (832) 860-8417 FAX: (832) 559-8552			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 09/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	RANDALL	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:	Facility ID: 007613	Owner Information			
ANDOVER		ADVO COMPANIES INC			
7006 ANDOVER		PO BOX 51744			
AMARILLO	TX 79109	AMARILLO TX 79159			
Phone (806) 342-0600	Fax (806) 342-0900	PHONE: (806) 342-0600 FAX: (806) 342-0900			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 06/29/2016			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	RANDALL	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:	Facility ID: 007311	Owner Information			
AVONDALE		ADVO COMPANIES INC			
6911 VISION		PO BOX 51744			
AMARILLO	TX 79119	AMARILLO TX 79159			
Phone (806) 342-0600	Fax (806) 342-0900	PHONE: (806) 342-0600 FAX: (806) 342-0900			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/30/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	RANDALL	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:	Facility ID: 007619	Owner Information			
EL PASO		ADVO COMPANIES INC			
8511 EL PASO DR		PO BOX 51744			
AMARILLO	TX 79118	AMARILLO TX 79159			
Phone (806) 342-0600	Fax (806) 342-0900	PHONE: (806) 342-0600 FAX: (806) 342-0900			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 08/09/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	RANDALL	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:	Facility ID: 007273			Owner Information	
HAMPTON				ADVO COMPANIES INC	
6004 HAMPTON				PO BOX 51744	
AMARILLO	TX 79109			AMARILLO TX 79159	
Phone (806) 342-0600	Fax (806) 342-0900			PHONE: (806) 342-0600	FAX: (806) 342-0900
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 06/03/2020	

County	RANDALL	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:	Facility ID: 007271			Owner Information	
MARY DELL				ADVO COMPANIES INC	
5718 MARY DELL				PO BOX 51744	
AMARILLO	TX 79109			AMARILLO TX 79159	
Phone (806) 342-0600	Fax (806) 342-0900			PHONE: (806) 342-0600	FAX: (806) 342-0900
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 06/23/2018	

County	RANDALL	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:	Facility ID: 007490			Owner Information	
SIMPSON				ADVO COMPANIES INC	
7800 SIMPSON				PO BOX 51744	
AMARILLO	TX 79121			AMARILLO TX 79159	
Phone (806) 342-0600	Fax (806) 342-0900			PHONE: (806) 342-0600	FAX: (806) 342-0900
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 12/11/2019	

County	RANDALL	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:	Facility ID: 007518			Owner Information	
IDLEWOOD COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
4 IDLEWOOD				9901 LINN STATION ROAD	
CANYON	TX 79015			LOUISVILLE KY 40223-3808	
Phone (806) 894-4902	Fax (806) 894-9605			PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 01/01/2019	

County	RUSK	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 007539			Owner Information	
CROSBY COMMUNITY HOME				CROSBY COMMUNITY HOME INC	
102 CROSBY DR				112 S WARD DR	
HENDERSON	TX 75652			LONGVIEW TX 75604	
Phone (903) 655-0118	Fax (903) 295-7394			PHONE: (903) 295-7391	FAX: (903) 295-7394
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 06/08/2020	

County	RUSK	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 007331			Owner Information	
PETERSON COMMUNITY HOME				S S L & H INC	
1522 PETERSON				112 S WARD	
HENDERSON	TX 75652			LONGVIEW TX 75604	
Phone (903) 657-3495	Fax (903) 295-7394			PHONE: (903) 295-7391	FAX: (903) 295-7394
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 11/08/2019	

County	RUSK	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 007257			Owner Information	
TRUMAN DRIVE COMMUNITY HOME				D & S RESIDENTIAL SERVICES LP	
103 TRUMAN				8911 N CAPITAL OF TX HWY	,BLDG 1 STE 1300
HENDERSON	TX 75652			AUSTIN	TX 78759
Phone (903) 657-8923	Fax (903) 327-5355			PHONE: (512) 327-2325	FAX: (512) 327-5355
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
		License Exp Dt:	12/01/2019		

County	RUSK	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 007579			Owner Information	
EVERGREEN STEVENS COMMUNITY HOME				EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC	
107 STEVENS RD				10810 SANDEN DR	
KILGORE	TX 75662			DALLAS	TX 75238
Phone (903) 643-7022	Fax (903) 678-3508			PHONE: (972) 386-4834	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
		License Exp Dt:	12/20/2019		

County	SABINE	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 007607			Owner Information	
PINELAND HOUSE				THE BURKE CENTER	
TEMPLE AVE AT DELTA HEIGHTS				1111	
PINELAND	TX 75968				TX
Phone (409) 584-2868	Fax			PHONE:	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	GOVERNMENT BASED	
		License Exp Dt:			

County	SMITH	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 003687			Owner Information	
CHAMPAGNE HOUSE				JOY B CHAMPAGNE	
303 MOUNT SYLVAN RD				PO BOX 1749	
LINDALE	TX 75771			LINDALE	TX 75771
Phone (903) 882-8045	Fax (903) 882-1627			PHONE: (903) 882-8337	FAX: (903) 882-1627
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
		License Exp Dt:	08/02/2020		

County	SMITH	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 007547			Owner Information	
JEFFRIES HOUSE				CHAMPAGNE INCORPORATED	
314 JEFFRIES				410 EAGLE SPIRIT DR	
LINDALE	TX 75771			LINDALE	TX 75771
Phone (903) 882-8337	Fax (903) 882-1627			PHONE: (903) 882-8337	FAX: (903) 882-1627
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
		License Exp Dt:	07/09/2020		

County	SMITH	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 010353			Owner Information	
ANN ROAD GROUP HOME				ANDREWS CENTER	
3109 COUNTY RD 4167				2323 W FRONT ST	
TYLER	TX 75701			TYLER	TX 75702
Phone (903) 597-8823	Fax (903) 535-7386			PHONE: (903) 567-1351	FAX: (903) 535-7384
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 8			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	GOVERNMENT BASED	
		License Exp Dt:			

County **SMITH** Reg Svcs: ICF/IID TEAM Region 04 - TYLER

Facility Information: Facility ID: 007372
 BRECKENRIDGE VILLAGE OF TYLER - BLUEBONNET HOUSE
 15062 CR 1145
 TYLER TX 75704
 Phone (903) 596-8100 Fax (903) 596-8104
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
 BAPTIST CARE FACILITIES FOR PERSONS WITH MENTAL DISABILITIES INC
 15062 CR 1145
 TYLER TX 75704
PHONE: (903) 596-8100 **FAX:** (903) 596-8104
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 11/01/2019

County **SMITH** Reg Svcs: ICF/IID TEAM Region 04 - TYLER

Facility Information: Facility ID: 007213
 BRECKENRIDGE VILLAGE OF TYLER - MAGNOLIA HOUSE
 15062 CR 1145
 TYLER TX 75704
 Phone (903) 596-8100 Fax (903) 596-8104
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
 BAPTIST CARE FACILITIES FOR PERSONS WITH MENTAL DISABILITIES INC
 15062 CR 1145
 TYLER TX 75704
PHONE: (903) 596-8100 **FAX:** (903) 596-8104
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 02/01/2019

County **SMITH** Reg Svcs: ICF/IID TEAM Region 04 - TYLER

Facility Information: Facility ID: 007620
 BRECKENRIDGE VILLAGE OF TYLER - MALLARD HOUSE
 15062 CR 1145
 TYLER TX 75704
 Phone (903) 596-8100 Fax (903) 596-8104
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
 BAPTIST CARE FACILITIES FOR PERSONS WITH MENTAL DISABILITIES INC
 15062 CR 1145
 TYLER TX 75704
PHONE: (903) 596-8100 **FAX:** (903) 596-8104
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 11/01/2019

County **SMITH** Reg Svcs: ICF/IID TEAM Region 04 - TYLER

Facility Information: Facility ID: 106432
 BRECKENRIDGE VILLAGE OF TYLER- ROSE HOUSE
 15062 COUNTY ROAD 1145
 TYLER TX 75704
 Phone (903) 596-8100 Fax (903) 596-8104
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 8
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
 BAPTIST CARE FACILITIES FOR PERSONS WITH MENTAL DISABILITIES INC
 15062 CR 1145
 TYLER TX 75704
PHONE: (903) 596-8100 **FAX:** (903) 596-8104
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 11/10/2019

County **SMITH** Reg Svcs: ICF/IID TEAM Region 04 - TYLER

Facility Information: Facility ID: 106368
 BRECKENRIDGE VILLAGE OF TYLER-BARNABAS HOUSE
 15062 COUNTY ROAD 1145
 TYLER TX 75704
 Phone (903) 596-8100 Fax (903) 596-8104
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 8
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
 BAPTIST CARE FACILITIES FOR PERSONS WITH MENTAL DISABILITIES INC
 15062 CR 1145
 TYLER TX 75704
PHONE: (903) 596-8100 **FAX:** (903) 596-8104
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 09/18/2019

County **SMITH** Reg Svcs: ICF/IID TEAM Region 04 - TYLER

Facility Information: Facility ID: 105449
 BRECKENRIDGE VILLAGE OF TYLER-EAGLES NEST HOUSE
 15062 CR 1145
 TYLER TX 75704
 Phone (903) 596-8100 Fax (903) 596-8104
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
 BAPTIST CARE FACILITIES FOR PERSONS WITH MENTAL DISABILITIES INC
 15062 CR 1145
 TYLER TX 75704
PHONE: (903) 596-8100 **FAX:** (903) 596-8104
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 02/08/2019

County	SMITH	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 007286			Owner Information	
COPELAND HOUSE				COMMUNITY ACCESS INC	
3600 NEW COPELAND RD				2040 SHILOH RD	
TYLER	TX 75701			TYLER	TX 75703
Phone (903) 581-8812	Fax (903) 526-0881			PHONE: (903) 579-8527	FAX: (903) 526-0881
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
		License Exp Dt:	02/28/2019		

County	SMITH	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 007342			Owner Information	
GAIL HOUSE				COMMUNITY ACCESS INC	
3323 GAIL LN				2040 SHILOH RD	
TYLER	TX 75701			TYLER	TX 75703
Phone (903) 566-1441	Fax (903) 526-0881			PHONE: (903) 579-8527	FAX: (903) 526-0881
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
		License Exp Dt:	05/19/2020		

County	SMITH	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 007593			Owner Information	
MARTHA HOUSE				COMMUNITY ACCESS INC	
2616 POUNDS ST				2040 SHILOH RD	
TYLER	TX 75701			TYLER	TX 75703
Phone (903) 531-9960	Fax (903) 526-0881			PHONE: (903) 579-8527	FAX: (903) 526-0881
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
		License Exp Dt:	03/18/2020		

County	SMITH	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 003634			Owner Information	
PETTIT HOUSE				COMMUNITY ACCESS INC	
1519 PETTIT ST				2040 SHILOH RD	
TYLER	TX 75701			TYLER	TX 75703
Phone (903) 509-9932	Fax (903) 526-0881			PHONE: (903) 579-8527	FAX: (903) 526-0881
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
		License Exp Dt:	10/01/2019		

County	SMITH	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 003776			Owner Information	
PHILLIPS GROUP HOME				ANDREWS CENTER	
210 WEST PHILLIPS				2323 W FRONT ST	
TYLER	TX 75701			TYLER	TX 75702
Phone (903) 593-7191	Fax			PHONE: (903) 567-1351	FAX: (903) 535-7384
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 12			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	GOVERNMENT BASED	
		License Exp Dt:			

County	SMITH	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 007345			Owner Information	
PRESTON HOUSE				COMMUNITY ACCESS INC	
2525 PRESTON				2040 SHILOH RD	
TYLER	TX 75701			TYLER	TX 75703
Phone (903) 595-4430	Fax (903) 526-0881			PHONE: (903) 579-8527	FAX: (903) 526-0881
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
		License Exp Dt:	10/15/2019		

County	SMITH	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 007496	Owner Information			
SHAFFER HOUSE		COMMUNITY ACCESS INC			
2812 SHAFFER LN		2040 SHILOH RD			
TYLER	TX 75702	TYLER TX 75703			
Phone (903) 595-5392	Fax (903) 526-0881	PHONE: (903) 579-8527 FAX: (903) 526-0881			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/08/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	SMITH	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 007590	Owner Information			
FOREST HOUSE		COMMUNITY ACCESS INC			
306 FOREST S		2040 SHILOH RD			
WHITEHOUSE	TX 75791	TYLER TX 75703			
Phone (903) 839-0881	Fax (903) 526-0881	PHONE: (903) 579-8527 FAX: (903) 526-0881			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 03/04/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007419	Owner Information			
1501 LOVERS LN		CALAB INC			
1501 E LOVERS LN		3803 S ROBINSON RD			
ARLINGTON	TX 76010	GRAND PRAIRIE TX 75052-1239			
Phone (817) 226-5553	Fax (972) 606-4792	PHONE: (972) 263-2112 FAX: (972) 263-2115			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 09/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007230	Owner Information			
2309 CLEARWOOD COURT		CALAB INC			
2309 CLEARWOOD CT		3803 S ROBINSON RD			
ARLINGTON	TX 76014	GRAND PRAIRIE TX 75052-1239			
Phone (817) 226-1346	Fax (972) 606-4792	PHONE: (972) 263-2112 FAX: (972) 263-2115			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 09/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007352	Owner Information			
2410 EDINBURGH		CALAB INC			
2410 EDINBURGH		3803 S ROBINSON RD			
ARLINGTON	TX 76018	GRAND PRAIRIE TX 75052-1239			
Phone (817) 784-3626	Fax (972) 606-4792	PHONE: (972) 263-2112 FAX: (972) 263-2115			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 09/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007245	Owner Information			
4209 BLOSSOM TRAIL		CALAB INC			
4209 BLOSSOM TR		3803 S ROBINSON RD			
ARLINGTON	TX 76016	GRAND PRAIRIE TX 75052-1239			
Phone (817) 516-7577	Fax (972) 606-4792	PHONE: (972) 263-2112 FAX: (972) 263-2115			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 09/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 104605			Owner Information	
A & M CARE INC				A & M CARE INC	
2605 GLASSBORO CIR				2410 E HWY 377	
ARLINGTON	TX 76015			GRANBURY TX	76049
Phone (817) 795-7999	Fax (817) 548-0911			PHONE: (817) 795-7999	FAX: (817) 548-0911
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 06/17/2019	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007584			Owner Information	
AMICUS AT RIFLEMAN				AMICUS, INC	
405 RIFLEMAN TRAIL				1129 N LITTLE SCHOOL RD	
ARLINGTON	TX 76018			ARLINGTON TX	76017-1900
Phone (817) 467-3626	Fax (817) 563-7906			PHONE: (817) 563-7900	FAX: (817) 563-7906
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 09/01/2019	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007526			Owner Information	
AMICUS AT SHAWN				AMICUS, INC	
517 SHAWN COURT				1129 N LITTLE SCHOOL RD	
ARLINGTON	TX 76014			ARLINGTON TX	76017-1900
Phone (817) 784-1806	Fax (817) 563-7906			PHONE: (817) 563-7900	FAX: (817) 563-7906
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 12/01/2019	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007589			Owner Information	
AMICUS AT XAVIER				AMICUS, INC	
817 XAVIER DR				1129 N LITTLE SCHOOL RD	
ARLINGTON	TX 76001			ARLINGTON TX	76017-1900
Phone (817) 467-3731	Fax (817) 563-7906			PHONE: (817) 563-7900	FAX: (817) 563-7906
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 09/01/2019	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007473			Owner Information	
BOSQUE COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
1919 BOSQUE LN				9901 LINN STATION ROAD	
ARLINGTON	TX 76006			LOUISVILLE KY	40223-3808
Phone (817) 548-9444	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/01/2019	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007817			Owner Information	
CALIFORNIA				MHMR OF TARRANT COUNTY	
2812 CALIFORNIA				PO BOX 2603	
ARLINGTON	TX 76016			FORT WORTH TX	76113
Phone (817) 860-6257	Fax			PHONE: (817) 569-4029	FAX: (817) 569-4130
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
				License Exp Dt:	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007302	Owner Information			
CEDAR OAKS COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
1000 COKE RD		9901 LINN STATION ROAD			
ARLINGTON TX 76010		LOUISVILLE KY 40223-3808			
Phone (817) 459-3556	Fax	PHONE: (502) 394-2100	FAX: (502) 394-2285		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 01/01/2019			

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003601	Owner Information			
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
1824 S FIELDER		9901 LINN STATION ROAD			
ARLINGTON TX 76013		LOUISVILLE KY 40223			
Phone (817) 461-6234	Fax	PHONE: (502) 394-2100	FAX: (502) 394-2369		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 01/01/2020			

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003676	Owner Information			
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
5004 MISTY WOOD DR		9901 LINN STATION ROAD			
ARLINGTON TX 76017		LOUISVILLE KY 40223			
Phone (817) 516-7469	Fax	PHONE: (502) 394-2100	FAX: (502) 394-2369		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 01/01/2020			

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007281	Owner Information			
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
4700 MANDALAY DR		9901 LINN STATION ROAD			
ARLINGTON TX 76016		LOUISVILLE KY 40223			
Phone (817) 572-7461	Fax	PHONE: (502) 394-2100	FAX: (502) 394-2369		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 01/01/2020			

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007277	Owner Information			
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
2310 SHARPSHIRE LN		9901 LINN STATION ROAD			
ARLINGTON TX 76014		LOUISVILLE KY 40223			
Phone (817) 784-0406	Fax	PHONE: (502) 394-2100	FAX: (502) 394-2369		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 01/01/2020			

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 101452	Owner Information			
EVERGREEN ECHO SUMMIT COMMUNITY HOME		EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC			
6218 ECHO SUMMIT LN		10810 SANDEN DR			
ARLINGTON TX 76017		DALLAS TX 75238			
Phone (817) 478-0774	Fax (972) 386-9509	PHONE: (972) 386-4834	FAX:		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 05/28/2019			

County **TARRANT** Reg Svcs: **IID TEAM** Region **03 - ARLINGTON**
Facility Information: **Facility ID:** 007562
 EVERGREEN ELMGROVE COMMUNITY HOME
 4211 ELMGROVE
 ARLINGTON TX 76015
Phone (817) 375-5033 **Fax** (972) 386-9509
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
 EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC
 10810 SANDEN DR
 DALLAS TX 75238
PHONE: (972) 386-4834 **FAX:**
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 11/01/2019

County **TARRANT** Reg Svcs: **IID TEAM** Region **03 - ARLINGTON**
Facility Information: **Facility ID:** 007563
 EVERGREEN ENDICOTT COMMUNITY HOME
 1502 ENDICOTT
 ARLINGTON TX 76018
Phone (817) 375-5009 **Fax** (972) 386-9509
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
 EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC
 10810 SANDEN DR
 DALLAS TX 75238
PHONE: (972) 386-4834 **FAX:**
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 11/01/2019

County **TARRANT** Reg Svcs: **IID TEAM** Region **03 - ARLINGTON**
Facility Information: **Facility ID:** 101525
 EVERGREEN JEANNETTE EARLY COMMUNITY HOME
 329 MONTANA DR
 ARLINGTON TX 76002
Phone (817) 468-4471 **Fax**
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
 EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC
 10810 SANDEN DR
 DALLAS TX 75238
PHONE: (972) 386-4834 **FAX:**
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 08/12/2019

County **TARRANT** Reg Svcs: **IID TEAM** Region **03 - ARLINGTON**
Facility Information: **Facility ID:** 101454
 EVERGREEN SALIDA COMMUNITY HOME
 911 SALIDA DR
 ARLINGTON TX 76001
Phone (817) 477-9722 **Fax**
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
 EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC
 10810 SANDEN DR
 DALLAS TX 75238
PHONE: (972) 386-4834 **FAX:**
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 06/06/2019

County **TARRANT** Reg Svcs: **IID TEAM** Region **03 - ARLINGTON**
Facility Information: **Facility ID:** 101819
 EVERGREEN WAGNER COMMUNITY HOME
 7905 PEREGRINE TRAIL
 ARLINGTON TX 76001
Phone (817) 477-5600 **Fax** (972) 386-9509
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
 EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC
 10810 SANDEN DR
 DALLAS TX 75238
PHONE: (972) 386-4834 **FAX:**
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 05/18/2020

County **TARRANT** Reg Svcs: **IID TEAM** Region **03 - ARLINGTON**
Facility Information: **Facility ID:** 007301
 FOX HILL COMMUNITY HOME
 3202 FOX HILL DR
 ARLINGTON TX 76015
Phone (817) 468-1444 **Fax**
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
 EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP
 9901 LINN STATION ROAD
 LOUISVILLE KY 40223-3808
PHONE: (502) 394-2100 **FAX:** (502) 394-2285
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 01/01/2019

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID:	003952	Owner Information		
MAGNOLIA COMMUNITY HOME			EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP		
500 MAGNOLIA			9901 LINN STATION ROAD		
ARLINGTON	TX	76012	LOUISVILLE	KY	40223-3808
Phone	(817) 543-0807	Fax	(713) 622-9141	PHONE:	(502) 394-2100
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
			License Exp Dt:	01/01/2019	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID:	003665	Owner Information		
NEWSTART LIVING CENTER V			NEWSTART INC		
4503 PALOMINO CT			PO BOX 331629		
ARLINGTON	TX	76017	FORT WORTH	TX	76163
Phone	(817) 294-9675	Fax	(817) 294-9907	PHONE:	(817) 294-9675
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
			License Exp Dt:	05/01/2019	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID:	007524	Owner Information		
QUINCY HOUSE			A & M CARE INC		
2004 QUINCY CT			2410 E HWY 377		
ARLINGTON	TX	76013	GRANBURY	TX	76049
Phone	(817) 548-0911	Fax	(817) 459-4818	PHONE:	(817) 795-7999
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
			License Exp Dt:	04/08/2020	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID:	007576	Owner Information		
RACQUET CLUB			MHMR OF TARRANT COUNTY		
4809 RACQUET CLUB DRIVE			PO BOX 2603		
ARLINGTON	TX	76017-2625	FORT WORTH	TX	76113
Phone	(817) 569-5632	Fax	(817) 569-4130	PHONE:	(817) 569-4029
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	8
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	GOVERNMENT BASED
			License Exp Dt:		

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID:	007441	Owner Information		
REVERCHON COMMUNITY HOME			EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP		
2121 REVERCHON DR			9901 LINN STATION ROAD		
ARLINGTON	TX	76017	LOUISVILLE	KY	40223-3808
Phone	(817) 557-5417	Fax		PHONE:	(502) 394-2100
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
			License Exp Dt:	01/01/2019	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID:	003850	Owner Information		
SPRING CREEK COMMUNITY HOME			EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP		
4806 SPRING CREEK RD			9901 LINN STATION ROAD		
ARLINGTON	TX	76017-1228	LOUISVILLE	KY	40223-3808
Phone	(817) 478-9801	Fax		PHONE:	(502) 394-2100
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
			License Exp Dt:	01/01/2019	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007451	Owner Information			
DENVER TRAIL		MAINSTREAM HABILITATION SERVICES OF TEXAS INC			
129 DENVER TRAIL		1649 SE PARKWAY			
AZLE	TX 76020	AZLE TX 76020			
Phone (817) 270-2747	Fax (817) 270-1477	PHONE: (817) 270-2747 FAX: (817) 270-1477			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 07/29/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003957	Owner Information			
JAMES STREET COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
708 JAMES ST		9901 LINN STATION ROAD			
AZLE	TX 76020	LOUISVILLE KY 40223-3808			
Phone (817) 444-0095	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2285			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007414	Owner Information			
LAKEVIEW COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
1748 SPINNAKER LN		9901 LINN STATION ROAD			
AZLE	TX 76020	LOUISVILLE KY 40223-3808			
Phone (817) 444-7177	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2285			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007422	Owner Information			
LAMPLIGHTER COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
104 LAMPLIGHTER CT		9901 LINN STATION ROAD			
AZLE	TX 76020	LOUISVILLE KY 40223-3808			
Phone (817) 237-0385	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2285			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007395	Owner Information			
TRAINING RESIDENCE 6		MHMR OF TARRANT COUNTY			
1619 PIPELINE ROAD		PO BOX 2603			
BEDFORD	TX 76022	FORT WORTH TX 76113			
Phone (817) 354-8340	Fax	PHONE: (817) 569-4029 FAX: (817) 569-4130			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE GOVERNMENT BASED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt:			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007809	Owner Information			
WALNUT COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
3824 WALNUT DR		9901 LINN STATION ROAD			
BEDFORD	TX 76021	LOUISVILLE KY 40223-3808			
Phone (972) 929-1145	Fax (214) 251-1465	PHONE: (502) 394-2100 FAX: (502) 394-2285			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003953	Owner Information			
COZBY COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
106 COZBY ST S		9901 LINN STATION ROAD			
BENBROOK	TX 76126	LOUISVILLE KY 40223-3808			
Phone (817) 249-6269	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2285			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003635	Owner Information			
STELLA MAE		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
716 STELLA MAE		9901 LINN STATION ROAD			
BURLESON	TX 76028	LOUISVILLE KY 40223			
Phone (817) 293-4732	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2369			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 06/20/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007397	Owner Information			
BUILDER ROAD		MHMR OF TARRANT COUNTY			
2200 BUILDER ROAD		PO BOX 2603			
CROWLEY	TX 76036-4615	FORT WORTH TX 76113			
Phone (817) 332-4778	Fax	PHONE: (817) 569-4029 FAX: (817) 569-4130			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE GOVERNMENT BASED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt:			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003845	Owner Information			
NEUWSTART LIVING CENTER I		NEUWSTART INC			
305 N BEVERLY ST		PO BOX 331629			
CROWLEY	TX 76036	FORT WORTH TX 76163			
Phone (817) 297-1325	Fax (817) 294-9907	PHONE: (817) 294-9675 FAX: (817) 294-9907			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 06/01/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003670	Owner Information			
SUMMER HOUSE		ROCK HOUSE SUPPORT SERVICES INC			
1925 CATTLE DRIVE CT		2252 LINGLEVILLE ROAD HWY 8			
CROWLEY	TX 76036	STEPHENVILLE TX 76401			
Phone (512) 863-5095	Fax (512) 869-2176	PHONE: (254) 968-4004 FAX: (254) 965-8653			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 10/05/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007575	Owner Information			
AMICUS AT MILLS		AMICUS, INC			
512 S MILLS DR		1129 N LITTLE SCHOOL RD			
EULESS	TX 76040	ARLINGTON TX 76017-1900			
Phone (817) 355-9661	Fax (817) 563-7906	PHONE: (817) 563-7900 FAX: (817) 563-7906			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID:	007262	<u>Owner Information</u>		
CHAMBERS CREEK COMMUNITY HOME			EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP		
613 CHAMBERS CRK	TX	76140	9901 LINN STATION ROAD		
EVERMAN			LOUISVILLE	KY	40223-3808
Phone	(817) 551-7783	Fax			
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
				License Exp Dt:	01/01/2019

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID:	003870	<u>Owner Information</u>		
NEWSTART LIVING CENTER II			NEWSTART INC		
1000 COURRY RD	TX	76140	PO BOX 331629		
EVERMAN			FORT WORTH	TX	76163
Phone	(817) 294-9675	Fax	(817) 294-9907		
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
				License Exp Dt:	11/02/2019

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID:	003931	<u>Owner Information</u>		
NEWSTART LIVING CENTER I I I			NEWSTART INC		
5124 QUEEN ANN CT	TX	76119	PO BOX 331629		
FOREST HILL			FORT WORTH	TX	76163
Phone	(817) 294-9675	Fax	(817) 294-9907		
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
				License Exp Dt:	05/01/2019

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID:	105597	<u>Owner Information</u>		
2YORK			ROCK HOUSE SUPPORT SERVICES INC		
2 YORK DRIVE	TX	76134	2252 LINGLEVILLE ROAD HWY 8		
FORT WORTH			STEPHENVILLE	TX	76401
Phone	(817) 615-8848	Fax	(817) 294-4516		
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
				License Exp Dt:	07/19/2019

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID:	003855	<u>Owner Information</u>		
BARCELONA			EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP		
4308 BARCELONA	TX	76133-5410	9901 LINN STATION ROAD		
FORT WORTH			LOUISVILLE	KY	40223-3808
Phone	(817) 292-0766	Fax			
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	PRIVATELY OWNED
				License Exp Dt:	08/12/2019

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID:	007802	<u>Owner Information</u>		
CIBOLO HOUSE			MHMR OF TARRANT COUNTY		
3704 CIBOLO	TX	76133	PO BOX 2603		
FORT WORTH			FORT WORTH	TX	76113
Phone	(817) 292-8505	Fax			
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	GOVERNMENT BASED
				License Exp Dt:	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007544			Owner Information	
COUNTRY MANOR COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
1812 COUNTRY MANOR RD				9901 LINN STATION ROAD	
FORT WORTH	TX 76133-3500			LOUISVILLE	KY 40223-3808
Phone (817) 293-7046	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/01/2019	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003683			Owner Information	
CRAIG STREET				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
7504 CRAIG ST				9901 LINN STATION ROAD	
FORT WORTH	TX 76112			LOUISVILLE	KY 40223
Phone (817) 451-2228	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 07/16/2020	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007226			Owner Information	
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
1433 BARRON LN				9901 LINN STATION ROAD	
FORT WORTH	TX 76112			LOUISVILLE	KY 40223
Phone (817) 654-1052	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/01/2020	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007240			Owner Information	
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
5009 MARBLE FALLS				9901 LINN STATION ROAD	
FORT WORTH	TX 76103			LOUISVILLE	KY 40223
Phone (817) 429-0137	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/01/2020	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007388			Owner Information	
FAIRMEADOWS				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
3309 FAIRMEADOWS				9901 LINN STATION ROAD	
FORT WORTH	TX 76123			LOUISVILLE	KY 40223
Phone (817) 292-7328	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 06/20/2019	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007529			Owner Information	
FOREST CREEK				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
2520 FOREST CREEK DR				9901 LINN STATION ROAD	
FORT WORTH	TX 76123			LOUISVILLE	KY 40223
Phone (817) 294-4015	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 06/20/2019	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003636	Owner Information			
HASTINGS		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
5320 HASTINGS		9901 LINN STATION ROAD			
FORT WORTH	TX 76133	LOUISVILLE KY 40223			
Phone (817) 370-1254	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2369			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 06/20/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007303	Owner Information			
HUNTWICK		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
3744 HUNTWICK DR		9901 LINN STATION ROAD			
FORT WORTH	TX 76123	LOUISVILLE KY 40223			
Phone (817) 370-2956	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2369			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 08/19/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003849	Owner Information			
KINGSWOOD COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
6717 KINGSWOOD DR		9901 LINN STATION ROAD			
FORT WORTH	TX 76133-5317	LOUISVILLE KY 40223-3808			
Phone (817) 294-9425	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2285			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 08/20/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007551	Owner Information			
LONGMEADOW COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
4120 LONGMEADOW WAY		9901 LINN STATION ROAD			
FORT WORTH	TX 76134	LOUISVILLE KY 40223-3808			
Phone (817) 292-0533	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2285			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007329	Owner Information			
MOUNTAIN RIDGE		MAINSTREAM HABILITATION SERVICES OF TEXAS INC			
717 MOUNTAIN RIDGE COURT WEST		1649 SE PARKWAY			
FORT WORTH	TX 76135	AZLE TX 76020			
Phone (817) 270-2747	Fax (817) 270-1477	PHONE: (817) 270-2747 FAX: (817) 270-1477			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 07/11/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003843	Owner Information			
OAKLAND PARK		SOUTHERN CONCEPTS INC			
4613/15 MENZER		PO BOX 758			
FORT WORTH	TX 76103	GRANBURY TX 76048			
Phone (817) 496-0252	Fax (817) 579-6611	PHONE: (817) 573-6922 FAX: (817) 579-6611			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 04/01/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007285			Owner Information	
OHARA				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
8321 OHARA				9901 LINN STATION ROAD	
FORT WORTH	TX 76123			LOUISVILLE	KY 40223
Phone (817) 294-4945	Fax (817) 563-1575			PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 06/20/2019	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007815			Owner Information	
POCO				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
6505 POCO COURT				9901 LINN STATION ROAD	
FORT WORTH	TX 76133			LOUISVILLE	KY 40223-3808
Phone (817) 294-9663	Fax (817) 663-5090			PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 09/13/2019	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007476			Owner Information	
SAFE CARE III				SCP ACQUISITION PARTNERS LTD	
4244 RIVER BIRCH				4244 RIVER BIRCH RD	
FORT WORTH	TX 76137			FORT WORTH	TX 76137
Phone (817) 847-5741	Fax (817) 847-5721			PHONE: (817) 847-5741	FAX: (817) 847-5721
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 08/01/2018	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007464			Owner Information	
SAFE CARE IV				SCP ACQUISITION PARTNERS LTD	
7105 BENTLEY				4244 RIVER BIRCH RD	
FORT WORTH	TX 76137			FORT WORTH	TX 76137
Phone (817) 577-2490	Fax (817) 847-5741			PHONE: (817) 847-5741	FAX: (817) 847-5721
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 08/01/2018	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 106856			Owner Information	
TARRANT COUNTY DADS SERVICES WEST LANE				MHMR OF TARRANT COUNTY	
2620 MEADERS				PO BOX 2603	
FORT WORTH	TX 76112			FORT WORTH	TX 76113
Phone	Fax			PHONE: (817) 569-4029	FAX: (817) 569-4130
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
				License Exp Dt:	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003829			Owner Information	
TARRANT COUNTY MHMR SERVICES TRAINING RESIDENCE 2				MHMR OF TARRANT COUNTY	
701 SANDY LN				PO BOX 2603	
FORT WORTH	TX 76120			FORT WORTH	TX 76113
Phone (817) 446-8324	Fax			PHONE: (817) 569-4029	FAX: (817) 569-4130
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 8			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
				License Exp Dt:	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003812			Owner Information	
TARRANT COUNTY MHMR SERVICES TRAINING RESIDENCE 5				MHMR OF TARRANT COUNTY	
4833 DIAZ				PO BOX 2603	
FORT WORTH	TX 76107			FORT WORTH TX	76113
Phone (817) 731-3522	Fax			PHONE: (817) 569-4029	FAX: (817) 569-4130
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 8			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
				License Exp Dt:	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007370			Owner Information	
TRAINING RESIDENCE 7				MHMR OF TARRANT COUNTY	
6312 KINGSWOOD				PO BOX 2603	
FORT WORTH	TX 76133			FORT WORTH TX	76113
Phone (817) 370-9465	Fax			PHONE: (817) 569-4029	FAX: (817) 569-4130
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
				License Exp Dt:	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007351			Owner Information	
TRAINING RESIDENCE 8 TARRANT COUNTY MHMR				MHMR OF TARRANT COUNTY	
6341 JUNEAU				PO BOX 2603	
FORT WORTH	TX 76116			FORT WORTH TX	76113
Phone (817) 737-2919	Fax			PHONE: (817) 569-4029	FAX: (817) 569-4130
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
				License Exp Dt:	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003648			Owner Information	
VINEWOOD				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
1641 VINEWOOD				9901 LINN STATION ROAD	
FORT WORTH	TX 76112			LOUISVILLE KY	40223
Phone (817) 457-7095	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 02/27/2020	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003641			Owner Information	
WHITMAN				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
6524 WHITMAN				9901 LINN STATION ROAD	
FORT WORTH	TX 76133			LOUISVILLE KY	40223
Phone (817) 294-8229	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/22/2018	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003739			Owner Information	
WILLIAMS ROAD				MHMR OF TARRANT COUNTY	
1136 WILLIAMS ROAD				PO BOX 2603	
FORT WORTH	TX 76120			FORT WORTH TX	76113
Phone (817) 731-3985	Fax			PHONE: (817) 569-4029	FAX: (817) 569-4130
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 8			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
				License Exp Dt:	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007477	Owner Information			
WINIFRED COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
5724 WINIFRED DR		9901 LINN STATION ROAD			
FORT WORTH	TX 76133	LOUISVILLE KY 40223-3808			
Phone (817) 292-5398	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2285			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007637	Owner Information			
WORRELL		MHMR OF TARRANT COUNTY			
5682 WORRELL		PO BOX 2603			
FORT WORTH	TX 76133	FORT WORTH TX 76113			
Phone (817) 569-5634	Fax	PHONE: (817) 569-4029 FAX: (817) 569-4130			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE GOVERNMENT BASED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt:			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007614	Owner Information			
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
4333 COVENTRY DR		9901 LINN STATION ROAD			
GRAND PRAIRIE	TX 75052	LOUISVILLE KY 40223			
Phone (972) 647-2311	Fax (972) 606-1804	PHONE: (502) 394-2100 FAX: (502) 394-2369			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007453	Owner Information			
WALNUT CREEK RESIDENTIAL SERVICES, INC.		WALNUT CREEK RESIDENTIAL SERVICES INC			
4611 YALE DR.		2846 BIRMINGHAM DR			
GRAND PRAIRIE	TX 75052	GRAND PRAIRIE TX 75052			
Phone (972) 641-7696	Fax (972) 641-7695	PHONE: (972) 641-7696 FAX: (972) 641-7695			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/29/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007417	Owner Information			
BROOKWOOD II		SOUTHLAKE EDUCATIONAL CENTER INC			
649 CIRCLE VIEW S		2846 BIRMINGHAM DR			
HURST	TX 76054	GRAND PRAIRIE TX 75052			
Phone (817) 268-8015	Fax (972) 641-7695	PHONE: (972) 641-7696 FAX: (972) 641-7695			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 03/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003942	Owner Information			
HURSTVIEW COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
540 HURSTVIEW		9901 LINN STATION ROAD			
HURST	TX 76053-6605	LOUISVILLE KY 40223-3808			
Phone (817) 282-6362	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2285			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003998			Owner Information	
NEWSTART LIVING CENTER IV				NEWSTART INC	
201 WISTERIA				PO BOX 331629	
MANSFIELD	TX 76063			FORT WORTH TX	76163
Phone (817) 294-9675	Fax (817) 294-9907			PHONE: (817) 294-9675	FAX: (817) 294-9907
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 05/01/2018	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007276			Owner Information	
BROOKWOOD I				LANGUAGE RESOURCE CENTER INC	
2900 BROOKWOOD LN				2846 BIRMINGHAM DR	
SOUTHLAKE	TX 76092			GRAND PRAIRIE TX	75052
Phone (817) 329-1098	Fax (972) 641-7696			PHONE: (972) 641-7696	FAX: (972) 641-7696
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 03/01/2019	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007623			Owner Information	
BROOKWOOD I I I				21ST CENTURY LIVING CENTERS INC	
2410 TAYLOR ST				2846 BIRMINGHAM DR	
SOUTHLAKE	TX 76092			GRAND PRAIRIE TX	75052
Phone (817) 424-3338	Fax (972) 641-7695			PHONE: (972) 641-7696	FAX: (972) 641-7695
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 03/01/2019	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007353			Owner Information	
SAFE CARE I				SCP ACQUISITION PARTNERS LTD	
6517 BROOKSIDE DR				4244 RIVER BIRCH RD	
WATAUGA	TX 76148			FORT WORTH TX	76137
Phone (817) 485-9529	Fax (817) 847-5721			PHONE: (817) 847-5741	FAX: (817) 847-5721
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 08/01/2018	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007410			Owner Information	
SAFE CARE II				SCP ACQUISITION PARTNERS LTD	
8005 LAZY BROOK DR				4244 RIVER BIRCH RD	
WATAUGA	TX 76148			FORT WORTH TX	76137
Phone (817) 485-6807	Fax (817) 847-5721			PHONE: (817) 847-5741	FAX: (817) 847-5721
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 08/01/2020	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 106857			Owner Information	
LOVELL HOUSE				MHMR OF TARRANT COUNTY	
5325 LOVELL AVENUE				PO BOX 2603	
WESTOVER HILLS	TX 76107			FORT WORTH TX	76113
Phone (817) 653-1493	Fax			PHONE: (817) 569-4029	FAX: (817) 569-4130
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
				License Exp Dt:	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007425			Owner Information	
ALYSSA 1				MHS OF TEXAS II INC	
9220 ALYSSA DR				1649 SE PARKWAY	
WHITE SETTLEMENT	TX 76108			AZLE TX 76020	
Phone (817) 270-2747	Fax (817) 270-1477			PHONE: (817) 270-2747	FAX: (817) 270-1477
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 08/01/2019	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007305			Owner Information	
ALYSSA 2				MHS OF TEXAS II INC	
9212 ALYSSA				1649 SE PARKWAY	
WHITE SETTLEMENT	TX 76108			AZLE TX 76020	
Phone (817) 270-2747	Fax (817) 270-1477			PHONE: (817) 270-2747	FAX: (817) 270-1477
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 08/01/2019	

County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 003728			Owner Information	
ABILENE COMMUNITY RESIDENCE				KENMAR RESIDENTIAL SERVICES INCORPORATED	
3110 BUFFALO GAP RD				33 CYPRESS BLVD ,SUITE 100	
ABILENE	TX 79605			ROUND ROCK TX 78665	
Phone (325) 691-0810	Fax (325) 691-1817			PHONE: (512) 336-0800	FAX: (512) 336-0812
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 03/15/2020	

County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 007100			Owner Information	
ABILENE STATE SUPPORTED LIVING CENTER				DADS	
2501 MAPLE ST				PO BOX 12668	
ABILENE	TX 79602			AUSTIN TX 78711	
Phone (325) 692-4053	Fax (325) 795-3853			PHONE: (512) 454-3761	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 662			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE STATE SCHOOL/STATE CENTER
				License Exp Dt:	

County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 007383			Owner Information	
BACON COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
634 BACON DR				9901 LINN STATION ROAD	
ABILENE	TX 79601-2051			LOUISVILLE KY 40223-3808	
Phone (325) 676-1473	Fax (325) 676-1673			PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/01/2019	

County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 003749			Owner Information	
BIG SKY RANCH				D & S RESIDENTIAL SERVICES LP	
2234 B AMY LYN AVE				8911 N CAPITAL OF TX HWY ,BLDG 1 STE 1300	
ABILENE	TX 79603			AUSTIN TX 78759	
Phone (325) 676-5671	Fax (512) 327-5355			PHONE: (512) 327-2325	FAX: (512) 327-5355
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 12/01/2019	

County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 007324	Owner Information			
BRENDA COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
2326 BRENDA ST		9901 LINN STATION ROAD			
ABILENE	TX 79605-1118	LOUISVILLE KY 40223-3808			
Phone (325) 676-1473	Fax (325) 676-1673	PHONE: (502) 394-2100 FAX: (502) 394-2285			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 007354	Owner Information			
EAST LAKE		HILL RESOURCES INC			
3325 E LAKE RD		1850 E LOWDEN ST			
ABILENE	TX 79601	ABILENE TX 79601			
Phone (325) 673-3346	Fax (325) 794-0023	PHONE: (325) 673-3346 FAX: (325) 794-0023			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/10/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 007259	Owner Information			
GRACE RESIDENTIAL		LIVING RESOURCES LLC			
1318 PIEDMONT DR		3125 S 27TH ST			
ABILENE	TX 79601	ABILENE TX 79605			
Phone (325) 673-3397	Fax (325) 673-3397	PHONE: (325) 695-2112 FAX: (325) 794-0023			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 02/01/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 007803	Owner Information			
HAWTHORNE HOUSE		DISABILITY RESOURCES INC			
526 HAWTHORNE ST		3602 N. CLACK ST.			
ABILENE	TX 79605	ABILENE TX 79601			
Phone (325) 695-1516	Fax (325) 677-6815	PHONE: (325) 677-6815 FAX: (325) 673-7829			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 10/30/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 003667	Owner Information			
HIGH LIFE		SOMA RESOURCES INC			
#2 HIGH LIFE CIR		2449 S WILLIS ,STE 201			
ABILENE	TX 79606	ABILENE TX 79605			
Phone (325) 690-1508	Fax (915) 695-2707	PHONE: (325) 695-7860 FAX: (325) 695-2707			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 06/01/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 007501	Owner Information			
HIGHLAND COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
1366 HIGHLAND AVE		9901 LINN STATION ROAD			
ABILENE	TX 79605-4251	LOUISVILLE KY 40223-3808			
Phone (325) 676-1473	Fax (325) 676-1673	PHONE: (502) 394-2100 FAX: (502) 394-2285			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 106669			Owner Information	
KENWOOD HOUSE				DISABILITY RESOURCES INC	
951 KENWOOD				3602 N. CLACK ST.	
ABILENE	TX 79601			ABILENE TX 79601	
Phone (325) 669-3670	Fax (325) 665-8749			PHONE: (325) 677-6815	FAX: (325) 673-7829
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 04/11/2019	

County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 007568			Owner Information	
LOVE & CARE RESIDENTIAL SERVICES LLC				LOVE & CARE RESIDENTIAL SERVICES LLC	
1317 LAWYERS LN				1317 LAWYER'S LANE	
ABILENE	TX 79602			ABILENE TX 79602	
Phone (325) 673-2559	Fax (325) 673-2559			PHONE: (325) 673-2559	FAX: (325) 673-2559
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 10/01/2019	

County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 003770			Owner Information	
MESQUITE VILLA				D & S RESIDENTIAL SERVICES LP	
2234 A AMY LYN AVE				8911 N CAPITAL OF TX HWY ,BLDG 1 STE 1300	
ABILENE	TX 79603			AUSTIN TX 78759	
Phone (325) 676-5662	Fax (512) 327-5355			PHONE: (512) 327-2325	FAX: (512) 327-5355
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/08/2020	

County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 007814			Owner Information	
NORTH 9TH HOUSE				DISABILITY RESOURCES INC	
4210 N 9TH				3602 N. CLACK ST.	
ABILENE	TX 79603			ABILENE TX 79601	
Phone (325) 677-5026	Fax			PHONE: (325) 677-6815	FAX: (325) 673-7829
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 11/04/2019	

County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 007298			Owner Information	
NORTH WILLIS				SOMA RESOURCES INC	
1855 N WILLIS ST				2449 S WILLIS ,STE 201	
ABILENE	TX 79603			ABILENE TX 79605	
Phone (325) 673-8837	Fax (325) 695-2707			PHONE: (325) 695-7860	FAX: (325) 695-2707
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 06/01/2020	

County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 106671			Owner Information	
ORSBURN HOUSE				DISABILITY RESOURCES INC	
3258 VARNER LANE				3602 N. CLACK ST.	
ABILENE	TX 79601			ABILENE TX 79601	
Phone (325) 669-3670	Fax (325) 665-8749			PHONE: (325) 677-6815	FAX: (325) 673-7829
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 12/13/2018	

County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 007386			Owner Information	
OVER STREET				SOMA RESOURCES INC	
3190 OVER ST				2449 S WILLIS	,STE 201
ABILENE	TX 79605			ABILENE	TX 79605
Phone (325) 691-0906	Fax (325) 695-2707			PHONE: (325) 695-7860	FAX: (325) 695-2707
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 06/01/2020	

County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 010198			Owner Information	
PARSONS COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
910 PARSONS RD				9901 LINN STATION ROAD	
ABILENE	TX 79602-3110			LOUISVILLE	KY 40223-3808
Phone (325) 676-1473	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/03/2019	

County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 007510			Owner Information	
RICHLAND				SOMA RESOURCES INC	
2010 RICHLAND ST				2449 S WILLIS	,STE 201
ABILENE	TX 79605			ABILENE	TX 79605
Phone (325) 673-1418	Fax (325) 695-2707			PHONE: (325) 695-7860	FAX: (325) 695-2707
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 06/01/2020	

County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 007251			Owner Information	
ROYAL COURT				SOMA RESOURCES INC	
4601 ROYAL CT				2449 S WILLIS	,STE 201
ABILENE	TX 79605			ABILENE	TX 79605
Phone (325) 695-7860	Fax (325) 695-2707			PHONE: (325) 695-7860	FAX: (325) 695-2707
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 06/01/2018	

County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 007254			Owner Information	
STEPPING STONES RESIDENTIAL RESOURCES				HILL RESOURCES II INC	
965 WASHINGTON BLVD				1071 N JUDGE ELY BLVD	,# 6424
ABILENE	TX 79601			ABILENE	TX 79601
Phone (325) 673-3346	Fax (325) 794-0023			PHONE: (325) 673-3346	FAX: (325) 794-0023
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 12/01/2019	

County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 007578			Owner Information	
WOODRIDGE				SOMA RESOURCES INC	
3410 WOODRIDGE ST				2449 S WILLIS	,STE 201
ABILENE	TX 79605			ABILENE	TX 79605
Phone (325) 692-6800	Fax (325) 695-2707			PHONE: (325) 695-7860	FAX: (325) 695-2707
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 06/01/2020	

County	TITUS	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 007517			Owner Information	
PLEASANT LIVING INC				PLEASANT LIVING INC	
2003 HAPPY ST				2003 HAPPY STREET	
MOUNT PLEASANT	TX 75455			MOUNT PLEASANT TX	75456
Phone (903) 572-6402	Fax (903) 572-6403			PHONE: (903) 572-6402	FAX: (903) 572-6403
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 05/01/2020	

County	TOM GREEN	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 007108			Owner Information	
SAN ANGELO STATE SUPPORTED LIVING CENTER				DADS	
HIGHWAY 87				PO BOX 12668	
CARLSBAD	TX 76934			AUSTIN TX	78711
Phone (325) 465-4391	Fax (325) 465-2135			PHONE: (512) 454-3761	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 375			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE STATE SCHOOL/STATE CENTER
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt:	

County	TOM GREEN	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 007596			Owner Information	
BLUEBONNET HOMES 1				BLUEBONNET HOMES INC	
1822 CORDELL				128 S MAGDALEN	
SAN ANGELO	TX 76901			SAN ANGELO TX	76903
Phone (325) 944-4374	Fax (325) 659-3769			PHONE: (325) 658-6664	FAX: (325) 659-3769
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 04/06/2020	

County	TOM GREEN	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 007357			Owner Information	
BLUEBONNET HOMES 2				BLUEBONNET HOMES INC	
236 WESTWOOD				128 S MAGDALEN	
SAN ANGELO	TX 76901			SAN ANGELO TX	76903
Phone (325) 947-1300	Fax (325) 659-3769			PHONE: (325) 658-6664	FAX: (325) 659-3769
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 01/22/2020	

County	TOM GREEN	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 007358			Owner Information	
BLUEBONNET HOMES 3				BLUEBONNET HOMES INC	
1135 E 25TH				128 S MAGDALEN	
SAN ANGELO	TX 76903			SAN ANGELO TX	76903
Phone (325) 658-6664	Fax (325) 659-3769			PHONE: (325) 658-6664	FAX: (325) 659-3769
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 01/23/2020	

County	TOM GREEN	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 007401			Owner Information	
CAPITAL HEIGHTS HOME				D & S RESIDENTIAL SERVICES LP	
1706 IDAHO				8911 N CAPITAL OF TX HWY	,BLDG 1 STE 1300
SAN ANGELO	TX 76904			AUSTIN TX	78759
Phone (325) 944-4096	Fax (512) 327-5355			PHONE: (512) 327-2325	FAX: (512) 327-5355
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 12/01/2019	

County	TOM GREEN	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 007235			Owner Information	
CASA DE CONCHO				D & S RESIDENTIAL SERVICES LP	
2706 WATSON				8911 N CAPITAL OF TX HWY	,BLDG 1 STE 1300
SAN ANGELO	TX 76903			AUSTIN TX	78759
Phone (325) 658-1957	Fax (512) 327-5355			PHONE: (512) 327-2325	FAX: (512) 327-5355
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 12/01/2019	

County	TOM GREEN	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 003632			Owner Information	
CASA DE MIMOSA				D & S RESIDENTIAL SERVICES LP	
1041 E 44TH ST				8911 N CAPITAL OF TX HWY	,BLDG 1 STE 1300
SAN ANGELO	TX 76903			AUSTIN TX	78759
Phone (325) 653-5962	Fax (512) 327-5355			PHONE: (512) 327-2325	FAX: (512) 327-5355
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 01/07/2020	

County	TOM GREEN	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 003609			Owner Information	
CASA DE TRES RIOS				D & S RESIDENTIAL SERVICES LP	
1342 TRES RIOS				8911 N CAPITAL OF TX HWY	,BLDG 1 STE 1300
SAN ANGELO	TX 76903			AUSTIN TX	78759
Phone (325) 651-6723	Fax (512) 327-5355			PHONE: (512) 327-2325	FAX: (512) 327-5355
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 12/01/2019	

County	TOM GREEN	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 007582			Owner Information	
D&S TERRACE PLACE				D & S RESIDENTIAL SERVICES LP	
42 TERRACE DR				8911 N CAPITAL OF TX HWY	,BLDG 1 STE 1300
SAN ANGELO	TX 76905			AUSTIN TX	78759
Phone (325) 651-9383	Fax (512) 327-5355			PHONE: (512) 327-2325	FAX: (512) 327-5355
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 12/01/2019	

County	TOM GREEN	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 003945			Owner Information	
MOSAIC				MOSAIC	
2742 PALO DURO				2245 MIDWAY ROAD	,STE 300
SAN ANGELO	TX 76904			CARROLLTON TX	75006
Phone (325) 651-3333	Fax (325) 651-8110			PHONE: (972) 866-9989	FAX: (972) 991-0834
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 01/01/2019	

County	TOM GREEN	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 003923			Owner Information	
MOSAIC				MOSAIC	
3221 SOUTHLAND				2245 MIDWAY ROAD	,STE 300
SAN ANGELO	TX 76904			CARROLLTON TX	75006
Phone (325) 651-3333	Fax (325) 651-8110			PHONE: (972) 866-9989	FAX: (972) 991-0834
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 01/01/2019	

County	TOM GREEN	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 003916			Owner Information	
MOSAIC				MOSAIC	
165 EDINBURGH				2245 MIDWAY ROAD	,STE 300
SAN ANGELO	TX 76904			CARROLLTON	TX 75006
Phone (325) 651-3333	Fax (325) 651-8110			PHONE: (972) 866-9989	FAX: (972) 991-0834
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 04/30/2018	

County	TOM GREEN	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 003606			Owner Information	
MOSAIC				MOSAIC	
3217 CLEARVIEW				2245 MIDWAY ROAD	,STE 300
SAN ANGELO	TX 76904			CARROLLTON	TX 75006
Phone (325) 651-3333	Fax (325) 651-8110			PHONE: (972) 866-9989	FAX: (972) 991-0834
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/01/2019	

County	TOM GREEN	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 003889			Owner Information	
MOSAIC				MOSAIC	
4801 BERMUDA				2245 MIDWAY ROAD	,STE 300
SAN ANGELO	TX 76904			CARROLLTON	TX 75006
Phone (325) 651-3333	Fax (325) 651-8110			PHONE: (972) 866-9989	FAX: (972) 991-0834
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/01/2019	

County	TOM GREEN	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 007339			Owner Information	
MOSAIC				MOSAIC	
3613 WILDEWOOD				2245 MIDWAY ROAD	,STE 300
SAN ANGELO	TX 76904			CARROLLTON	TX 75006
Phone (325) 651-3333	Fax (325) 651-8110			PHONE: (972) 866-9989	FAX: (972) 991-0834
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/01/2019	

County	TOM GREEN	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 007656			Owner Information	
SAN ANGELO INDEPENDENT LIVING TRAINING RESIDENCE				THE INSTITUTE OF COGNITIVE DEVELOP, INC	
20 S KOENIGHEIM				PO BOX 5018	
SAN ANGELO	TX 76903			SAN ANGELO	TX 76902
Phone (325) 655-3884	Fax (325) 658-8441			PHONE: (325) 658-8631	FAX: (325) 659-2070
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/22/2020	

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 003646			Owner Information	
ALDWYCHE				PREMIEANT INCORPORATED	
5444 FAIRMONT CIR				1110 W WILLIAM CANNON	,BLDG 2
AUSTIN	TX 78745			AUSTIN	TX 78745
Phone (512) 916-1632	Fax (512) 916-1639			PHONE: (512) 916-1632	FAX: (512) 916-1639
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/01/2020	

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007249			Owner Information	
AUSTIN HOUSE				PREMIEANT INCORPORATED	
101 CLOUDVIEW DR				1110 W WILLIAM CANNON	,BLDG 2
AUSTIN	TX 78745			AUSTIN	TX 78745
Phone (512) 916-1632	Fax (512) 916-1639			PHONE: (512) 916-1632	FAX: (512) 916-1639
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 01/27/2020	

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007101			Owner Information	
AUSTIN STATE SUPPORTED LIVING CENTER				DADS	
2203 W 35TH ST				PO BOX 12668	
AUSTIN	TX 78767			AUSTIN	TX 78711
Phone (512) 454-4731	Fax (512) 374-6145			PHONE: (512) 454-3761	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 474			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE STATE SCHOOL/STATE CENTER
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt:	

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007389			Owner Information	
AUTUMN RIDGE				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
11605 AUTUMN RIDGE				9901 LINN STATION ROAD	
AUSTIN	TX 78759			LOUISVILLE	KY 40223
Phone (512) 331-0445	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 10/01/2018	

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007367			Owner Information	
BALCONES WOODS				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
4504 BALCONES WOODS				9901 LINN STATION ROAD	
AUSTIN	TX 78759			LOUISVILLE	KY 40223
Phone (512) 345-7256	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 10/01/2018	

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007599			Owner Information	
BLARWOOD				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
6100 BLARWOOD DRIVE				9901 LINN STATION ROAD	
AUSTIN	TX 78745			LOUISVILLE	KY 40223
Phone (512) 916-9451	Fax (512) 323-6031			PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 11/01/2019	

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 003621			Owner Information	
BLUFF CANYON COMMUNITY RESIDENCE				KENMAR RESIDENTIAL SERVICES INCORPORATED	
11101 BLUFF CANYON				33 CYPRESS BLVD	,SUITE 100
AUSTIN	TX 78754			ROUND ROCK	TX 78665
Phone (512) 339-8016	Fax			PHONE: (512) 336-0800	FAX: (512) 336-0812
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 03/15/2020	

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 003631	Owner Information			
CABANA COMMUNITY RESIDENCE		KENMAR RESIDENTIAL SERVICES INCORPORATED			
12004 CABANA LN		33 CYPRESS BLVD			,SUITE 100
AUSTIN	TX 78727	ROUND ROCK TX			78665
Phone (512) 339-4074	Fax	PHONE:	(512) 336-0800	FAX:	(512) 336-0812
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0		License Exp Dt:		03/15/2020
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007483	Owner Information			
CHINATREE COMMUNITY RESIDENCE		D & S RESIDENTIAL SERVICES LP			
8106 U S 290 WEST		8911 N CAPITAL OF TX HWY			,BLDG 1 STE 1300
AUSTIN	TX 78735	AUSTIN TX			78759
Phone (512) 288-0126	Fax (512) 327-7181	PHONE:	(512) 327-2325	FAX:	(512) 327-5355
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0		License Exp Dt:		12/01/2019
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007631	Owner Information			
CRAIG DRIVE		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
4901 CRAIG DR		9901 LINN STATION ROAD			
AUSTIN	TX 78727	LOUISVILLE KY			40223
Phone (512) 231-0789	Fax	PHONE:	(502) 394-2100	FAX:	(502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0		License Exp Dt:		10/01/2018
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 003695	Owner Information			
CROCKETT HOUSE		PREMIEANT INCORPORATED			
7906 BRODIE LN		1110 W WILLIAM CANNON			,BLDG 2
AUSTIN	TX 78745	AUSTIN TX			78745
Phone (512) 916-1632	Fax (512) 916-1639	PHONE:	(512) 916-1632	FAX:	(512) 916-1639
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0		License Exp Dt:		01/27/2020
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007379	Owner Information			
DEER TRACK		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
12306 DEER TRACK		9901 LINN STATION ROAD			
AUSTIN	TX 78759	LOUISVILLE KY			40223
Phone (512) 257-9616	Fax	PHONE:	(502) 394-2100	FAX:	(502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0		License Exp Dt:		10/01/2018
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007264	Owner Information			
DELAWARE COURT		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
8604 DELAWARE CT		9901 LINN STATION ROAD			
AUSTIN	TX 78758	LOUISVILLE KY			40223
Phone (512) 832-6277	Fax	PHONE:	(502) 394-2100	FAX:	(502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0		License Exp Dt:		10/01/2018
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007323			Owner Information	
GRACY FARMS				D & S RESIDENTIAL SERVICES LP	
1512 GRACY FARMS LN				8911 N CAPITAL OF TX HWY	,BLDG 1 STE 1300
AUSTIN	TX 78758			AUSTIN TX	78759
Phone (512) 832-8964	Fax (512) 327-5355			PHONE: (512) 327-2325	FAX: (512) 327-5355
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 12/01/2019	

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007429			Owner Information	
GRASSHOPPER				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
3319 GRASSHOPPER				9901 LINN STATION ROAD	
AUSTIN	TX 78748			LOUISVILLE KY	40223
Phone (512) 280-6833	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 11/01/2019	

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007475			Owner Information	
HOUSTON HOUSE				PREMIEANT INCORPORATED	
7509 WESTGATE BLVD				1110 W WILLIAM CANNON	,BLDG 2
AUSTIN	TX 78745			AUSTIN TX	78745
Phone (512) 916-1632	Fax (512) 916-1639			PHONE: (512) 916-1632	FAX: (512) 916-1639
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 01/27/2020	

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007805			Owner Information	
KEOTA				D & S RESIDENTIAL SERVICES LP	
4508 KEOTA DR				8911 N CAPITAL OF TX HWY	,BLDG 1 STE 1300
AUSTIN	TX 78749			AUSTIN TX	78759
Phone (512) 280-9135	Fax (512) 327-5355			PHONE: (512) 327-2325	FAX: (512) 327-5355
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 12/01/2019	

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007452			Owner Information	
LINCOLN HOUSE				AUSTIN HEALTH RESOURCES INC	
1007 COLLINGSWORTH DR				9609 NEW FOUNDLAND CIRCLE	
AUSTIN	TX 78753			AUSTIN TX	78758
Phone (512) 835-8955	Fax (512) 835-8812			PHONE: (512) 835-8955	FAX: (512) 895-8812
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 06/01/2020	

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 003793			Owner Information	
MARY LEE FOUNDATION SOUTHPONTE I				MARY LEE FOUNDATION	
1338 LAMAR SQUARE DR				1339 LAMAR SQUARE DR	
AUSTIN	TX 78704			AUSTIN TX	78704
Phone (512) 442-6077	Fax (512) 442-6825			PHONE: (512) 443-5777	FAX: (512) 443-5807
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 11/03/2019	

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 003832	Owner Information			
MARY LEE FOUNDATION SOUTHPOINTE I I		MARY LEE FOUNDATION			
1336 LAMAR SQUARE DR		1339 LAMAR SQUARE DR			
AUSTIN	TX 78704	AUSTIN TX 78704			
Phone (512) 442-6077	Fax (512) 442-6825	PHONE: (512) 443-5777	FAX: (512) 443-5807		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0		License Exp Dt: 11/03/2019		
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007242	Owner Information			
MARYWOOD		PREMIEANT INCORPORATED			
4700 GANYMEDE DR		1110 W WILLIAM CANNON			.BLDG 2
AUSTIN	TX 78727	AUSTIN TX 78745			
Phone (512) 916-1632	Fax (512) 916-1639	PHONE: (512) 916-1632	FAX: (512) 916-1639		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0		License Exp Dt: 01/01/2020		
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007627	Owner Information			
OAKTREE COMMUNITY RESIDENCE		D & S RESIDENTIAL SERVICES LP			
3509 CONVICT HILL RD		8911 N CAPITAL OF TX HWY			.BLDG 1 STE 1300
AUSTIN	TX 78745	AUSTIN TX 78759			
Phone (512) 892-1084	Fax (512) 327-7181	PHONE: (512) 327-2325	FAX: (512) 327-5355		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0		License Exp Dt: 12/31/2019		
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 003663	Owner Information			
PARKFIELD		PREMIEANT INCORPORATED			
9202 PARKFIELD DR		1110 W WILLIAM CANNON			.BLDG 2
AUSTIN	TX 78758	AUSTIN TX 78745			
Phone (512) 916-1632	Fax (512) 916-1639	PHONE: (512) 916-1632	FAX: (512) 916-1639		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0		License Exp Dt: 01/01/2020		
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 003661	Owner Information			
PENDLETON		PREMIEANT INCORPORATED			
1304 QUAIL PARK DR		1110 W WILLIAM CANNON			.BLDG 2
AUSTIN	TX 78758	AUSTIN TX 78745			
Phone (512) 916-1632	Fax (512) 916-1639	PHONE: (512) 916-1632	FAX: (512) 916-1639		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0		License Exp Dt: 05/02/2019		
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007545	Owner Information			
PILGRIMS PLACE		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
8204 PILGRIMS PL		9901 LINN STATION ROAD			
AUSTIN	TX 78759	LOUISVILLE KY 40223			
Phone (512) 918-2094	Fax	PHONE: (502) 394-2100	FAX: (502) 394-2369		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0		License Exp Dt: 10/01/2018		
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007804			Owner Information	
PINE KNOLL				PREMIEANT INCORPORATED	
1400 PINE KNOLL DR				1110 W WILLIAM CANNON	,BLDG 2
AUSTIN	TX 78758			AUSTIN	TX 78745
Phone (512) 916-1632	Fax (512) 916-1639			PHONE: (512) 916-1632	FAX: (512) 916-1639
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 01/01/2020	

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007320			Owner Information	
RED OAK				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
3902 SIERRA				9901 LINN STATION ROAD	
AUSTIN	TX 78731			LOUISVILLE	KY 40223
Phone (512) 346-1410	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 10/01/2018	

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007611			Owner Information	
ROSS HOUSE				PREMIEANT INCORPORATED	
3215 WESTERN DR				1110 W WILLIAM CANNON	,BLDG 2
AUSTIN	TX 78745			AUSTIN	TX 78745
Phone (512) 916-1632	Fax (512) 916-1639			PHONE: (512) 916-1632	FAX: (512) 916-1639
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 01/27/2020	

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 102153			Owner Information	
SALEM MEADOW				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
1402 SALEM MEADOW CIRCLE				9901 LINN STATION ROAD	
AUSTIN	TX 78745			LOUISVILLE	KY 40223
Phone (512) 326-4828	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 11/01/2019	

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007231			Owner Information	
SHADY HOLLOW				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
11403 BOOT HILL				9901 LINN STATION ROAD	
AUSTIN	TX 78748			LOUISVILLE	KY 40223
Phone (512) 282-8777	Fax (512) 892-2524			PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 11/01/2019	

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007418			Owner Information	
THE COTTAGE				MARY LEE FOUNDATION	
1334 LAMAR SQUARE DR				1339 LAMAR SQUARE DR	
AUSTIN	TX 78704			AUSTIN	TX 78704
Phone (512) 442-6077	Fax (512) 442-6825			PHONE: (512) 443-5777	FAX: (512) 443-5807
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 08/10/2019	

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 003639			Owner Information	
TRAVIS HOUSE				PREMIEANT INCORPORATED	
9112 JAPONICA CT				1110 W WILLIAM CANNON	,BLDG 2
AUSTIN	TX 78748			AUSTIN	TX 78745
Phone (512) 916-1632		Fax (512) 916-1639		PHONE: (512) 916-1632	FAX: (512) 916-1639
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 01/27/2020	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 003647			Owner Information	
WAGON CROSSING				PREMIEANT INCORPORATED	
1203 ECHO LN				1110 W WILLIAM CANNON	,BLDG 2
AUSTIN	TX 78745			AUSTIN	TX 78745
Phone (512) 916-1632		Fax (512) 916-1639		PHONE: (512) 916-1632	FAX: (512) 916-1639
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 04/03/2019	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 102416			Owner Information	
WESTGATE				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
7906 APPOMATTOX DR				9901 LINN STATION ROAD	
AUSTIN	TX 78745			LOUISVILLE	KY 40223
Phone (512) 448-1194		Fax		PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 11/01/2017	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007274			Owner Information	
WHISTLESTOP				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
7507 WHISTLESTOP				9901 LINN STATION ROAD	
AUSTIN	TX 78749			LOUISVILLE	KY 40223
Phone (512) 288-5060		Fax		PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 11/01/2019	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 003974			Owner Information	
PFLUGERVILLE COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
514 OAT MEADOW DRIVE				9901 LINN STATION ROAD	
PFLUGERVILLE	TX 78660-4347			LOUISVILLE	KY 40223-3808
Phone (512) 251-0427		Fax (713) 622-9141		PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 01/01/2019	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007633			Owner Information	
WILDRIDGE				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
904 VICTORIA RIDGE				9901 LINN STATION ROAD	
PFLUGERVILLE	TX 78660			LOUISVILLE	KY 40223
Phone (512) 251-4956		Fax		PHONE: (502) 394-2100	FAX: (502) 394-2369
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 03/01/2020	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	UPSHUR	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 007293			Owner Information	
WOODBINE COMMUNITY HOME				D & S RESIDENTIAL SERVICES LP	
2402 WOODBINE				8911 N CAPITAL OF TX HWY	,BLDG 1 STE 1300
GLADEWATER	TX 75647			AUSTIN TX	78759
Phone (903) 845-4660	Fax			PHONE: (512) 327-2325	FAX: (512) 327-5355
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 12/01/2019	

County	UVALDE	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007343			Owner Information	
DOROTHY JO COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
625 DOROTHY JO CIR				9901 LINN STATION ROAD	
UVALDE	TX 78801-4434			LOUISVILLE KY	40223-3808
Phone (830) 278-1905	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/01/2019	

County	UVALDE	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007500			Owner Information	
NOPAL COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
802 E NOPAL ST				9901 LINN STATION ROAD	
UVALDE	TX 78801-5400			LOUISVILLE KY	40223-3808
Phone (830) 278-6958	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/01/2019	

County	VAL VERDE	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007290			Owner Information	
JOHN GLENN COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
110 JOHN GLENN DR				9901 LINN STATION ROAD	
DEL RIO	TX 78840-2315			LOUISVILLE KY	40223-3808
Phone (830) 774-3904	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/01/2019	

County	VAL VERDE	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007237			Owner Information	
MICHELLE COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
93 MICHELLE DR				9901 LINN STATION ROAD	
DEL RIO	TX 78840-2621			LOUISVILLE KY	40223-3808
Phone (830) 775-9594	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/01/2019	

County	VAN ZANDT	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 003841			Owner Information	
CANTON GROUP HOME MILLCREEK FEMALES				ANDREWS CENTER	
1611 MILLCREEK				2323 W FRONT ST	
CANTON	TX 75103			TYLER TX	75702
Phone (903) 567-4526	Fax			PHONE: (903) 567-1351	FAX: (903) 535-7384
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 8			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
				License Exp Dt:	

County	VAN ZANDT	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 003772			Owner Information	
ELLIOTT DRIVE GROUP HOME				ANDREWS CENTER	
1738 ELLIOTT DR				2323 W FRONT ST	
CANTON	TX 75103			TYLER	TX 75702
Phone (903) 567-4541	Fax			PHONE: (903) 567-1351	FAX: (903) 535-7384
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 10			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
				License Exp Dt:	

County	VICTORIA	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 003938			Owner Information	
EDINBURGH HOME				UCG CENTRAL TEXAS HOLDINGS LLC	
306 EDINBURGH				2006 N WHEELER	
VICTORIA	TX 77904			VICTORIA	TX 77901
Phone (512) 578-2940	Fax			PHONE: (830) 372-2920	FAX: (214) 723-5331
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt:	03/01/2020

County	VICTORIA	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007304			Owner Information	
NORTHCREST GROUP HOME				UCG CENTRAL TEXAS HOLDINGS LLC	
902 BELLEVUE				2006 N WHEELER	
VICTORIA	TX 77904			VICTORIA	TX 77901
Phone (512) 578-1527	Fax			PHONE: (830) 372-2920	FAX: (214) 723-5331
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt:	03/01/2020

County	VICTORIA	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 003926			Owner Information	
VICTORIA GROUP HOME				UCG CENTRAL TEXAS HOLDINGS LLC	
2006 N WHEELER				2006 N WHEELER	
VICTORIA	TX 77901			VICTORIA	TX 77901
Phone (512) 575-1558	Fax			PHONE: (830) 372-2920	FAX: (214) 723-5331
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt:	03/01/2020

County	WALKER	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007504			Owner Information	
HUNTSVILLE COMMUNITY RESIDENCE				D & S RESIDENTIAL SERVICES LP	
63 STATE HWY 75 N				8911 N CAPITAL OF TX HWY	,BLDG 1 STE 1300
HUNTSVILLE	TX 77320			AUSTIN	TX 78759
Phone (936) 293-1851	Fax (512) 327-5355			PHONE: (512) 327-2325	FAX: (512) 327-5355
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt:	09/01/2019

County	WALLER	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 105801			Owner Information	
WILLOW RIVER FARMS - #12				THE CENTER SERVING PERSONS WITH MENTAL RETARDATION	
4073 FM 3318				3550 WEST DALLAS	
BROOKSHIRE	TX 77423			HOUSTON	TX 77019
Phone (713) 525-8300	Fax (979) 885-1007			PHONE: (713) 525-8400	FAX: (713) 525-8334
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt:	03/18/2020

County	WALLER	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 105802	Owner Information			
WILLOW RIVER FARMS - #4		THE CENTER SERVING PERSONS WITH MENTAL RETARDATION			
4073 FM 3318		3550 WEST DALLAS			
BROOKSHIRE	TX 77423	HOUSTON TX 77019			
Phone (713) 525-8300	Fax (979) 885-1007	PHONE: (713) 525-8400 FAX: (713) 525-8334			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 03/18/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WALLER	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 103355	Owner Information			
WILLOW RIVER FARMS (1B)		THE CENTER SERVING PERSONS WITH MENTAL RETARDATION			
4073 FM 3318 - 1B		3550 WEST DALLAS			
BROOKSHIRE	TX 77423	HOUSTON TX 77019			
Phone (713) 525-8300	Fax (979) 885-1007	PHONE: (713) 525-8400 FAX: (713) 525-8334			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 5	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 04/11/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WALLER	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 103354	Owner Information			
WILLOW RIVER FARMS (1A)		THE CENTER SERVING PERSONS WITH MENTAL RETARDATION			
4073 FM 3318 - 1A		3550 WEST DALLAS			
BROOKSHIRE	TX 77423	HOUSTON TX 77019			
Phone (979) 885-1007	Fax (979) 885-1007	PHONE: (713) 525-8400 FAX: (713) 525-8334			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 4	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 04/11/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WALLER	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 103357	Owner Information			
WILLOW RIVER FARMS (5A)		THE CENTER SERVING PERSONS WITH MENTAL RETARDATION			
4073 FM 3318 - 5A		3550 WEST DALLAS			
BROOKSHIRE	TX 77423	HOUSTON TX 77019			
Phone (713) 525-8300	Fax (979) 885-1007	PHONE: (713) 525-8400 FAX: (713) 525-8334			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 5	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 04/10/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WALLER	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 103356	Owner Information			
WILLOW RIVER FARMS (5B)		THE CENTER SERVING PERSONS WITH MENTAL RETARDATION			
4073 FM 3318 - 5B		3550 WEST DALLAS			
BROOKSHIRE	TX 77423	HOUSTON TX 77019			
Phone (713) 525-8300	Fax (979) 885-1007	PHONE: (713) 525-8400 FAX: (713) 525-8334			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 5	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 04/10/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WALLER	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 101330	Owner Information			
WILLOW RIVER FARMS 10		THE CENTER SERVING PERSONS WITH MENTAL RETARDATION			
4073 FM 3318		3550 WEST DALLAS			
BROOKSHIRE	TX 77423	HOUSTON TX 77019			
Phone (713) 525-8300	Fax (979) 885-1007	PHONE: (713) 525-8400 FAX: (713) 525-8334			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 03/11/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WALLER	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 101331			Owner Information	
WILLOW RIVER FARMS 11				THE CENTER SERVING PERSONS WITH MENTAL RETARDATION	
4073 FM 3318				3550 WEST DALLAS	
BROOKSHIRE	TX 77423			HOUSTON TX 77019	
Phone (713) 525-8300	Fax (979) 885-1007			PHONE: (713) 525-8400	FAX: (713) 525-8334
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 03/12/2019	

County	WASHINGTON	Reg Svcs:	UNIT 21 (ICF/MR)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007110			Owner Information	
BRENHAM STATE SUPPORTED LIVING CENTER				DADS	
HIGHWAY 36 SOUTH				PO BOX 12668	
BRENHAM	TX 77833			AUSTIN TX 78711	
Phone (979) 836-4511	Fax (979) 277-1865			PHONE: (512) 454-3761	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 520			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE STATE SCHOOL/STATE CENTER
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt:	

County	WHARTON	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007820			Owner Information	
EL CAMPO #2				MEMEEHA LLC	
4912 NORTH FM 441 RD				1909 WEST LOOP	
EL CAMPO	TX 77437			EL CAMPO TX 77437	
Phone (979) 543-4186	Fax (979) 543-8517			PHONE: (979) 543-4186	FAX: (979) 543-8517
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 12/01/2019	

County	WHARTON	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007822			Owner Information	
EL CAMPO #3				MEMEEHA LLC	
4200 CR 360				1909 WEST LOOP	
EL CAMPO	TX 77437			EL CAMPO TX 77437	
Phone (979) 543-4186	Fax (979) 543-8517			PHONE: (979) 543-4186	FAX: (979) 543-8517
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 09/22/2018	

County	WHARTON	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007819			Owner Information	
EL CAMPO 1				MEMEEHA LLC	
3396 CR 355				1909 WEST LOOP	
EL CAMPO	TX 77437			EL CAMPO TX 77437	
Phone (979) 543-4186	Fax (979) 543-8517			PHONE: (979) 543-4186	FAX: (979) 543-8517
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 12/01/2019	

County	WHARTON	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007821			Owner Information	
EL CAMPO 4				MEMEEHA LLC	
577 C.R. 346				1909 WEST LOOP	
EL CAMPO	TX 77437			EL CAMPO TX 77437	
Phone (979) 543-4186	Fax (979) 543-8517			PHONE: (979) 543-4186	FAX: (979) 543-8517
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 12/01/2019	

County	WICHITA	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 007361	Owner Information			
CUMBERLAND COURT		HIGH PLAINS HEALTH PROVIDERS INC			
2114 8TH ST		1505 P B LN			
WICHITA FALLS	TX 76301	WICHITA FALLS TX 76302			
Phone (940) 322-2948	Fax	PHONE: (940) 766-6751 FAX: (940) 766-6753			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 04/01/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WICHITA	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 007556	Owner Information			
HAMLIN HOUSE		HIGH PLAINS HEALTH PROVIDERS INC			
1509 P B LN		1505 P B LN			
WICHITA FALLS	TX 76302	WICHITA FALLS TX 76302			
Phone (940) 322-8104	Fax (940) 766-6753	PHONE: (940) 766-6751 FAX: (940) 766-6753			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 08/17/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WICHITA	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 003827	Owner Information			
HORIZON HOUSE		HELEN FARABEE CENTER			
1604 ARLINGTON ST		PO BOX 8266			
WICHITA FALLS	TX 76302	WICHITA FALLS TX 76307			
Phone (940) 723-8048	Fax (940) 763-0603	PHONE: (940) 397-3101 FAX: (940) 397-3150			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE GOVERNMENT BASED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt:			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WICHITA	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 007360	Owner Information			
MIRAMAR		HIGH PLAINS HEALTH PROVIDERS INC			
2911 AVE L		1505 P B LN			
WICHITA FALLS	TX 76309	WICHITA FALLS TX 76302			
Phone (940) 767-4548	Fax (940) 766-6753	PHONE: (940) 766-6751 FAX: (940) 766-6753			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 04/01/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WICHITA	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 003853	Owner Information			
NORRIS PLACE		HELEN FARABEE CENTER			
1555 NORRIS ST		PO BOX 8266			
WICHITA FALLS	TX 76302	WICHITA FALLS TX 76307			
Phone (940) 397-3362	Fax (940) 397-3388	PHONE: (940) 397-3101 FAX: (940) 397-3150			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE GOVERNMENT BASED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt:			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WICHITA	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 003759	Owner Information			
OUACHITA FLATS		D & S RESIDENTIAL SERVICES LP			
6086 KOVARIK RD		8911 N CAPITAL OF TX HWY ,BLDG 1 STE 1300			
WICHITA FALLS	TX 76310-1513	AUSTIN TX 78759			
Phone (940) 723-5410	Fax (940) 723-5564	PHONE: (512) 327-2325 FAX: (512) 327-5355			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 12/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WICHITA	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 007426			Owner Information	
SOMERSET HILLS				HIGH PLAINS HEALTH PROVIDERS INC	
4515 LAKEVIEW DR				1505 P B LN	
WICHITA FALLS	TX 76308			WICHITA FALLS TX 76302	
Phone (940) 691-6704	Fax (940) 766-6753			PHONE: (940) 766-6751	FAX: (940) 766-6753
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 07/02/2020	

County	WILLIAMSON	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007538			Owner Information	
GRANT HOUSE				AUSTIN HEALTH RESOURCES INC	
11602 FLINNWOOD CIR				9609 NEW FOUNDLAND CIRCLE	
AUSTIN	TX 78750			AUSTIN TX 78758	
Phone (512) 331-6970	Fax (512) 835-8812			PHONE: (512) 835-8955	FAX: (512) 895-8812
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 06/01/2020	

County	WILLIAMSON	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 106799			Owner Information	
APPLETREE COMMUNITY RESIDENCE				D & S RESIDENTIAL SERVICES LP	
2507 BOIS D ARC LANE				8911 N CAPITAL OF TX HWY ,BLDG 1 STE 1300	
CEDAR PARK	TX 78613			AUSTIN TX 78759	
Phone (512) 259-0188	Fax (512) 327-5355			PHONE: (512) 327-2325	FAX: (512) 327-5355
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 04/07/2019	

County	WILLIAMSON	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007310			Owner Information	
CEDAR PARK COMMUNITY RESIDENCE				D & S RESIDENTIAL SERVICES LP	
611 POMEGRANATE PASS				8911 N CAPITAL OF TX HWY ,BLDG 1 STE 1300	
CEDAR PARK	TX 78613			AUSTIN TX 78759	
Phone (512) 219-1938	Fax (512) 355-3186			PHONE: (512) 327-2325	FAX: (512) 327-5355
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 12/01/2019	

County	WILLIAMSON	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007468			Owner Information	
DRIFTWOOD COMMUNITY HOME				D & S RESIDENTIAL SERVICES LP	
2304 DIJON				8911 N CAPITAL OF TX HWY ,BLDG 1 STE 1300	
CEDAR PARK	TX 78613			AUSTIN TX 78759	
Phone (512) 327-2325	Fax (512) 327-5355			PHONE: (512) 327-2325	FAX: (512) 327-5355
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 12/01/2019	

County	WILLIAMSON	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 003810			Owner Information	
HILL COUNTRY COMMUNITY RESIDENCE				D & S RESIDENTIAL SERVICES LP	
1406 PECAN ST				8911 N CAPITAL OF TX HWY ,BLDG 1 STE 1300	
CEDAR PARK	TX 78613			AUSTIN TX 78759	
Phone (512) 331-1753	Fax (512) 327-5355			PHONE: (512) 327-2325	FAX: (512) 327-5355
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 10			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 12/01/2019	

County	WILLIAMSON	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 003644	Owner Information			
RIVIERA COMMUNITY RESIDENCE		D & S RESIDENTIAL SERVICES LP			
2401 DIJON DR		8911 N CAPITAL OF TX HWY		,BLDG 1	STE 1300
CEDAR PARK	TX 78613	AUSTIN TX			78759
Phone (512) 335-3966	Fax (512) 327-5355	PHONE: (512) 327-2325	FAX: (512) 327-5355		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0		License Exp Dt: 12/01/2019		
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WILLIAMSON	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 103555	Owner Information			
BARNABAS HOUSE AT DOWN HOME RANCH		DOWN HOME RANCH INC			
20250 FM 619		20250 FM 619			
ELGIN	TX 78621	ELGIN TX			78621
Phone (512) 856-0128	Fax (512) 856-0256	PHONE: (512) 856-0128	FAX: (512) 856-0256		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0		License Exp Dt: 12/18/2018		
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WILLIAMSON	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 104838	Owner Information			
ISAIAH HOUSE AT DOWN HOME RANCH		DOWN HOME RANCH INC			
20250 FM 619		20250 FM 619			
ELGIN	TX 78621	ELGIN TX			78621
Phone (512) 856-0128	Fax (512) 856-0256	PHONE: (512) 856-0128	FAX: (512) 856-0256		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0		License Exp Dt: 08/22/2019		
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WILLIAMSON	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 103554	Owner Information			
MARTHA HOUSE AT DOWN HOME RANCH		DOWN HOME RANCH INC			
20250 FM 619		20250 FM 619			
ELGIN	TX 78621	ELGIN TX			78621
Phone (512) 856-0128	Fax (512) 856-0256	PHONE: (512) 856-0128	FAX: (512) 856-0256		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0		License Exp Dt: 12/17/2018		
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WILLIAMSON	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 103553	Owner Information			
TERESA HOUSE AT DOWN HOME RANCH		DOWN HOME RANCH INC			
20250 FM 619		20250 FM 619			
ELGIN	TX 78621	ELGIN TX			78621
Phone (512) 856-0128	Fax (512) 856-0256	PHONE: (512) 856-0128	FAX: (512) 856-0256		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0		License Exp Dt: 11/05/2018		
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WILLIAMSON	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 003784	Owner Information			
ROCK HOUSE OF GEORGETOWN 1		ROCK HOUSE SUPPORT SERVICES INC			
4142 WILLIAMS DR		2252 LINGLEVILLE ROAD HWY 8			
GEORGETOWN	TX 78628	STEPHENVILLE TX			76401
Phone (512) 869-4661	Fax (512) 869-2176	PHONE: (254) 968-4004	FAX: (254) 965-8653		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0		License Exp Dt: 10/01/2018		
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WILLIAMSON	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 003813			Owner Information	
ROCK HOUSE OF GEORGETOWN 2				ROCK HOUSE SUPPORT SERVICES INC	
4146 WILLIAMS DR				2252 LINGLEVILLE ROAD HWY 8	
GEORGETOWN	TX 78628			STEPHENVILLE TX 76401	
Phone (512) 869-4662	Fax (512) 869-2176			PHONE: (254) 968-4004	FAX: (254) 965-8653
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 10/01/2018	

County	WILLIAMSON	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007430			Owner Information	
SUMMER HOUSE II				ROCK HOUSE SUPPORT SERVICES INC	
208 MESA DR				2252 LINGLEVILLE ROAD HWY 8	
GEORGETOWN	TX 78628			STEPHENVILLE TX 76401	
Phone (512) 869-0212	Fax (512) 869-2176			PHONE: (254) 968-4004	FAX: (254) 965-8653
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 03/01/2019	

County	WILLIAMSON	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007412			Owner Information	
COUNTY GLEN COMMUNITY RESIDENCE				KENMAR RESIDENTIAL SERVICES INCORPORATED	
308 COUNTY GLEN				33 CYPRESS BLVD ,SUITE 100	
LEANDER	TX 78641			ROUND ROCK TX 78665	
Phone (512) 259-7573	Fax (512) 259-3873			PHONE: (512) 336-0800	FAX: (512) 336-0812
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 03/15/2020	

County	WILLIAMSON	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007808			Owner Information	
BRUSHY CREEK COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
803 BRUSHY CRK DR				9901 LINN STATION ROAD	
ROUND ROCK	TX 78664			LOUISVILLE KY 40223-3808	
Phone (512) 218-9483	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 01/01/2019	

County	WILLIAMSON	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 003626			Owner Information	
GREYSON COMMUNITY RESIDENCE				KENMAR RESIDENTIAL SERVICES INCORPORATED	
2316 PEARSON WAY				33 CYPRESS BLVD ,SUITE 100	
ROUND ROCK	TX 78665			ROUND ROCK TX 78665	
Phone (512) 336-0800	Fax (512) 336-0812			PHONE: (512) 336-0800	FAX: (512) 336-0812
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 10/19/2019	

County	WILLIAMSON	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007444			Owner Information	
MUSTANG COMMUNITY RESIDENCE				KENMAR RESIDENTIAL SERVICES INCORPORATED	
33 CYPRESS BLVD STE 100				33 CYPRESS BLVD ,SUITE 100	
ROUND ROCK	TX 78665			ROUND ROCK TX 78665	
Phone (512) 246-0434	Fax (512) 246-0052			PHONE: (512) 336-0800	FAX: (512) 336-0812
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 03/15/2020	

County **WILLIAMSON** Reg Svcs: ICF-IID (AUSTIN REGION) Region 07 - AUSTIN

Facility Information: Facility ID: 007605

MALLARD COMMUNITY RESIDENCE
1609 MALLARD
TAYLOR TX 76574

Phone (512) 365-3743 Fax (512) 365-3743

TOTAL Lic Capacity: 0 TITLE 18: 0 ICF/IID: 6

Cert Alzh Capacity: 0 TITLE19: 0

PRIVATE Beds: 0 TITLE 18/19: 0

Owner Information

KENMAR RESIDENTIAL SERVICES INCORPORATED

33 CYPRESS BLVD ,SUITE 100

ROUND ROCK TX 78665

PHONE: (512) 336-0800 FAX: (512) 336-0812

PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED

License Exp Dt: 03/15/2020

County **WILLIAMSON** Reg Svcs: ICF-IID (AUSTIN REGION) Region 07 - AUSTIN

Facility Information: Facility ID: 003680

TAYLOR COMMUNITY RESIDENCE
4600 NORTH DRIVE
TAYLOR TX 76574

Phone (512) 365-9727 Fax

TOTAL Lic Capacity: 0 TITLE 18: 0 ICF/IID: 6

Cert Alzh Capacity: 0 TITLE19: 0

PRIVATE Beds: 0 TITLE 18/19: 0

Owner Information

KENMAR RESIDENTIAL SERVICES INCORPORATED

33 CYPRESS BLVD ,SUITE 100

ROUND ROCK TX 78665

PHONE: (512) 336-0800 FAX: (512) 336-0812

PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED

License Exp Dt: 03/15/2020