

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	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 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	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 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	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 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	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 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	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	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		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	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		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	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		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: 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		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	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		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	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		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: 007439			Owner Information	
KARLA HOUSE				ST GILES - BAYTOWN INC	
107 KARLA DR				190 E. AVE J.	
LUFKIN	TX 75901			SILSBEE TX 77656	
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:	05/01/2018
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	PHONE: (210) 646-0717 FAX: (210) 599-9789			
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	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	PHONE: (210) 646-0717 FAX: (210) 599-9789			
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: 09/17/2018			

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	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: 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	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: 05/04/2018			

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	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: 05/05/2018			

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	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	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: 05/03/2018	

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) 394-2249
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: 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) 394-2249
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: 11/20/2017	

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: 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				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 04/29/2018	

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 101793	Owner Information			
BOLDER OAKS		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
14038 BOLDER OAKS		9901 LINN STATION ROAD			
SAN ANTONIO	TX 78247	LOUISVILLE KY 40223			
Phone (210) 490-4656	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: 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: 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) 394-2249			
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: 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: 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	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 07/13/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

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	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/25/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

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	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 12/03/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

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) 394-2249			
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: 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:	007553	Owner Information		
COUNCIL OAKS AT ALMARION WAY			COUNCIL OAKS COMMUNITY OPTIONS LTD		
9430 ALMARION WAY			11901 TOEPPERWEIN		,STE 1001
SAN ANTONIO	TX	78250	SAN ANTONIO	TX	78233
Phone	(210) 684-7510	Fax	(512) 346-4125	PHONE:	(210) 646-0717
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:	003698	Owner Information		
COUNCIL OAKS AT BEECH TRAIL			COUNCIL OAKS COMMUNITY OPTIONS LTD		
7031 BEECH TRAIL			11901 TOEPPERWEIN		,STE 1001
SAN ANTONIO	TX	78244	SAN ANTONIO	TX	78233
Phone	(210) 666-1224	Fax		PHONE:	(210) 646-0717
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:	003844	Owner Information		
COUNCIL OAKS AT CHERRY GLADE			COUNCIL OAKS COMMUNITY OPTIONS LTD		
8303 CHERRY GLADE			11901 TOEPPERWEIN		,STE 1001
SAN ANTONIO	TX	78244	SAN ANTONIO	TX	78233
Phone	(210) 658-9288	Fax	(210) 599-9789	PHONE:	(210) 646-0717
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:	02/01/2018	

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID:	007234	Owner Information		
COUNCIL OAKS AT CLOUDY RIDGE			COUNCIL OAKS COMMUNITY OPTIONS LTD		
6124 CLOUDY RIDGE			11901 TOEPPERWEIN		,STE 1001
SAN ANTONIO	TX	78247	SAN ANTONIO	TX	78233
Phone	(210) 637-6506	Fax		PHONE:	(210) 646-0717
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:	007466	Owner Information		
COUNCIL OAKS AT COUNTRY CROSS			COUNCIL OAKS COMMUNITY OPTIONS LTD		
6815 COUNTRY CROSS			11901 TOEPPERWEIN		,STE 1001
SAN ANTONIO	TX	78240	SAN ANTONIO	TX	78233
Phone	(210) 697-9760	Fax		PHONE:	(210) 646-0717
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:	007337	Owner Information		
COUNCIL OAKS AT SHALLOW CREEK			COUNCIL OAKS COMMUNITY OPTIONS LTD		
8211 SHALLOW CREEK			11901 TOEPPERWEIN		,STE 1001
SAN ANTONIO	TX	78251	SAN ANTONIO	TX	78233
Phone	(210) 680-2778	Fax		PHONE:	(210) 646-0717
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:** 007546
 COUNCIL OAKS AT SHALLOW RIDGE
 8722 SHALLOW RIDGE
 SAN ANTONIO TX 78239
Phone (210) 590-2912 **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:** 003816
 COVENANT HOME
 131 BURR RD
 SAN ANTONIO TX 78209
Phone (210) 828-1424 **Fax** (210) 828-1246
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 10
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
 MISSION ROAD DEVELOPMENTAL CENTER
 8706 MISSION RD
 SAN ANTONIO TX 78214
PHONE: (210) 334-2437 **FAX:** (210) 922-6006
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
 CRATER LAKE HOME
 5707 CRATER LAKE
 SAN ANTONIO TX 78244
Phone (210) 447-7233 **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

Owner Information
 BEXAR COUNTY HOME CARE INC
 PO BOX 100347
 SAN ANTONIO TX 78201
PHONE: (210) 661-6262 **FAX:** (210) 661-2620
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
 CYPRESS HOLLOW
 13811 CYPRESS HOLLOW
 SAN ANTONIO TX 78232
Phone (210) 491-0903 **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) 394-2249
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
 DAWNWOOD
 8358 DAWNWOOD
 SAN ANTONIO TX 78250
Phone (210) 521-5253 **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
 R & K SPECIALIZED HOMES INC
 1550 NE LOOP 410 ,STE 206
 SAN ANTONIO TX 78209
PHONE: (210) 805-0802 **FAX:** (210) 805-0744
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:** 104356
 EDUCARE COMMUNITY LIVING CORPORATION - TEXAS
 3015 FALL WAY
 SAN ANTONIO TX 78247
Phone (210) 499-1282 **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) 394-2249
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 03/03/2017

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		LOUISVILLE KY 40223			
Phone (210) 491-4448	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: 04/14/2019			

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		LOUISVILLE KY 40223			
Phone (210) 491-5977	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: 12/09/2018			

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		LOUISVILLE KY 40223			
Phone (210) 494-4560	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: 05/11/2019			

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 003718	Owner Information			
EISENHauer GROUP HOME		BEXAR CO BOARD OF TRUSTEES MHMR SVCS DBA THE CTR FOR HC SVCS			
2927 EISENHauer ROAD		3031 IH 10 WEST			
SAN ANTONIO		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		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		LOUISVILLE KY 40223			
Phone (210) 497-8162	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: 04/20/2018			

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

Facility Information: Facility ID: 007415

FEATHER RIDGE
13055 FEATHER RIDGE
SAN ANTONIO

TX 78233

Phone (210) 599-8965 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: 03/01/2018

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

Facility Information: Facility ID: 007467

FLORAL WAY COMMUNITY HOME
2934 FLORAL WAY
SAN ANTONIO

TX 78247

Phone (210) 402-1267 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: 03/01/2018

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

Facility Information: Facility ID: 007400

FOREST NIGHT HOME
11209 FOREST NIGHT
SAN ANTONIO

TX 78233

Phone (210) 599-7441 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

Owner Information

BEXAR COUNTY HOME CARE INC

PO BOX 100347

SAN ANTONIO TX 78201

PHONE: (210) 661-6262 FAX: (210) 661-2620

PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED

License Exp Dt: 05/01/2018

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

Facility Information: Facility ID: 007438

FOUNTAIN LAKE
5227 FOUNTAIN LAKE
SAN ANTONIO

TX 78244

Phone (210) 662-7076 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: 03/01/2018

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

Facility Information: Facility ID: 101796

GRANADA
106 GRANADA
SAN ANTONIO

TX 78216

Phone (210) 438-9338 Fax (210) 558-9791

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) 394-2249

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: 007364

GREEN RUN
2947 GREEN RUN
SAN ANTONIO

TX 78231-1612

Phone (210) 493-9079 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) 394-2249

PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED

License Exp Dt: 01/30/2018

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: 03/14/2018	

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) 394-2249
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: 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: 11/20/2017	

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		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	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		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 01/21/2018	
PRIVATE Beds: 0	TITLE 18/19: 0				

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		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: 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		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 05/27/2019	
PRIVATE Beds: 0	TITLE 18/19: 0				

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		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 10/20/2019	
PRIVATE Beds: 0	TITLE 18/19: 0				

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) 394-2249
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: 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: 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: 07/18/2018	
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) 646-8628	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: 12/05/2017	
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) 394-2249
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: 03/01/2018	

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			
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	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			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 02/05/2018	

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			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 11/23/2018	

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			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 09/08/2018	

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: 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			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE PRIVATELY OWNED			
		License Exp Dt: 05/19/2018			

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	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE PRIVATELY OWNED			
		License Exp Dt: 07/14/2018			

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	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	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	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	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				1129 LAGO VISTA	
SAN ANTONIO	TX 78266			SAN MARCOS	TX 78660
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	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	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) 394-2249
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: 01/27/2020			

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007287	Owner Information			
SAGE TRAIL		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
14231 SAGE TRL		9901 LINN STATION ROAD			
SAN ANTONIO	TX 78231	LOUISVILLE KY 40223			
Phone (210) 493-8809	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: 12/01/2018			

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007114	Owner Information			
SAN ANTONIO STATE SUPPORTED LIVING CENTER		DADS			
6711 S NEW BRAUNFELS AVE		PO BOX 12668			
SAN ANTONIO	TX 78223	AUSTIN TX 78711			
Phone (210) 532-9610	Fax (210) 531-5183	PHONE: (512) 454-3761	FAX:		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 339			
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	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007811	Owner Information			
SHADYWOOD		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
215 SHADYWOOD		9901 LINN STATION ROAD			
SAN ANTONIO	TX 78216	LOUISVILLE KY 40223			
Phone (210) 829-0024	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: 11/01/2017			

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007603	Owner Information			
SILVER QUAIL		HOME AT SILVER QUAIL INC			
8706 SILVER QUAIL		8706 SILVER QUAIL			
SAN ANTONIO	TX 78250	SAN ANTONIO TX 78250			
Phone (210) 509-3548	Fax (210) 509-0586	PHONE: (210) 509-0114	FAX: (210) 509-0586		
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: 10/01/2019			

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007481	Owner Information			
SPRING DOVE		SOUTH TEXAS COMMUNITY LIVING CORP			
5822 SPRING DOVE		18 AUGUSTA PINES DR ,STE 140 E			
SAN ANTONIO	TX 78247	SPRING TX 77389			
Phone (210) 590-1346	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	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 03/01/2020			

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 003681	Owner Information			
SPRING HARVEST HOUSE		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
9714 SPRING HARVEST		9901 LINN STATION ROAD			
SAN ANTONIO	TX 78254-6105	LOUISVILLE KY 40223			
Phone (210) 681-8776	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: 06/20/2018			

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) 394-2249			
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: 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) 394-2249			
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: 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) 394-2249			
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: 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) 394-2249			
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: 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

VISTA CREEK COMMUNITY HOME
5403 VISTA CREEK
SAN ANTONIO

TX 78247

Phone (210) 599-3624 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: 03/01/2018

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

Facility Information: Facility ID: 102604

VISTA RUN
5303 VISTA RUN
SAN ANTONIO

TX 78247

Phone (210) 653-8261 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) 394-2249

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: 007291

WELLES HARBOR
8730 WELLES HARBOR
SAN ANTONIO

TX 78240

Phone (210) 558-6998 Fax (210) 656-0199

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

REACHING MAXIMUM INDEPENDENCE INC

6336 MONTGOMERY DR

SAN ANTONIO TX 78239

PHONE: (210) 656-6674 FAX: (210) 656-0199

PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED

License Exp Dt: 07/09/2018

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

Facility Information: Facility ID: 007420

WHISPER VALLEY
10934 WHISPER VALLEY
SAN ANTONIO

TX 78230

Phone (210) 492-3727 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) 394-2249

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: 007319

WOODLAND HILLS
9418 WOODLAND HILLS
SAN ANTONIO

TX 78250

Phone (210) 680-3632 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

R & K SPECIALIZED HOMES INC

1550 NE LOOP 410 ,STE 206

SAN ANTONIO TX 78209

PHONE: (210) 805-0802 FAX: (210) 805-0744

PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED

License Exp Dt: 09/27/2019

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

Facility Information: Facility ID: 007250

COUNCIL OAKS AT PHOENIX
8418 PHOENIX
SELMA

TX 78154

Phone (210) 945-8038 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:** 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: 02/23/2018

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: 11/21/2017

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: 03/20/2018

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: 03/05/2018

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: 05/15/2018

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: 05/13/2018

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: 03/01/2018			
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: 07/20/2018			
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) 394-2249			
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: 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: 02/28/2018			
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			
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	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) 646-6952	Fax			PHONE: (325) 646-9574	FAX: (325) 646-7911
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	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) 643-5565	Fax (325) 643-3966			PHONE: (325) 646-9574	FAX: (325) 646-7911
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13			
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	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) 643-1336	Fax (325) 643-3966			PHONE: (325) 646-9574	FAX: (325) 646-7911
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13			
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	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	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	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	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: 12/01/2017	

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: 12/01/2017			

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: 12/01/2017			

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		1129 LAGO VISTA			
LOCKHART	TX 78644	SAN MARCOS TX		78660	
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				1129 LAGO VISTA	
PORT LAVACA	TX 77979			SAN MARCOS TX 78660	
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				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				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				8000 CALMONT ,APT 249	
BROWNSVILLE	TX 78520			FORT WORTH TX 76116	
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				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 04/01/2018	

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				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				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				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				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				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				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				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				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: 07/09/2018	

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:	12/05/2017

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:** 03/15/2018
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:** 09/01/2017
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
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 09/01/2019

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
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 09/01/2019

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
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 09/01/2019

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
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 09/01/2017

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
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 09/01/2019

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
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 09/01/2019

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				
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: 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				
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: 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				
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: 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				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				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				
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: 010175			Owner Information	
27 FERRIS CREEK				AUTISTIC TREATMENT CENTER INC	
12327 FERRIS CREEK				10503 METRIC DR	
DALLAS	TX 75243			DALLAS	TX 75243
Phone (972) 644-1064	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				
PRIVATE Beds: 0	TITLE 18/19: 0			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 **Owner Information**
 ABILITY CONNECTION TEXAS JUBILEE HOUSE ABILITY CONNECTION TEXAS
 3108 JUBILEE TR 8802 HARRY HINES BLVD
 DALLAS TX 75229 DALLAS TX 75235-1716
Phone (214) 350-0282 **Fax** (214) 247-4505 **PHONE:** (214) 247-4505 **FAX:** (214) 279-5378
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 **DALLAS** Reg Svcs: **IID TEAM** Region **03 - ARLINGTON**
Facility Information: **Facility ID:** 007321 **Owner Information**
 BRADDOCK HOUSE COMMUNITY ACCESS INC
 6520 BRADDOCK PL 2040 SHILOH RD
 DALLAS TX 75232 TYLER TX 75703
Phone (214) 339-1914 **Fax** (903) 454-3363 **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:** 06/01/2019
PRIVATE Beds: 0 **TITLE 18/19:** 0

County **DALLAS** Reg Svcs: **IID TEAM** Region **03 - ARLINGTON**
Facility Information: **Facility ID:** 003756 **Owner Information**
 EDUCARE COMMUNITY LIVING CORPORATION - TEXAS EDUCARE COMMUNITY LIVING CORPORATION - TEXAS
 5922 LEWISBURG 9901 LINN STATION ROAD
 DALLAS TX 75237 LOUISVILLE KY 40223
Phone (972) 283-9057 **Fax** (972) 929-1145 **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:** 04/01/2018
PRIVATE Beds: 0 **TITLE 18/19:** 0

County **DALLAS** Reg Svcs: **IID TEAM** Region **03 - ARLINGTON**
Facility Information: **Facility ID:** 007374 **Owner Information**
 EDUCARE COMMUNITY LIVING CORPORATION - TEXAS EDUCARE COMMUNITY LIVING CORPORATION - TEXAS
 3111 LEHARVE 9901 LINN STATION ROAD
 DALLAS TX 75211 LOUISVILLE KY 40223
Phone (214) 467-9462 **Fax** (214) 333-2010 **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:** 05/01/2018
PRIVATE Beds: 0 **TITLE 18/19:** 0

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) 394-2249
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:** 04/01/2018
PRIVATE Beds: 0 **TITLE 18/19:** 0

County **DALLAS** Reg Svcs: **IID TEAM** Region **03 - ARLINGTON**
Facility Information: **Facility ID:** 003796 **Owner Information**
 EDUCARE COMMUNITY LIVING CORPORATION - TEXAS EDUCARE COMMUNITY LIVING CORPORATION - TEXAS
 14163 HAYMEADOW DR 9901 LINN STATION ROAD
 DALLAS TX 75240 LOUISVILLE KY 40223
Phone (972) 386-0402 **Fax** (972) 239-7420 **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:** 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			
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	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			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 02/22/2018	

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 104131			Owner Information	
DEVONSHIRE HOME				DAYBREAK INC	
1225 DEVONSHIRE				525 TATE 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			
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	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			
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	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 104122			Owner Information	
MEADOW HILL HOME				DAYBREAK INC	
517 MEADOW HILL				525 TATE 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			
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	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007651			Owner Information	
PRAIRIE CREEK				DAYBREAK INC	
920 PRAIRIE CREEK DR				525 TATE 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			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 09/01/2017	

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007652			Owner Information	
TATE				DAYBREAK INC	
525 TATE DR				525 TATE 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				219 VALLEY GLEN	
DESOTO	TX 75115			DESOTO	TX 75115
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) 394-2249
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: 04/01/2018	

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			Owner Information	
EVERGREEN PEBBLECREEK COMMUNITY HOME				EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC	
530 PEBBLECREEK DR				10810 SANDEN DR	
GARLAND	TX 75041			DALLAS	TX 75238
Phone (972) 496-9243	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: 007813			Owner Information	
EVERGREEN PYRAMID COMMUNITY HOME				EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC	
706 PYRAMID				10810 SANDEN DR	
GARLAND	TX 75040			DALLAS TX 75238	
Phone (972) 495-0077		Fax (972) 386-9509		PHONE: (972) 386-4834	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: 08/05/2018	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007621			Owner Information	
KNOLL POINT PLACE, LLC				KNOLL POINT PLACE, LLC	
3446 KNOLL POINT DR				3446 KNOLL POINT DR	
GARLAND	TX 75043			GARLAND TX 75043	
Phone (972) 226-2620		Fax (972) 226-2620		PHONE: (214) 384-9775	FAX: (972) 226-2620
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: 08/01/2018	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007404			Owner Information	
TRINITY MANOR				TRINITY ICF MR INC	
2813 COUNTRY VALLEY RD				2813 COUNTRY VALLEY RD	
GARLAND	TX 75043			GARLAND TX 75043	
Phone (972) 202-9700		Fax (469) 298-3736		PHONE: (972) 412-4990	FAX: (972) 412-4402
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: 02/28/2019	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007333			Owner Information	
1102 FORT SCOTT TRAIL				CALAB INC	
1102 FORT SCOTT TRAIL				3803 S ROBINSON RD	
GRAND PRAIRIE	TX 75052			GRAND PRAIRIE TX 75052-1239	
Phone (972) 988-1217		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	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007266			Owner Information	
3502 GLENDA				CALAB INC	
3502 GLENDA				3803 S ROBINSON RD	
GRAND PRAIRIE	TX 75051			GRAND PRAIRIE TX 75052-1239	
Phone (972) 263-6621		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	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		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 01/01/2018	
PRIVATE Beds: 0	TITLE 18/19: 0				

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
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:	01/01/2018

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	
917 APPLE TREE CT				9901 LINN STATION ROAD	
IRVING TX 75061				LOUISVILLE KY 40223	
Phone	(972) 445-1856	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:	01/01/2018

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
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:	01/01/2018

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
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:	04/01/2018

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
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:	10/13/2019

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
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	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	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: 003947	Owner Information			
BARRY LANE		GREENBREAK INC			
234 BARRY LANE		219 VALLEY GLEN			
LANCASTER	TX 75146	DESOTO TX 75115			
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	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: 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	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	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	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: 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	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 07/01/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

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	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 07/01/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

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) 247-4505		Fax (214) 279-5378		PHONE: (214) 247-4505	FAX: (214) 279-5378
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: 04/30/2018	
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) 247-4505	FAX: (214) 279-5378
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) 394-2249
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE:** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0
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:** 03/15/2018

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:** 03/15/2018

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 HW 35 E PO BOX 12668
 DENTON TX 76202 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) 394-2249
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE:** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0
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) 394-2249
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE:** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0
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: 03/15/2018	

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) 394-2249		
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: 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) 394-2249		
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: 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) 394-2249		
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: 01/23/2018			

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	PROGRAM TYPE: ICF/IID		
Cert Alzh Capacity: 0	TITLE19: 0	SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 08/01/2018			

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	PROGRAM TYPE: ICF/IID		
Cert Alzh Capacity: 0	TITLE19: 0	SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 08/01/2018			

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	PROGRAM TYPE: ICF/IID		
Cert Alzh Capacity: 0	TITLE19: 0	SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	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: 003880			Owner Information	
CASA BAGDAD				EL PASO COMMUNITY MHMR CENTER	
5713 BAGDAD				PO BOX 9997	
EL PASO	TX 79924			EL PASO	TX 79990
Phone (915) 562-5721	Fax (915) 351-4703			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: 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	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE PRIVATELY OWNED			
				License Exp Dt: 03/01/2018	

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: 03/01/2018	

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: 03/01/2018	

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				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 03/01/2018	

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 79900	
Phone (915) 778-0935	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	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	FAX: (254) 562-7656
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: 02/09/2020	

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	FAX: (254) 562-7656
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: 09/17/2018	

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	FAX: (254) 562-7656
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: 05/18/2018	

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	FAX: (254) 562-7656
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: 03/10/2018	

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 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: 11/01/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

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	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 11/01/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

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	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 11/01/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

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	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 11/01/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

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	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 11/01/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

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	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 11/01/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

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	PROGRAM TYPE: ICF/IID		
Cert Alzh Capacity: 0	TITLE19: 0	SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 11/01/2018			

County	FALLS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007515	Owner Information			
KIOWA HOUSE		CEN-TEX ASSOCIATION FOR RETARDED CHILDREN			
1606 ROBERT E LEE		PO DRAWER 750			
MARLIN	TX 76661	MEXIA TX 76667			
Phone (254) 804-0047	Fax (254) 562-7656	PHONE: (254) 562-2891	FAX: (254) 562-7656		
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: 10/01/2019			

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		
Cert Alzh Capacity: 0	TITLE19: 0	SERVICE TYPE PRIVATELY OWNED			
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		
Cert Alzh Capacity: 0	TITLE19: 0	SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 03/15/2018			

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 (979) 968-8821	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			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 03/15/2018			

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		
Cert Alzh Capacity: 0	TITLE19: 0	SERVICE TYPE PRIVATELY OWNED			
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**
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 **FAYETTE** Reg Svcs: ICF-IID (AUSTIN REGION) Region 07 - AUSTIN

Facility Information: Facility ID: 007673 **Owner Information**
 HIRSH SCHWARTZ COMMUNITY RESIDENCE BLUEBONNET TRAILS COMMUNITY MHMR
 2021 W US HWY 90 1111
 SCHULENBURG TX 78956 TX
Phone (979) 743-4488 **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 **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 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0 **License Exp Dt:** 10/07/2018
PRIVATE Beds: 0 **TITLE 18/19:** 0

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 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0 **License Exp Dt:** 05/31/2018
PRIVATE Beds: 0 **TITLE 18/19:** 0

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 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0 **License Exp Dt:** 09/17/2019
PRIVATE Beds: 0 **TITLE 18/19:** 0

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 8510 SOUTHMEADOW
 FRESNO TX 77545 HOUSTON TX 77071
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 **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	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	
BTTT 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	
BTTT 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: 05/16/2018	

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
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:	03/15/2018

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
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:	03/15/2020

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:	
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:	
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
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
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		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 08/04/2018	
PRIVATE Beds: 0	TITLE 18/19: 0				

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		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	GRAYSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 101455			Owner Information	
EVERGREEN CARRIAGE ESTATES COMMUNITY HOME				EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC	
2304 CARRIAGE ESTATES ROAD				10810 SANDEN DR	
SHERMAN	TX 75092			DALLAS	TX 75238
Phone (903) 813-3278		Fax (903) 893-6637		PHONE: (972) 386-4834	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: 07/03/2019	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	GRAYSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 101453			Owner Information	
EVERGREEN NORTHBROOK COMMUNITY HOME				EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC	
1732 NORTHBROOK				10810 SANDEN DR	
SHERMAN	TX 75092			DALLAS	TX 75238
Phone (903) 870-2113		Fax (903) 893-6637		PHONE: (972) 386-4834	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: 07/02/2019	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	GREGG	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 007492			Owner Information	
MONTE CARLO COMMUNITY HOME				H M S INVESTMENTS INC	
12 MONTE CARLO				112 S WARD DR	
GLADEWATER	TX 75647			LONGVIEW	TX 75604
Phone (903) 845-6662		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: 12/22/2017	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	GREGG	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 007572			Owner Information	
TENERY STREET COMMUNITY HOME				L M R HEALTHCARE SERVICES INC	
502 TENERY ST				112 S WARD	
GLADEWATER	TX 75647			LONGVIEW	TX 75604
Phone (903) 845-4275		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: 12/03/2019	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	GREGG	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 007224			Owner Information	
EVERGREEN DANVILLE ROAD COMMUNITY HOME		EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC			
1104 DANVILLE RD		10810 SANDEN DR			
KILGORE TX 75662		DALLAS TX 75238			
Phone (903) 984-9370	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			
PRIVATE Beds: 0	TITLE 18/19: 0	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			Owner Information	
ROYAL DRIVE COMMUNITY HOME		S & H HOMES INC			
3009 ROYAL DR		112 S WARD DR			
KILGORE TX 75662		LONGVIEW TX 75604			
Phone (903) 984-0486	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			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE PRIVATELY OWNED			
		License Exp Dt: 07/10/2018			

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	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE PRIVATELY OWNED			
		License Exp Dt: 06/11/2018			

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	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	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	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	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	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	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
 EVERGREEN STONE TRAIL COMMUNITY HOME
 1205 STONE TRAIL
 LONGVIEW TX 75604
 Phone (903) 295-1277 Fax (903) 295-9993
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: 01/23/2018

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

Facility Information: Facility ID: 007261
 HARMONY HOUSE I I
 1012 EAGLE HILL TRAIL
 LONGVIEW TX 75601
 Phone (903) 758-2439 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
 HARMONY LIVING CENTERS 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: 02/27/2019

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

Facility Information: Facility ID: 007255
 HONEYSUCKLE COMMUNITY HOME
 9 HONEYSUCKLE
 LONGVIEW TX 75604
 Phone (903) 297-3056 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
 D & S RESIDENTIAL SERVICES LP
 8911 N CAPITAL OF TX HWY ,BLDG 1 STE 1300
 AUSTIN TX 78759
PHONE: (512) 327-2325 **FAX:** (512) 327-5355
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
 LOYD COURT 1
 312 LOYD COURT
 LONGVIEW TX 75605
 Phone (903) 663-9493 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

Owner Information
 PACE OPPORTUNITY CENTERS INC
 1101 JAYCEE DR
 LONGVIEW TX 75604
PHONE: (903) 238-9523 **FAX:** (903) 238-9528
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
 MARTIN COMMUNITY HOME
 2809 CLENDENEN
 LONGVIEW TX 75601
 Phone (903) 758-6801 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: 09/24/2019

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

Facility Information: Facility ID: 007495
 MELTON HOUSE
 517 MELTON
 LONGVIEW TX 75602
 Phone (903) 753-4685 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

Owner Information
 PACE OPPORTUNITY CENTERS INC
 1101 JAYCEE DR
 LONGVIEW TX 75604
PHONE: (903) 238-9523 **FAX:** (903) 238-9528
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			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: 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			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			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 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			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			
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	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 75601			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			
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	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				1129 LAGO VISTA	
SEGUIN	TX 78155			SAN MARCOS	TX 78660
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			
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	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				1129 LAGO VISTA	
SEGUIN	TX 78155			SAN MARCOS TX 78660	
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			
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	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) 394-2249
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: 09/01/2018	

County	GUADALUPE	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 003999			Owner Information	
MOSAIC				MOSAIC	
974 E CEDAR				2245 MIDWAY ROAD ,STE 300	
SEGUIN	TX 78155			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			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 01/01/2019	

County	GUADALUPE	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 003943			Owner Information	
MOSAIC				MOSAIC	
1622 WILLOW LN				2245 MIDWAY ROAD ,STE 300	
SEGUIN	TX 78155			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			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			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				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
1005 RIVER OAK DR				9901 LINN STATION ROAD	
SEGUIN	TX 78155			LOUISVILLE KY 40223	
Phone (830) 303-6835	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: 05/20/2019	

County	HALE	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:	Facility ID: 003939			Owner Information	
RILEY ARMSTRONG RESIDENTIAL FACILITY				CENTRAL PLAINS CENTER	
2911 W 21ST ST				2700 YONKERS ST	
PLAINVIEW	TX 79072			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			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt:	

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

Facility Information: Facility ID: 003809 Owner Information
 FRIES HOUSE ST GILES - BAYTOWN INC
 190 E AVE J 190 E. AVE J.
 SILSBEE TX 77656 SILSBEE TX 77656
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 **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 **HARDIN** Reg Svcs: REGION 5 ICF/IID Region 05 - BEAUMONT

Facility Information: Facility ID: 007554 Owner Information
 ROOSEVELT COMMUNITY HOME DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF BEAUMONT, LLC
 1020 ROOSEVELT DRIVE 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 **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 **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 **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 **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) 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
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: 003605 Owner Information
 KILGORE HOUSE ST GILES - BAYTOWN INC
 2203 KILGORE RD 190 E. AVE J.
 BAYTOWN TX 77520 SILSBEE TX 77656
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 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 09/01/2017

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) 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
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: 003671			Owner Information	
MCFARLAND HOUSE				ST GILES - BAYTOWN INC	
1706 MCFARLAND				190 E. AVE J.	
BAYTOWN	TX 77520			SILSBEE TX 77656	
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				190 E. AVE J.	
BAYTOWN	TX 77520			SILSBEE TX 77656	
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: 09/01/2017			

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			
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: 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			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED			
		License Exp Dt: 09/23/2019			

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			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED			
		License Exp Dt: 03/10/2019			

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				12777 JONES RD #103	
CYPRESS	TX 77429			HOUSTON TX 77070	
Phone (281) 373-9404	Fax (281) 373-3820			PHONE: (281) 469-8058	FAX: (281) 469-5030
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: 06/14/2018			

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: 07/14/2018			
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	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: 010197	Owner Information			
MUELLER HOUSE		REACH UNLIMITED INC			
11910 MUELLER CEMETERY RD		12777 JONES RD #103			
CYPRESS	TX 77429	HOUSTON TX 77070			
Phone (281) 373-9406	Fax (281) 373-4074	PHONE: (281) 469-8058 FAX: (281) 469-5030			
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: 09/24/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

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	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: 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	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: 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	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: 007661			Owner Information	
1801 BRANARD				ST GILES - BAYTOWN INC	
1801 BRANARD ST				190 E. AVE J.	
HOUSTON	TX 77098			SILSBEE TX 77656	
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	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 09/01/2017	

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				190 E. AVE J.	
HOUSTON	TX 77019			SILSBEE TX 77656	
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: 12/01/2017	

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 III				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			PHONE: (713) 271-5795	FAX: (713) 981-4512
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: 03/26/2018	

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			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	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			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: 03/01/2018	

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			PHONE: (713) 271-5795	FAX: (713) 981-4512
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: 08/21/2018	

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	PHONE: (713) 271-5795		FAX: (713) 981-4512	
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: 02/23/2018			

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	PHONE: (502) 394-2100		FAX: (502) 394-2249	
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: 03/01/2018			

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		12777 JONES RD			#103
HOUSTON	TX 77066	HOUSTON TX			77070
Phone (281) 537-1679	Fax (281) 580-2951	PHONE: (281) 469-8058		FAX: (281) 469-5030	
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: 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	PHONE: (502) 394-2100		FAX: (502) 394-2249	
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: 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	PHONE: (502) 394-2100		FAX: (502) 394-2249	
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: 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	PHONE: (713) 750-5600		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	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003980	Owner Information			
EBONY COMMUNITY HOME 2519 LOWER VALLEY DRIVE HOUSTON	TX 77067-1901	EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP 9901 LINN STATION ROAD LOUISVILLE KY 40223-3808			
Phone (281) 586-7067	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	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007585	Owner Information			
FROSTVIEW HOUSE II 15331 E ANTONE HOUSTON	TX 77071	D & D CARE HOMES INC 820 PARK TWO DRIVE SUGARLAND TX 77478			
Phone (713) 728-4148	Fax (713) 271-8585	PHONE: (713) 728-4149	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	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	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 04/10/2018			

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	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: 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	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: 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	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: 003907	Owner Information			
JERSEY VILLAGE		EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST			
16130 ACAPULCO		9901 LINN STATION ROAD			
HOUSTON	TX 77040	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	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	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007597	Owner Information			
K AND K LIVING CENTER 2		K & K LIVING CENTER INC			
16602 GAELDOM LN		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	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 04/07/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

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	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 03/30/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

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	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 10/09/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

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	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 10/10/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

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	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: 007239			Owner Information	
MERIDIAN LIVING CENTER 7231 AUGUSTINE DR HOUSTON	TX 77036			MERIDIAN LIVING CENTER INC #4 MOCKINGBIRD 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			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 02/15/2018	

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007428			Owner Information	
MERIDIAN LIVING CENTER II 10610 ODYSSEY CT HOUSTON	TX 77099			MERIDIAN LIVING CENTER INC #4 MOCKINGBIRD 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			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 07/01/2018	

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007595			Owner Information	
PACE OPPORTUNITY CENTERS INC. 4002 WYNE STREET HOUSTON	TX 77017			PACE OPPORTUNITY CENTERS INC 1101 JAYCEE DR LONGVIEW TX 75604	
Phone (903) 238-9523	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			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 04/08/2018	

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007275			Owner Information	
PEBBLESHIRE HOUSE 7865 PECAN VILLAS HOUSTON	TX 77061			S&G COMMUNITY LIVING CENTER INC 7865 PECAN VILLAS HOUSTON TX 77061	
Phone (713) 640-1044	Fax (281) 334-7850			PHONE: (713) 598-1471	FAX: (281) 334-7850
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: 05/01/2018	

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007296			Owner Information	
PERIWINKLE HOUSE 1638 PERIWINKLE ST HOUSTON	TX 77038			JOHN M LUGAY 17126 WUNDER HILL DR SPRING TX 77379	
Phone (281) 448-9005	Fax (281) 379-6068			PHONE: (281) 379-4833	FAX: (281) 379-6068
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: 08/09/2018	

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007384			Owner Information	
RAVENHEAD LIVING CENTER 314 RAVENHEAD ST HOUSTON	TX 77034			DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF HOUSTON LLC 4115 GALVESTON RD 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	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: 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	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: 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	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: 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				12777 JONES RD	#103
HOUSTON	TX 77055			HOUSTON	TX 77070
Phone (713) 956-7860	Fax (713) 956-4835			PHONE: (281) 469-8058	FAX: (281) 469-5030
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: 09/27/2019			

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			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE PRIVATELY OWNED			
		License Exp Dt: 02/14/2018			

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				8510 SOUTHMEADOW	
HOUSTON	TX 77096			HOUSTON	TX 77071
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			
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: 007263			Owner Information	
UCG - HUMMINGBIRD HOUSE				FROSTVIEW LANE LLC	
9726 S. HANWORTH DR.				8510 SOUTHMEADOW	
HOUSTON	TX 77031			HOUSTON	TX 77071
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			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE PRIVATELY OWNED			
		License Exp Dt: 09/01/2017			

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007801			Owner Information	
UCG NIGHTINGALE I 13927 MAGNUS LANE HOUSTON	TX 77083			FROSTVIEW LANE LLC 8510 SOUTHMEADOW HOUSTON TX 77071	
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			
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: 007806			Owner Information	
UCG NIGHTINGALE I I 7327 BEECHNUT ST HOUSTON	TX 77074			FROSTVIEW LANE LLC 8510 SOUTHMEADOW HOUSTON TX 77071	
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			
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: 007604			Owner Information	
UNITY HOUSE 10507 OFFER ST HOUSTON	TX 77031			EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST 9901 LINN STATION ROAD 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			
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: 007369			Owner Information	
WEST ROAD HOUSE 7811 WEST ROAD HOUSTON	TX 77064			DIVERSITY GROUP LC 7807 LONG POINT #106 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			
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	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003721			Owner Information	
WESTBURY HOUSE 5707 WARM SPRINGS HOUSTON	TX 77035			MHMR AUTHORITY OF HARRIS COUNTY 2850 FANNIN HOUSTON TX 77265-5381	
Phone (713) 723-5589	Fax			PHONE: (713) 750-5600	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	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003941			Owner Information	
WESTLAKE FOREST 2422 HEATHER GOLD HOUSTON	TX 77084			EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST 9901 LINN STATION ROAD 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			
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: 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			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 11/19/2019	

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			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/25/2018	

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			
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: 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			
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	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			
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: 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			
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: 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		
Cert Alzh Capacity: 0	TITLE19: 0	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: 007218	Owner Information			
FROSTVIEW HOUSE		FROSTVIEW LANE LLC			
7310 FROSTVIEW LN		8510 SOUTHMEADOW			
MISSOURI CITY	TX 77489	HOUSTON TX 77071			
Phone (713) 271-0480	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		
Cert Alzh Capacity: 0	TITLE19: 0	SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 09/01/2017			

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		
Cert Alzh Capacity: 0	TITLE19: 0	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: 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		
Cert Alzh Capacity: 0	TITLE19: 0	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: 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		
Cert Alzh Capacity: 0	TITLE19: 0	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: 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		
Cert Alzh Capacity: 0	TITLE19: 0	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: 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		
Cert Alzh Capacity: 0	TITLE19: 0	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: 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		
Cert Alzh Capacity: 0	TITLE19: 0	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: 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		
Cert Alzh Capacity: 0	TITLE19: 0	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: 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		
Cert Alzh Capacity: 0	TITLE19: 0	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: 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		
Cert Alzh Capacity: 0	TITLE19: 0	SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 01/25/2020			

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		
Cert Alzh Capacity: 0	TITLE19: 0	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: 105856	Owner Information			
CHOCTAW GROUP HOME		UCG CENTRAL TEXAS HOLDINGS LLC			
11719 COCONINO LANE		1129 LAGO VISTA			
TOMBALL	TX 77377	SAN MARCOS TX 78660			
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		1129 LAGO VISTA			
TOMBALL	TX 77377	SAN MARCOS TX 78660			
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		12777 JONES RD #103			
TOMBALL	TX 77375	HOUSTON TX 77070			
Phone (281) 351-6612	Fax (281) 357-4680	PHONE: (281) 469-8058 FAX: (281) 469-5030			
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: 06/13/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

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	License Exp Dt: 08/02/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

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		12777 JONES RD #103			
TOMBALL	TX 77375	HOUSTON TX 77070			
Phone (281) 351-9735	Fax (281) 351-5868	PHONE: (281) 469-8058 FAX: (281) 469-5030			
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: 01/18/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

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	License Exp Dt: 10/01/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

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			
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	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			
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	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	,BLDG 1 STE 1300
BUDA	TX 78610			AUSTIN TX	78759
Phone (512) 312-2228	Fax (512) 504-9639			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	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	,BLDG 1 STE 1300
DRIPPING SPRINGS	TX 78620			AUSTIN TX	78759
Phone (512) 894-4230	Fax (512) 327-7181			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	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				1129 LAGO VISTA	
SAN MARCOS	TX 78666			SAN MARCOS TX	78660
Phone (512) 392-0099	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			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
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				1129 LAGO VISTA	
SAN MARCOS	TX 78666			SAN MARCOS TX	78660
Phone (512) 392-0088	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			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
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		1129 LAGO VISTA			
SAN MARCOS	TX 78666	SAN MARCOS TX 78660			
Phone (512) 392-0999	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: 09/01/2017			

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	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	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	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 03/01/2018			

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	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 03/01/2018			

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	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 03/01/2018			

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	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 03/01/2018			

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 MISSION	TX 78574			18 AUGUSTA PINES DR	,STE 140 E
Phone (956) 585-7192	Fax (956) 631-6156			SPRING TX	77389
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PHONE: (281) 351-1758	FAX: (210) 255-4500
			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
			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 SUNDOWN	TX 79372			9901 LINN STATION ROAD	
Phone (806) 229-2153	Fax (806) 894-9605			LOUISVILLE KY	40223
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PHONE: (502) 394-2100	FAX: (502) 394-2249
			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
			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 GRANBURY	TX 76049			PO BOX 758	
Phone (817) 573-1559	Fax (817) 579-6611			GRANBURY TX	76048
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 8			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PHONE: (817) 573-6922	FAX: (817) 579-6611
			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
			License Exp Dt: 04/01/2018		

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 TOLAR	TX 76476			PO BOX 758	
Phone (254) 835-4977	Fax (817) 579-6611			GRANBURY TX	76048
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PHONE: (817) 573-6922	FAX: (817) 579-6611
			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
			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 BIG SPRING	TX 79720			8911 N CAPITAL OF TX HWY	,BLDG 1 STE 1300
Phone (432) 263-1408	Fax (512) 327-5355			AUSTIN TX	78759
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PHONE: (512) 327-2325	FAX: (512) 327-5355
			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
			License Exp Dt: 12/01/2017		

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 GREENVILLE	TX 75402			400 AIRPORT RD	
Phone (903) 455-4476	Fax			TERRELL TX	75160
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PHONE: (972) 388-2000	FAX: (972) 563-5322
			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED	
			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				
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: 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			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
PRIVATE Beds: 0	TITLE 18/19: 0			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			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
PRIVATE Beds: 0	TITLE 18/19: 0			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			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			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) 394-2249
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: 12/17/2017	

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) 394-2249
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: 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			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			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				190 E. AVE J.	
BEAUMONT	TX 77708			SILSBEE TX 77656	
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			
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: 003754			Owner Information	
COLE ROAD HOUSE				ST GILES - BAYTOWN INC	
5820 COLE RD				190 E. AVE J.	
BEAUMONT	TX 77706			SILSBEE TX 77656	
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			
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: 003791			Owner Information	
HORIZON HOUSE				ST GILES - BAYTOWN INC	
4176 TREADWAY				190 E. AVE J.	
BEAUMONT	TX 77706			SILSBEE TX 77656	
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			
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: 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			
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: 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			
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: 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) 394-2249
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: 03/01/2018	

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			
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: 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			
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: 007326			Owner Information	
NORTH HOUSE				ST GILES - BAYTOWN INC	
8185 PARK N DR				190 E. AVE J.	
BEAUMONT	TX 77708			SILSBEE	TX 77656
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			
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: 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			
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: 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			
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: 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) 394-2249			
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: 02/28/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

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	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: 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	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: 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	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: 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	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 **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 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 08/09/2018

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 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 09/04/2019

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) 394-2249
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 10/01/2017

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

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 RUSH				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) 394-2249
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: 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: 03/01/2018	

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			
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: 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			
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: 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			
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	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			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 07/01/2019	

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			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/26/2020	

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			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 04/08/2018	

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: 06/01/2018	

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: 03/03/2018	

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**
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PHONE:** (806) 632-6588 **FAX:**
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 **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 **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 **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 **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 **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 **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 **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 **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 **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	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			
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	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			
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	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			
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	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			
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	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			
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: 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
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 **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**
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 **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**
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 **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**
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 436 **PHONE:** (512) 454-3761 **FAX:**
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 **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 **SERVICE TYPE** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0 **License Exp Dt:** 01/01/2019
PRIVATE Beds: 0 **TITLE 18/19:** 0

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 **SERVICE TYPE** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0 **License Exp Dt:** 01/01/2019
PRIVATE Beds: 0 **TITLE 18/19:** 0

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	License Exp Dt:	01/01/2019
PRIVATE Beds: 0	TITLE 18/19: 0				

County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:	Facility ID: 007491	Owner Information			
ANNADALE MANOR INC.		ANNADALE MANOR INC.			
10702 COUNTY RD 1300		7614 BAYLOR			
WOLFFORTH	TX 79382	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
Cert Alzh Capacity: 0	TITLE19: 0	SERVICE TYPE	PRIVATELY OWNED	License Exp Dt:	04/01/2018
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		MOSAIC			
103 E VISER		2245 MIDWAY ROAD			,STE 300
MADISONVILLE	TX 77864	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	MCLENNAN	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 003826	Owner Information			
NORTHWEST WACO LIVING RESIDENCE		HEART OF TEXAS REGIONAL MHMR CENTER			
2323 N 39TH ST		110 S 12TH ST			
WACO	TX 76708	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
Cert Alzh Capacity: 0	TITLE19: 0	SERVICE TYPE	GOVERNMENT BASED	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		HEART OF TEXAS REGIONAL MHMR CENTER			
108 WEST WARD		110 S 12TH ST			
WACO	TX 76706	WACO TX			76703
Phone (254) 662-6144	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	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		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
1506 28TH ST		9901 LINN STATION ROAD			
HONDO	TX 78861-3208	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
Cert Alzh Capacity: 0	TITLE19: 0	SERVICE TYPE	PRIVATELY OWNED	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		MARC INC			
3005 W GOLFCOURSE RD		2701 NORTH A ST			
MIDLAND	TX 79701	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				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 01/23/2020			

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	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 06/25/2018			

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	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 12/13/2017			

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	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 11/01/2019			

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	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 11/01/2019			

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	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	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	PROGRAM TYPE: ICF/IID		
Cert Alzh Capacity: 0	TITLE19: 0	SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	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	PROGRAM TYPE: ICF/IID		
Cert Alzh Capacity: 0	TITLE19: 0	SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	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	PROGRAM TYPE: ICF/IID		
Cert Alzh Capacity: 0	TITLE19: 0	SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	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	PROGRAM TYPE: ICF/IID		
Cert Alzh Capacity: 0	TITLE19: 0	SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	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	PROGRAM TYPE: ICF/IID		
Cert Alzh Capacity: 0	TITLE19: 0	SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 10/01/2016			

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	PROGRAM TYPE: ICF/IID		
Cert Alzh Capacity: 0	TITLE19: 0	SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 04/10/2018			

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				
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: 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				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				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				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
				License Exp Dt:	

County	NAVARRO	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003773			Owner Information	
45TH STREET 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				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				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 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				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				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	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: 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: 02/03/2018			
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: 12/14/2017			
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: 01/23/2018			
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			License Exp Dt:	
PRIVATE Beds: 0	TITLE 18/19: 0				

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			License Exp Dt:	
PRIVATE Beds: 0	TITLE 18/19: 0				

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			License Exp Dt: 09/01/2018	
PRIVATE Beds: 0	TITLE 18/19: 0				

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) 394-2249	
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: 08/01/2019	
PRIVATE Beds: 0	TITLE 18/19: 0				

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) 394-2249	
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: 08/01/2019	
PRIVATE Beds: 0	TITLE 18/19: 0				

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			
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PHONE:	(502) 394-2100
PRIVATE Beds:	0	TITLE 18/19:	0	FAX:	(502) 394-2249
		PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
		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			
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PHONE:	(502) 394-2100
PRIVATE Beds:	0	TITLE 18/19:	0	FAX:	(502) 394-2249
		PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
		License Exp Dt:	08/01/2019		

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			
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PHONE:	(502) 394-2100
PRIVATE Beds:	0	TITLE 18/19:	0	FAX:	(502) 394-2249
		PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
		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			
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PHONE:	(502) 394-2100
PRIVATE Beds:	0	TITLE 18/19:	0	FAX:	(502) 394-2249
		PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
		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			
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PHONE:	(502) 394-2100
PRIVATE Beds:	0	TITLE 18/19:	0	FAX:	(502) 394-2249
		PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
		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			
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PHONE:	(502) 394-2100
PRIVATE Beds:	0	TITLE 18/19:	0	FAX:	(502) 394-2249
		PROGRAM TYPE:	ICF/IID	SERVICE TYPE	PRIVATELY OWNED
		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) 394-2249
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: 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) 394-2249
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: 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	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: 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			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 08/09/2018	

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: 06/03/2018	

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: 06/08/2018	

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				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				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: 08/02/2018	

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: 07/09/2018	

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

Facility Information: Facility ID: 010353
 ANN ROAD GROUP HOME
 3109 COUNTY RD 4167
 TYLER TX 75701

Phone (903) 597-8823 **Fax** (903) 535-7386

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
 ANDREWS CENTER
 2323 W FRONT ST
 TYLER TX 75702
PHONE: (903) 567-1351 **FAX:** (903) 535-7384
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			Owner Information	
BRECKENRIDGE VILLAGE OF TYLER-EAGLES NEST HOUSE				BAPTIST CARE FACILITIES FOR PERSONS WITH MENTAL DISABILITIES INC	
15062 CR 1145				15062 CR 1145	
TYLER		TX	75704	TYLER	TX 75704
Phone	(903) 596-8100	Fax	(903) 596-8104	PHONE:	(903) 596-8100 FAX: (903) 596-8104
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:	02/08/2019

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	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	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	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	License Exp Dt:	05/19/2018

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	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	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	PROGRAM TYPE:	ICF/IID SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds:	0	TITLE 18/19:	0	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	PROGRAM TYPE:	ICF/IID SERVICE TYPE GOVERNMENT BASED
PRIVATE Beds:	0	TITLE 18/19:	0	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			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/08/2018	

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			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 03/04/2018	

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			
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: 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			
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: 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			
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: 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	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 06/17/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

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	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: 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	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	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	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: 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	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: 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				
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: 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) 394-2249
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:	01/01/2018

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) 394-2249
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:	01/01/2018

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) 394-2249
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:	01/01/2018

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) 394-2249
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:	01/01/2018

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

Facility Information: **Facility ID:** 101452
 EVERGREEN ECHO SUMMIT COMMUNITY HOME
 6218 ECHO SUMMIT LN
 ARLINGTON TX 76017

Phone (817) 478-0774 **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: 05/28/2019

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: 11/01/2017

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: 05/18/2018

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID:	007301	Owner Information		
FOX HILL COMMUNITY HOME			EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP		
3202 FOX HILL DR			9901 LINN STATION ROAD		
ARLINGTON	TX	76015	LOUISVILLE	KY	40223-3808
Phone	(817) 468-1444	Fax			
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PHONE:	(502) 394-2100
PRIVATE Beds:	0	TITLE 18/19:	0	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		
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PHONE:	(502) 394-2100
PRIVATE Beds:	0	TITLE 18/19:	0	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:	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		
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PHONE:	(817) 294-9675
PRIVATE Beds:	0	TITLE 18/19:	0	FAX:	(817) 294-9907
				PROGRAM TYPE:	ICF/IID
				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		
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PHONE:	(817) 795-7999
PRIVATE Beds:	0	TITLE 18/19:	0	FAX:	(817) 548-0911
				PROGRAM TYPE:	ICF/IID
				SERVICE TYPE	PRIVATELY OWNED
				License Exp Dt:	04/08/2018

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		
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	8
Cert Alzh Capacity:	0	TITLE19:	0	PHONE:	(817) 569-4029
PRIVATE Beds:	0	TITLE 18/19:	0	FAX:	(817) 569-4130
				PROGRAM TYPE:	ICF/IID
				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			
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PHONE:	(502) 394-2100
PRIVATE Beds:	0	TITLE 18/19:	0	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: 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 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: 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) 394-2249			
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: 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			
NEWSTART LIVING CENTER I		NEWSTART 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: 06/01/2018			
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			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/01/2018	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007262			Owner Information	
CHAMBERS CREEK COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
613 CHAMBERS CRK				9901 LINN STATION ROAD	
EVERMAN	TX 76140			LOUISVILLE KY	40223-3808
Phone (817) 551-7783	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: 003870			Owner Information	
NEWSTART LIVING CENTER II				NEWSTART INC	
1000 COURY RD				PO BOX 331629	
EVERMAN	TX 76140			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: 11/02/2019	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003931			Owner Information	
NEWSTART LIVING CENTER I I I				NEWSTART INC	
5124 QUEEN ANNE DR				PO BOX 331629	
FOREST HILL	TX 76119			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: 05/01/2019	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 105597			Owner Information	
2YORK				ROCK HOUSE SUPPORT SERVICES INC	
2 YORK DRIVE				2252 LINGLEVILLE ROAD HWY 8	
FORT WORTH	TX 76134			STEPHENVILLE TX	76401
Phone (817) 615-8848	Fax (817) 294-4516			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: 07/19/2019	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003855			Owner Information	
BARCELONA				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
4308 BARCELONA				9901 LINN STATION ROAD	
FORT WORTH	TX 76133-5410			LOUISVILLE KY	40223-3808
Phone (817) 292-0766	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: 08/12/2019	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007802	Owner Information			
CIBOLO HOUSE		MHMR OF TARRANT COUNTY			
3704 CIBOLO		PO BOX 2603			
FORT WORTH	TX 76133	FORT WORTH TX 76113			
Phone (817) 292-8505	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: 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	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: 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) 394-2249			
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: 07/16/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

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) 394-2249			
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: 01/01/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

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) 394-2249			
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: 01/01/2020			
PRIVATE Beds: 0	TITLE 18/19: 0				

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) 394-2249			
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: 06/20/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

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) 394-2249			
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: 06/20/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

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) 394-2249			
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: 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) 394-2249			
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: 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			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 04/01/2018	

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) 394-2249
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: 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: 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) 394-2249
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: 02/27/2018	

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) 394-2249
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: 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) 394-2249			
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: 01/01/2018			
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: 08/01/2018	

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: 03/15/2018	

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			
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: 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			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/10/2020	

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			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 10/30/2019	

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			
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: 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			
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: 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: 007259			Owner Information	
LEA FARMS RESIDENCE				GRACE RESIDENTIAL ENTERPRISES	
1318 PIEDMONT				1450 YEOMANS RD	,APT 1204
ABILENE	TX 79601			ABILENE	TX 79602
Phone (325) 673-3397	Fax (325) 673-3397			PHONE: (512) 426-7618	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: 04/05/2018	

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: 06/01/2018	

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	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE PRIVATELY OWNED			
		License Exp Dt: 06/01/2018			

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	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	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	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE PRIVATELY OWNED			
		License Exp Dt: 06/01/2018			

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	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	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	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	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	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE PRIVATELY OWNED			
		License Exp Dt: 06/01/2018			

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: 05/01/2018	

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: 04/06/2018	

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: 01/23/2018	

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: 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			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: 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				
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: 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: 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: 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: 003752			Owner Information	
ALLANDALE				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
6110 A BULLARD DR				9901 LINN STATION ROAD	
AUSTIN	TX 78731			LOUISVILLE	KY 40223
Phone (512) 451-5801	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2249
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 12			
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: 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: 01/27/2018	

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) 394-2249
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: 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) 394-2249
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: 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) 394-2249
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: 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: 03/15/2018	

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007312			Owner Information	
BOWIE HOUSE				PREMIEANT INCORPORATED	
6900 WHISPERING OAKS 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: 01/27/2018	

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			
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: 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			
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: 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) 394-2249
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: 10/01/2018	

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			
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: 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) 394-2249
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: 10/01/2018	

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) 394-2249
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: 10/01/2018	

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) 394-2249
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: 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: 06/01/2018	

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 003793			Owner Information	
MARY LEE FOUNDATION SOUTHPOINTE 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			
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: 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			
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: 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			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 12/31/2019	

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

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			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 05/02/2019	

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) 394-2249
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: 10/01/2018	

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: 01/01/2018	

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) 394-2249
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: 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: 01/27/2018	

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) 394-2249
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: 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) 394-2249
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: 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			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 01/27/2018	

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			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 04/03/2019	

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) 394-2249
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: 11/01/2017	

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) 394-2249
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: 11/01/2019	

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			
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	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) 394-2249
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: 03/01/2018	

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			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			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			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			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			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			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			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			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	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	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	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	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	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	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		1129 LAGO VISTA			
VICTORIA	TX 77904	SAN MARCOS TX 78660			
Phone (512) 578-2940	Fax	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	License Exp Dt: 03/01/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

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		1129 LAGO VISTA			
VICTORIA	TX 77904	SAN MARCOS TX 78660			
Phone (512) 578-1527	Fax	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	License Exp Dt: 03/01/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

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		1129 LAGO VISTA			
VICTORIA	TX 77901	SAN MARCOS TX 78660			
Phone (512) 575-1558	Fax	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	License Exp Dt: 03/01/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

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			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			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			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 03/18/2018	

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			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 03/18/2018	

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			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 04/11/2018	

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			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 04/11/2018	

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			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 04/10/2018	

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			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 04/10/2018	

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			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 03/11/2019	

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	
BRENNHAM STATE SUPPORTED LIVING CENTER				DADS	
HIGHWAY 36 SOUTH				PO BOX 12668	
BRENNHAM	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			
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	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			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 08/17/2018	

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) 723-8048			PHONE: (940) 397-3101	FAX: (940) 397-3150
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	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			
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	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			
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	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			
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: 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: 07/02/2018	

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: 06/01/2018	

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			
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: 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			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 12/18/2018	

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			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 08/22/2019	

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			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 12/17/2018	

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				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 11/05/2018			

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				
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: 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	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	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	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 03/01/2019			

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	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 03/15/2018			

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	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	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	
4207 DEER TRACT				33 CYPRESS BLVD	,SUITE 100
ROUND ROCK	TX 78681			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: 03/15/2018	

County	WILLIAMSON	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007605			Owner Information	
MALLARD COMMUNITY RESIDENCE				KENMAR RESIDENTIAL SERVICES INCORPORATED	
1609 MALLARD				33 CYPRESS BLVD	,SUITE 100
TAYLOR	TX 76574			ROUND ROCK	TX 78665
Phone (512) 365-3743	Fax (512) 365-3743			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: 03/15/2018	

County	WILLIAMSON	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 003680			Owner Information	
TAYLOR COMMUNITY RESIDENCE				KENMAR RESIDENTIAL SERVICES INCORPORATED	
4600 NORTH DRIVE				33 CYPRESS BLVD	,SUITE 100
TAYLOR	TX 76574			ROUND ROCK	TX 78665
Phone (512) 365-9727	Fax (512) 365-8471			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: 03/15/2018	