

Texas Department of Aging and Disability Services

ICF/IID Directory June, 2017

Sorted by: County, City, Facility Name

County ANDERSON	Reg Svcs: ICF/IID TEAM	Region 04 - TYLER
Facility Information:	Facility ID: 003868	Owner Information
ELKHART INN COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP
208 FM 1817		9901 LINN STATION ROAD
ELKHART TX 75839		LOUISVILLE KY 40223-3808
Phone (903) 764-5072	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019
PRIVATE Beds: 0	TITLE 18/19: 0	

County ANDERSON	Reg Svcs: ICF/IID TEAM	Region 04 - TYLER
Facility Information:	Facility ID: 007294	Owner Information
CRESTVIEW COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP
216 CREST DR		9901 LINN STATION ROAD
PALESTINE TX 75801-7360		LOUISVILLE KY 40223-3808
Phone (903) 729-1898	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019
PRIVATE Beds: 0	TITLE 18/19: 0	

County ANDERSON	Reg Svcs: ICF/IID TEAM	Region 04 - TYLER
Facility Information:	Facility ID: 003685	Owner Information
MAVERICK COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP
427 MAVERICK DR		9901 LINN STATION ROAD
PALESTINE TX 75801		LOUISVILLE KY 40223-3808
Phone (903) 723-0777	Fax (713) 622-9141	PHONE: (502) 394-2100 FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019
PRIVATE Beds: 0	TITLE 18/19: 0	

County ANDERSON	Reg Svcs: ICF/IID TEAM	Region 04 - TYLER
Facility Information:	Facility ID: 007456	Owner Information
REDWOOD TERRACE COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP
115 REDWOOD DR		9901 LINN STATION ROAD
PALESTINE TX 75801-5826		LOUISVILLE KY 40223-3808
Phone (903) 729-6700	Fax (713) 622-9141	PHONE: (502) 394-2100 FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019
PRIVATE Beds: 0	TITLE 18/19: 0	

County ANDERSON	Reg Svcs: ICF/IID TEAM	Region 04 - TYLER
Facility Information:	Facility ID: 003928	Owner Information
WESTWOOD COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP
219 BROOKVIEW LN		9901 LINN STATION ROAD
PALESTINE TX 75801		LOUISVILLE KY 40223-3808
Phone (903) 729-8711	Fax (713) 622-9141	PHONE: (502) 394-2100 FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019
PRIVATE Beds: 0	TITLE 18/19: 0	

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

County	ANGELINA	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 007534			Owner Information	
510 JEFFERSON				ST GILES LIVING CENTERS INC	
510 JEFFERSON				2007 HOWARD STREET	
LUFKIN	TX 75901			LUFKIN	TX 75901
Phone (936) 639-1615	Fax (936) 639-1632			PHONE: (936) 639-1610	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: 09/01/2017	

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

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

County	ANGELINA	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 007522			Owner Information	
HOWARD HOUSE				ST GILES LIVING CENTERS INC	
2007 HOWARD STREET				2007 HOWARD STREET	
LUFKIN	TX 75901			LUFKIN	TX 75901
Phone (936) 639-1610	Fax (936) 639-1632			PHONE: (936) 639-1610	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: 09/01/2017	

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

County	ANGELINA	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 007439			Owner Information	
KARLA HOUSE				ST GILES - BAYTOWN INC	
107 KARLA DR				2203 KILGORE ROAD	
LUFKIN	TX 75901			BAYTOWN TX	77520
Phone (936) 275-3466		Fax (936) 275-9732		PHONE: (281) 837-1942	FAX: (281) 427-0586
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		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	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		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	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				2007 HOWARD STREET	
LUFKIN	TX 75901			LUFKIN TX	75901
Phone (936) 639-1615		Fax (936) 639-1632		PHONE: (936) 639-1610	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: 09/01/2017	
PRIVATE Beds: 0	TITLE 18/19: 0				

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		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: 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		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: 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		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 09/23/2018	
PRIVATE Beds: 0	TITLE 18/19: 0				

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	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	ARANSAS	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 007816	Owner Information			
ABILITY HOUSE ROCKPORT		ABILITY HOUSE LTD			
843 PINE AVE		711 SENTRY HILL			
ROCKPORT	TX 78382	SAN ANTONIO TX 78260			
Phone (361) 729-7393	Fax	PHONE: (210) 255-1718	FAX: (210) 255-1035		
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: 01/06/2018			

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	PROGRAM TYPE: ICF/IID		
Cert Alzh Capacity: 0	TITLE19: 0	SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 12/01/2017			

County	AUSTIN	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007270	Owner Information			
BELLVILLE COMMUNITY RESIDENCE		RESCARE SERVICES INC			
305 S THOMAS ST		3711 SAN ANTONIO ST			
BELLVILLE	TX 77418	AUSTIN TX 78734-2126			
Phone (979) 865-8112	Fax (979) 865-8112	PHONE: (512) 328-1832	FAX: (512) 328-1833		
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: 04/30/2018			

County	BASTROP	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 003762	Owner Information			
BASTROP COMMUNITY RESIDENCE		RESCARE SERVICES INC			
133 PLUM ST		3711 SAN ANTONIO ST			
BASTROP	TX 78602	AUSTIN TX 78734-2126			
Phone (512) 321-3316	Fax (512) 321-3316	PHONE: (512) 328-1832	FAX: (512) 328-1833		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 8	PROGRAM TYPE: ICF/IID		
Cert Alzh Capacity: 0	TITLE19: 0	SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 02/02/2018			

County	BASTROP	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007634	Owner Information			
JEFFERSON COMMUNITY RESIDENCE		RESCARE SERVICES INC			
1405 JEFFERSON ST		3711 SAN ANTONIO ST			
BASTROP	TX 78602	AUSTIN TX 78734-2126			
Phone (512) 303-7638	Fax	PHONE: (512) 328-1832	FAX: (512) 328-1833		
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: 11/22/2018			

County	BASTROP	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007635	Owner Information			
LAKEVIEW COMMUNITY RESIDENCE		RESCARE SERVICES INC			
223 MATTHEW COVE		3711 SAN ANTONIO ST			
BASTROP	TX 78602	AUSTIN TX		78734-2126	
Phone (512) 303-6758	Fax	PHONE: (512) 328-1832	FAX: (512) 328-1833		
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: 11/21/2018		

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 (979) 968-6598	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	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	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0		License Exp Dt: 01/01/2019		

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

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

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	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0		License Exp Dt: 05/01/2018		

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

Facility Information: Facility ID: 007318

COUNCIL OAKS AT NUGGET CREEK
10022 NUGGET CREEK
CONVERSE TX 78109

Phone (210) 945-9124 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: 11/01/2017

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

Facility Information: Facility ID: 003652

COUNCIL OAKS AT TROUT RIDGE
10026 TROUT RIDGE
CONVERSE TX 78109

Phone (210) 590-3909 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: 11/01/2017

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

Facility Information: Facility ID: 104463

COUNCIL OAKS FLATLAND TRAIL
10304 FLATLAND TRAIL
CONVERSE TX 78109

Phone (210) 659-9553 Fax (210) 599-9789

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

Owner Information

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

PHONE: (210) 646-0717 FAX: (210) 599-9789
PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED
License Exp Dt: 09/17/2018

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

Facility Information: Facility ID: 101821

SPRUCE RIDGE
10026 SPRUCE RIDGE DR
CONVERSE TX 78109

Phone (210) 590-1348 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) 394-2285
PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED
License Exp Dt: 11/01/2017

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

Facility Information: Facility ID: 007601

10115 CEDARMONT
10115 CEDARMONT
SAN ANTONIO TX 78245

Phone (210) 520-2539 Fax (210) 647-7637

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

Owner Information

CALAB INC
3803 S ROBINSON RD
GRAND PRAIRIE TX 75052-1239

PHONE: (972) 263-2112 FAX: (972) 263-2115
PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED
License Exp Dt: 05/04/2018

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

Facility Information: Facility ID: 007602

11311 MORINO PARK
11311 MORINO PARK
SAN ANTONIO TX 78249

Phone (210) 694-4418 Fax (210) 647-7637

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

Owner Information

CALAB INC
3803 S ROBINSON RD
GRAND PRAIRIE TX 75052-1239

PHONE: (972) 263-2112 FAX: (972) 263-2115
PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED
License Exp Dt: 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				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 09/01/2017	

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) 394-2285
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: 12/01/2018	

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) 394-2285
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: 11/20/2017	

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007349			Owner Information	
AUTISTIC TREATMENT CENTER WADDES DON WOOD				AUTISTIC TREATMENT CENTER INC	
6307 WADDES 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: 12/18/2017	

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

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 101793	Owner Information			
BOULDER OAKS		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
14038 BOULDER OAKS		9901 LINN STATION ROAD			
SAN ANTONIO	TX 78247	LOUISVILLE KY 40223			
Phone (210) 490-4656	Fax	PHONE: (502) 394-2100 FAX: (502) 394-2285			
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: 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: 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	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 04/29/2018			
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) 394-2285			
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: 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: 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: 12/03/2017			
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) 394-2285			
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: 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:	11/01/2017

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:	11/01/2017

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:	11/01/2017

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:	11/01/2017

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:	11/01/2017

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: 11/01/2017

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) 394-2285
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) 394-2285
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			
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:	04/14/2019

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 104351	Owner Information			
EDUCARE COMMUNITY LIVING CORPORATION-TEXAS		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
3003 PEBBLE TRAIL		9901 LINN STATION ROAD			
SAN ANTONIO		LOUISVILLE KY 40223			
Phone	(210) 494-4560	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:	05/11/2019

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 104350	Owner Information			
EDUCARE COMMUNITY LIVING CORPORATION-TEXAS		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
2531 GREAT OAKS DRIVE		9901 LINN STATION ROAD			
SAN ANTONIO		LOUISVILLE KY 40223			
Phone	(210) 491-5977	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:	12/09/2018

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 003718	Owner Information			
EISENHAEUER GROUP HOME		BEXAR CO BOARD OF TRUSTEES MHMR SVCS DBA THE CTR FOR HC SVCS			
2927 EISENHAEUER ROAD		3031 IH 10 WEST			
SAN ANTONIO		SAN ANTONIO TX 78201			
Phone	(210) 659-5857	Fax			
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	10
Cert Alzh Capacity:	0	TITLE19:	0	PHONE:	
PRIVATE Beds:	0	TITLE 18/19:	0	FAX:	
				PROGRAM TYPE:	ICF/IID
				SERVICE TYPE	GOVERNMENT BASED
				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		
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	6
Cert Alzh Capacity:	0	TITLE19:	0	PHONE:	(210) 599-8656
PRIVATE Beds:	0	TITLE 18/19:	0	FAX:	(210) 599-8656
				PROGRAM TYPE:	ICF/IID
				SERVICE TYPE	PRIVATELY OWNED
				License Exp Dt:	10/26/2017

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			
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:	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) 394-2285

PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED

License Exp Dt: 11/01/2017

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) 394-2285

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			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 04/29/2018			
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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			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 09/22/2017			
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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			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 03/14/2018			
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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			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 09/12/2017			
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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) 394-2285
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	License Exp Dt: 10/25/2017			
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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			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 11/20/2017			
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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
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 01/01/2019

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

Facility Information: **Facility ID:** 007499 **Owner Information**
 KOPPLOW HOME MISSION ROAD DEVELOPMENTAL CENTER
 460 KOPPLOW 8706 MISSION RD
 SAN ANTONIO TX 78221 SAN ANTONIO TX 78214
Phone (210) 921-9396 **Fax** (210) 924-9265 **PHONE:** (210) 334-2437 **FAX:** (210) 922-6006
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 01/21/2018

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
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 03/01/2018

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
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 05/27/2019

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

Facility Information: **Facility ID:** 003935 **Owner Information**
 LAMBETH COMMUNITY HOME EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP
 4935 LAMBETH ST 9901 LINN STATION ROAD
 SAN ANTONIO TX 78228 LOUISVILLE KY 40223-3808
Phone (210) 509-9938 **Fax** **PHONE:** (502) 394-2100 **FAX:** (502) 394-2285
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 10/20/2017

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) 394-2285
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:** 11/01/2017

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: 10/22/2017	
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) 655-8323	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: 11/01/2017	
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: 08/10/2017	
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: 01/31/2018	
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) 394-2285			
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: 03/01/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 003603	Owner Information			
PEPPERIDGE ADULT LIVING CENTER		SPECIALIZED HOME LIFE			
4611 WETZ		PO BOX 33487			
SAN ANTONIO	TX 78217	SAN ANTONIO TX 78265			
Phone (210) 599-8656	Fax	PHONE: (210) 599-8656 FAX: (210) 599-8656			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 06/01/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007508	Owner Information			
QUAIL RUN		COMPLETE LIFE CARE			
7422 QUAIL RUN		6647 CADES COVE			
SAN ANTONIO	TX 78209	SAN ANTONIO TX 78238			
Phone (210) 805-8950	Fax (210) 520-7260	PHONE: (210) 520-0774 FAX: (210) 520-7260			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 02/05/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

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

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

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 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	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	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: 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: 10/01/2017			

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				750 RUSK	
SAN ANTONIO	TX 78266			NEW BRAUNFELS	TX 78130
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: 09/01/2017			

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) 394-2285
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: 01/27/2018			

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) 394-2285
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: 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
TOTAL Lic Capacity:	0	TITLE 18:	0	ICF/IID:	339
Cert Alzh Capacity:	0	TITLE19:	0	PROGRAM TYPE:	ICF/IID
PRIVATE Beds:	0	TITLE 18/19:	0	SERVICE TYPE	STATE SCHOOL/STATE CENTER
				License Exp Dt:	

County	BEXAR	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007811			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
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:	11/01/2017

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
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:	10/01/2017

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
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	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
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:	06/20/2018

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
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:	11/01/2017

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: 12/18/2017			
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: 03/25/2018			
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) 394-2285			
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: 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) 394-2285			
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: 08/29/2018			
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) 394-2285			
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: 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: 007488	Owner Information			
VISTA CREEK COMMUNITY HOME		SOUTH TEXAS COMMUNITY LIVING CORP			
5403 VISTA CREEK		18 AUGUSTA PINES DR ,STE 140 E			
SAN ANTONIO	TX 78247	SPRING TX 77389			
Phone (210) 599-3624	Fax (210) 494-7228	PHONE: (281) 351-1758 FAX: (210) 255-4500			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 03/01/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

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) 394-2285

PROGRAM TYPE: ICF/IID

SERVICE TYPE PRIVATELY OWNED

License Exp Dt: 11/01/2017

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) 394-2285

PROGRAM TYPE: ICF/IID

SERVICE TYPE PRIVATELY OWNED

License Exp Dt: 11/01/2017

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: 09/27/2017

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: 11/01/2017

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: 01/31/2018

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: 10/10/2017

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: 11/23/2017

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
 HIGHLAND GROUP HOME
 1304 HIGHLAND
 ALVIN TX 77512
Phone (281) 388-2726 **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 - GULF COAST
 9901 LINN STATION ROAD
 LOUISVILLE KY 40223-3808
PHONE: (512) 498-2700 **FAX:** (512) 498-2777
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 03/01/2018

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: (512) 498-2700 FAX: (512) 498-2777			
TOTAL Lic Capacity: 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) 394-2285			
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: 08/01/2017			
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: (512) 498-2700 FAX: (512) 498-2777			
TOTAL Lic Capacity: 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: (512) 498-2700 FAX: (512) 498-2777			
TOTAL Lic Capacity: 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 RD. STE 300			
BRYAN	TX 77801	CARROLLTON TX 75006			
Phone (979) 823-7622	Fax (979) 775-5733	PHONE: (972) 866-9989 FAX: (972) 991-0834			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	BROWN	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 007325			Owner Information	
CENTRAL TEXAS MHMR CENTER				CENTRAL TEXAS MHMR CENTER	
2209 ELEVENTH ST				408 MULBERRY DR	
BROWNWOOD	TX 76801				
Phone (325) 646-6952	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: 12/01/2017	

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			
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: 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:** 12/01/2017

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:** 12/01/2017

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 750 RUSK
 LOCKHART TX 78644 NEW BRAUNFELS TX 78130
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:** 09/01/2017

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 750 RUSK
 PORT LAVACA TX 77979 NEW BRAUNFELS TX 78130
Phone (512) 552-4316 **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** GOVERNMENT BASED
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 03/01/2018

County	CAMERON	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 003744			Owner Information	
CARING PALMS HEALTH CARE CENTER				CARING PALMS HEALTH CARE CENTER INC	
1415 W WASHINGTON ST				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			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			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			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 09/22/2017	

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

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

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

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

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

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

County	CASS	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 003699			Owner Information	
EVERGREEN CHOCTAW COMMUNITY HOME				EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC	
1313 CHOCTAW				10810 SANDEN DR	
ATLANTA	TX 75551			DALLAS TX	75238
Phone (903) 796-9619	Fax (903) 792-1861			PHONE: (972) 386-4834	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 09/18/2017	

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			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: 010355
 SAN ANTONIO GROUP HOME
 602 DALLAS STREET
 JACKSONVILLE TX 75766
 Phone (903) 541-4919 Fax (903) 586-9120

Owner Information
 BLUEBONNET HOMES INC
 128 S MAGDALEN
 SAN ANGELO TX 76903
 PHONE: (325) 658-6664 FAX: (325) 659-3769
 PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED
 License Exp Dt: 11/01/2018

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

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

Facility Information: Facility ID: 007648
 FOREST HILLS GROUP HOME
 803 SHARON ST
 RUSK TX 75785
 Phone (903) 683-6151 Fax

Owner Information
 ANDERSON CHEROKEE COMMUNITY ENRICHMENT SERVICES
 913 N JACKSON
 JACKSONVILLE TX 75766
 PHONE: (903) 586-5507 FAX:
 PROGRAM TYPE: ICF/IID SERVICE TYPE GOVERNMENT BASED
 License Exp Dt:

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

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

Facility Information: Facility ID: 007649
 PECAN GROVE HOME
 619 E FOURTH ST
 RUSK TX 75785
 Phone (903) 683-6547 Fax

Owner Information
 ANDERSON CHEROKEE COMMUNITY ENRICHMENT SERVICES
 913 N JACKSON
 JACKSONVILLE TX 75766
 PHONE: (903) 586-5507 FAX:
 PROGRAM TYPE: ICF/IID SERVICE TYPE GOVERNMENT BASED
 License Exp Dt:

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

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

Facility Information: Facility ID: 007421
 CHERRYWOOD COMMUNITY HOME
 2900 PORT O CALL
 PLANO TX 75075
 Phone (972) 867-4159 Fax

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: 12/05/2017

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

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

Facility Information: Facility ID: 007306
 COLLIN COUNTY MHMR AT MULLINS
 1313 MULLINS
 PLANO TX 75025
 Phone (214) 424-4814 Fax

Owner Information
 LIFEPAATH SYSTEMS
 1111 TX
 PHONE: FAX:
 PROGRAM TYPE: ICF/IID SERVICE TYPE GOVERNMENT BASED
 License Exp Dt:

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

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

Facility Information: Facility ID: 007269
 CROSS BEND HOUSE
 3019 CROSS BEND
 PLANO TX 75023
 Phone (214) 596-8916 Fax

Owner Information
 LIFEPAATH SYSTEMS
 1111 TX
 PHONE: FAX:
 PROGRAM TYPE: ICF/IID SERVICE TYPE GOVERNMENT BASED
 License Exp Dt:

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

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: 09/01/2017			
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	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: 007233			Owner Information	
MARIGOLD HOUSE				ANIOL III LLC	
1639 MARIGOLD				750 RUSK AVE	
NEW BRAUNFELS	TX 78130			NEW BRAUNFELS TX	78130
Phone (830) 620-9604	Fax (830) 629-2373			PHONE: (713) 271-7777	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 09/01/2017	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	COMAL	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007232			Owner Information	
RAPIDS HOUSE				ANIOL III LLC	
1220 RAPIDS RD				750 RUSK AVE	
NEW BRAUNFELS	TX 78130			NEW BRAUNFELS TX	78130
Phone (830) 620-0759	Fax (830) 629-2373			PHONE: (713) 271-7777	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 09/01/2017	
PRIVATE Beds: 0	TITLE 18/19: 0				

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

County	COMAL	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 007241			Owner Information	
SPRINGHILL HOUSE				ANIOL III LLC	
984 SPRINGHILL DR				750 RUSK AVE	
NEW BRAUNFELS	TX 78130			NEW BRAUNFELS TX	78130
Phone (830) 629-7545	Fax (830) 629-2373			PHONE: (713) 271-7777	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 09/01/2017	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	COMAL	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 003617			Owner Information	
TIMBERHILL HOUSE				ANIOL III LLC	
1374 TIMBERHILL				750 RUSK AVE	
NEW BRAUNFELS	TX 78130			NEW BRAUNFELS TX	78130
Phone (830) 629-5336	Fax (830) 629-2373			PHONE: (713) 271-7777	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 09/01/2017	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003950			Owner Information	
MOSAIC				MOSAIC	
1515 NORTHLAND				2245 MIDWAY RD. 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		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 01/01/2017	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003968			Owner Information	
MOSAIC				MOSAIC	
2100 CEDAR CIR				2245 MIDWAY RD. 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: 003902			Owner Information	
MOSAIC				MOSAIC	
2321 GREENMEADOW				2245 MIDWAY RD. 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: 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: 07/23/2017	

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			
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 **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
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 06/01/2017

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

Facility Information: **Facility ID:** 003835 **Owner Information**
 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) 394-2285
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: 04/01/2018

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

Facility Information: **Facility ID:** 003756 **Owner Information**
 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) 394-2285
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: 04/01/2018

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

Facility Information: **Facility ID:** 003796 **Owner Information**
 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) 394-2285
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: 04/01/2018

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

Facility Information: **Facility ID:** 007374 **Owner Information**
 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) 394-2285
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: 05/01/2018

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) 780-9388 **FAX:** (972) 224-0904
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 10
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 09/01/2017

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 104764			Owner Information	
ST NICHOLAS OPERATIONS LLC				ST NICHOLAS OPERATIONS LLC	
4612 HEATHERBROOK DR				4612 HEATHERBROOK DR	
DALLAS	TX 75244			DALLAS	TX 75244
Phone (792) 239-0121		Fax (214) 723-5331		PHONE: (972) 233-4366	FAX: (214) 922-4144
TOTAL Lic Capacity: 0		TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0		TITLE19: 0			
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				517 MEADOW HILL	
DESOTO	TX 75115			DESOTO	TX 75115
Phone (817) 447-2700		Fax (817) 447-3323		PHONE: (817) 447-2700	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			
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: 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) 780-9388	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			
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: 104122			Owner Information	
MEADOW HILL HOME				DAYBREAK INC	
517 MEADOW HILL				517 MEADOW HILL	
DESOTO	TX 75115			DESOTO	TX 75115
Phone (817) 477-2700		Fax (972) 224-0904		PHONE: (817) 447-2700	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			
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: 007651			Owner Information	
PRAIRIE CREEK				DAYBREAK INC	
920 PRAIRIE CREEK DR				517 MEADOW HILL	
DESOTO	TX 75115			DESOTO	TX 75115
Phone (972) 223-1463		Fax (972) 224-0904		PHONE: (817) 447-2700	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			
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				517 MEADOW HILL	
DESOTO	TX 75115			DESOTO	TX 75115
Phone (972) 223-6259		Fax (972) 224-0904		PHONE: (817) 447-2700	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			
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: 003890			Owner Information	
VALLEY GLEN				GREENBREAK INC	
219 VALLEY GLEN				234 BARRY LANE	
DESOTO	TX 75115			LANCASTER	TX 75146
Phone (972) 230-4643	Fax (972) 224-0904			PHONE: (972) 227-5900	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: 09/01/2017	

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) 394-2285
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: 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			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 08/05/2018	

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007621			Owner Information	
KNOLL POINT PLACE, LLC 3446 KNOLL POINT DR GARLAND	TX 75043			KNOLL POINT PLACE, LLC 3446 KNOLL POINT DR 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			
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	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007404			Owner Information	
TRINITY MANOR 2813 COUNTRY VALLEY RD GARLAND	TX 75043			TRINITY ICF MR INC 2813 COUNTRY VALLEY RD 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			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 02/28/2019	

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007333			Owner Information	
1102 FORT SCOTT TRAIL 1102 FORT SCOTT TRAIL GRAND PRAIRIE	TX 75052			CALAB INC 3803 S ROBINSON RD 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			
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	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007266			Owner Information	
3502 GLENDA 3502 GLENDA GRAND PRAIRIE	TX 75051			CALAB INC 3803 S ROBINSON RD 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			
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	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007531			Owner Information	
AMICUS AT WOODSIDE 2213 WOODSIDE DR GRAND PRAIRIE	TX 75051			AMICUS, INC 1129 N LITTLE SCHOOL RD ARLINGTON TX 76017-1900	
Phone (972) 988-9336	Fax (817) 563-7906			PHONE: (817) 563-7900	FAX: (817) 563-7906
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/01/2018	

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007615			Owner Information	
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS 4925 EMBERS TRAIL GRAND PRAIRIE	TX 75052			EDUCARE COMMUNITY LIVING CORPORATION - TEXAS 9901 LINN STATION ROAD LOUISVILLE KY 40223	
Phone (972) 647-0517	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: 01/01/2018	

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			
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:	01/01/2018

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			
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:	04/01/2018

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		
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:	01/01/2018

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			
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:	10/13/2017

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			
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	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			
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	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003947			Owner Information	
BARRY LANE				GREENBREAK INC	
234 BARRY LANE				234 BARRY LANE	
LANCASTER	TX 75146			LANCASTER	TX 75146
Phone (972) 227-5900	Fax (214) 224-0904			PHONE: (972) 227-5900	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: 09/01/2017	

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) 780-9388	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: 09/01/2017	

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

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

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007647			Owner Information	
EVERGREEN VALLEY CREEK COMMUNITY HOME				EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC	
907 VALLEYCREEK DR				10810 SANDEN DR	
MESQUITE	TX 75181-2355			DALLAS	TX 75238
Phone (972) 222-6622	Fax (972) 386-9509			PHONE: (972) 386-4834	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 07/01/2018	

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

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 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
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:	04/30/2018

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
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:	03/29/2018

County	DALLAS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003901			Owner Information	
MOSAIC				MOSAIC	
1809 AUBURN				2245 MIDWAY RD. STE 300	
RICHARDSON TX 75081				CARROLLTON TX 75006	
Phone	(972) 866-9989	Fax	(972) 991-0834	PHONE:	(972) 866-9989
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: 007280			Owner Information	
MOSAIC				MOSAIC	
1509 VERSAILLES				2245 MIDWAY RD. STE 300	
RICHARDSON TX 75081				CARROLLTON TX 75006	
Phone	(972) 866-9989	Fax	(972) 991-0834	PHONE:	(972) 866-9989
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	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
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	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
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:	10/01/2017

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		
Cert Alzh Capacity: 0	TITLE19: 0	SERVICE TYPE PRIVATELY OWNED			
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 RUDELL		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		
Cert Alzh Capacity: 0	TITLE19: 0	SERVICE TYPE PRIVATELY OWNED			
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		
Cert Alzh Capacity: 0	TITLE19: 0	SERVICE TYPE STATE SCHOOL/STATE CENTER			
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) 394-2285		
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: 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) 394-2285		
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: 03/18/2018			

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	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	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: 12/18/2017	

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) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 10/01/2017	

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) 394-2285			
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: 10/01/2017			
PRIVATE Beds: 0	TITLE 18/19: 0				

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) 394-2285			
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: 01/23/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

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

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

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 SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 12/01/2017			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	ECTOR	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 003616	Owner Information			
MORRIS HOUSE		PERMIAN BASIN MHR			
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	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	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				
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: 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: 09/29/2017	

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: 09/25/2017	

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

County	ELLIS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007588	Owner Information			
BRANDON WAY HOUSE		CEN-TEX ASSOCIATION FOR RETARDED CHILDREN			
209 BRANDON WAY		PO DRAWER 750			
RED OAK	TX 75154	MEXIA TX 76667			
Phone (972) 617-1219	Fax (972) 923-1472	PHONE: (254) 562-2891			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	FAX: (254) 562-7656		
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE: PRIVATELY OWNED			
		License Exp Dt: 02/09/2018			

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

County	ELLIS	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007532	Owner Information			
BRYN MAWR HOUSE		CEN-TEX ASSOCIATION FOR RETARDED CHILDREN			
109 BRYN MAWR		PO DRAWER 750			
WAXAHACHIE	TX 75165	MEXIA TX 76667			
Phone (972) 923-0748	Fax (972) 923-1472	PHONE: (254) 562-2891			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	FAX: (254) 562-7656		
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE: PRIVATELY OWNED			
		License Exp Dt: 05/18/2018			

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			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	FAX: (254) 562-7656		
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE: PRIVATELY OWNED			
		License Exp Dt: 03/10/2018			

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			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	FAX: (254) 965-8653		
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE: PRIVATELY OWNED			
		License Exp Dt: 11/01/2018			

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

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 MARLIN	TX 76661			PO DRAWER 750	
Phone (254) 804-0047	Fax (254) 562-7656			MEXIA TX 76667	
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PHONE: (254) 562-2891	FAX: (254) 562-7656
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 10/01/2017	

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 LA GRANGE	TX 78945			339 W COLORADO	
Phone (979) 968-8068	Fax (979) 968-5210			LA GRANGE TX 78945	
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PHONE: (979) 968-8502	FAX: (979) 968-5210
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 11/07/2018	

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 LA GRANGE	TX 78945			33 CYPRESS BLVD ,SUITE 100	
Phone (409) 968-6188	Fax			ROUND ROCK TX 78665	
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PHONE: (512) 336-0800	FAX: (512) 336-0812
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	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 LA GRANGE	TX 78945			33 CYPRESS BLVD ,SUITE 100	
Phone (979) 968-8821	Fax (979) 968-8821			ROUND ROCK TX 78665	
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PHONE: (512) 336-0800	FAX: (512) 336-0812
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	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	
124 MEADOW LN LA GRANGE	TX 78945			33 CYPRESS BLVD ,SUITE 100	
Phone (979) 968-8822	Fax			ROUND ROCK TX 78665	
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PHONE: (512) 336-0800	FAX: (512) 336-0812
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	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 SCHULENBURG	TX 78956			1111	
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
 HIRSH SCHWARTZ COMMUNITY RESIDENCE
 2021 W US HWY 90
 SCHULENBURG TX 78956

Phone (979) 743-4488 **Fax** TX

Owner Information:
 BLUEBONNET TRAILS COMMUNITY MHMR
 1111 TX

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
 JUSTICE HOUSE
 706 JUSTICE RD
 WEST POINT TX 78963

Phone (979) 242-3613 **Fax** (979) 968-5210

Owner Information:
 JAMES-LEACH INC
 339 W COLORADO
 LA GRANGE TX 78945

TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PHONE:** (979) 968-8502 **FAX:** (979) 968-5210
Cert Alzh Capacity: 0 **TITLE19:** 0 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE:** PRIVATELY OWNED
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 10/07/2018

County **FISHER** Reg Svcs: ICF/IID Region 02 - ABILENE

Facility Information: Facility ID: 007267
 ANGEL HOUSE I
 410 RICHARD
 ROTAN TX 79546

Phone (325) 735-2049 **Fax** (325) 735-3357

Owner Information:
 ANGEL CARE INC
 PO BOX 310
 ROTAN TX 79546

TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PHONE:** (325) 735-2512 **FAX:** (325) 735-3357
Cert Alzh Capacity: 0 **TITLE19:** 0 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE:** PRIVATELY OWNED
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 05/31/2018

County **FISHER** Reg Svcs: ICF/IID Region 02 - ABILENE

Facility Information: Facility ID: 007463
 ANGEL HOUSE II
 712 E 6TH ST
 ROTAN TX 79546

Phone (325) 735-2099 **Fax** (325) 735-3357

Owner Information:
 ANGEL CARE INC
 PO BOX 310
 ROTAN TX 79546

TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PHONE:** (325) 735-2512 **FAX:** (325) 735-3357
Cert Alzh Capacity: 0 **TITLE19:** 0 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE:** PRIVATELY OWNED
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 09/17/2017

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

Facility Information: Facility ID: 003656
 UCG - SOUTHMEADOW HOUSE
 2814 WHISPERING CREEK
 FRESNO TX 77545

Phone (713) 776-0805 **Fax** (713) 271-7777

Owner Information:
 FROSTVIEW LANE LLC
 820 PARK TWO
 SUGARLAND TX 77478

TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PHONE:** (713) 835-0527 **FAX:** (713) 271-8585
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 **FORT BEND** Reg Svcs: UNIT 21 (ICF/MR) Region 06 - HOUSTON

Facility Information: Facility ID: 007521
 HOUSTON IN A VISION II
 3203 CYPRESS POINT DRIVE
 MISSOURI CITY TX 77459

Phone (281) 416-0607 **Fax** (713) 271-8585

Owner Information:
 HOUSTON IN-A-VISION INC
 3203 CYPRESS POINT DRIVE
 MISSOURI CITY TX 77459

TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PHONE:** (281) 416-0607 **FAX:** (713) 271-8585
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	FORT BEND	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 100346			Owner Information	
BTTIC PIN OAK HOUSE				DADS	
1818 COLLINS RD BLDG A				PO BOX 12668	
RICHMOND	TX 77469			AUSTIN TX 78711	
Phone (281) 239-1122	Fax (281) 239-1144			PHONE: (512) 454-3761	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt:	

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

County	FORT BEND	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007106			Owner Information	
RICHMOND STATE SUPPORTED LIVING CENTER				DADS	
2100 PRESTON ROAD				PO BOX 12668	
RICHMOND	TX 77469			AUSTIN TX 78711	
Phone (281) 232-2075	Fax (281) 344-4587			PHONE: (512) 454-3761	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 664			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE STATE SCHOOL/STATE CENTER
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 01/14/1992	

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: (512) 498-2700	FAX: (512) 498-2777
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
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	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 **GONZALES** Reg Svcs: **TEAM ICF-IID** Region **08 - SAN ANTONIO**

Facility Information: Facility ID: 007268

SMILEY COMMUNITY RESIDENCE
282 FM 3234
SMILEY TX 78159

Phone (830) 587-6253 Fax (830) 587-6237

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

Owner Information

KENMAR RESIDENTIAL SERVICES INCORPORATED
33 CYPRESS BLVD ,SUITE 100
ROUND ROCK TX 78665

PHONE: (512) 336-0800 FAX: (512) 336-0812

PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED

License Exp Dt: 03/15/2018

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

Facility Information: Facility ID: 003738

ALTERNATE LIVING FACILITY I
1101 S MIRICK AVE
DENISON TX 75020

Phone (903) 465-7383 Fax

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

MHMR SERVICES OF TEXOMA
315 W MCLAIN ,PO BOX 1087 (ZIP 75091)
SHERMAN TX 75092

PHONE: FAX:

PROGRAM TYPE: ICF/IID SERVICE TYPE GOVERNMENT BASED

License Exp Dt:

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

Facility Information: Facility ID: 003976

ALTERNATE LIVING FACILITY III
1100 WEST WALKER
DENISON TX 75020

Phone (903) 465-6434 Fax (903) 786-2902

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

MHMR SERVICES OF TEXOMA
315 W MCLAIN ,PO BOX 1087 (ZIP 75091)
SHERMAN TX 75092

PHONE: FAX:

PROGRAM TYPE: ICF/IID SERVICE TYPE GOVERNMENT BASED

License Exp Dt:

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

Facility Information: Facility ID: 007314

EDWARDS STREET HOUSE
603 EDWARDS ST
DENISON TX 75020

Phone (903) 463-6811 Fax (903) 465-8799

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

EXCEPTIONALCARE INC
2402 W MORTON ST STE 140
DENISON TX 75020

PHONE: (903) 465-8766 FAX: (903) 465-8799

PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED

License Exp Dt: 09/01/2017

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

Facility Information: Facility ID: 007638

HYDE PARK HOUSE
1507 HYDE PARK AVE
DENISON TX 75020

Phone (903) 463-6922 Fax (903) 465-8799

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

EXCEPTIONALCARE INC
2402 W MORTON ST STE 140
DENISON TX 75020

PHONE: (903) 465-8766 FAX: (903) 465-8799

PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED

License Exp Dt: 01/31/2019

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

Facility Information: Facility ID: 007446

LYNN STREET HOUSE
108 S LYNN ST
DENISON TX 75020

Phone (903) 465-2655 Fax (903) 465-8799

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

EXCEPTIONALCARE INC
2402 W MORTON ST STE 140
DENISON TX 75020

PHONE: (903) 465-8766 FAX: (903) 465-8799

PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED

License Exp Dt: 08/04/2018

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

Facility Information: Facility ID: 003769
 MHMR SVCS OF TEXOMA ALTERNATE LIVING FACILITY II
 1217 DESVOIGNES RD
 DENISON TX 75021

Phone (903) 463-5210 **Fax**

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
 MHMR SERVICES OF TEXOMA
 315 W MCLAIN ,PO BOX 1087 (ZIP 75091)
 SHERMAN TX 75092

PHONE: **FAX:**
PROGRAM TYPE: ICF/IID **SERVICE TYPE** GOVERNMENT BASED
License Exp Dt:

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

Facility Information: Facility ID: 101455
 EVERGREEN CARRIAGE ESTATES COMMUNITY HOME
 2304 CARRIAGE ESTATES ROAD
 SHERMAN TX 75092

Phone (903) 813-3278 **Fax** (903) 893-6637

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

Owner Information
 EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC
 10810 SANDEN DR
 DALLAS TX 75238

PHONE: (972) 386-4834 **FAX:**
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 07/03/2017

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

Facility Information: Facility ID: 101453
 EVERGREEN NORTHBROOK COMMUNITY HOME
 1732 NORTHBROOK
 SHERMAN TX 75092

Phone (903) 870-2113 **Fax** (903) 893-6637

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

Owner Information
 EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC
 10810 SANDEN DR
 DALLAS TX 75238

PHONE: (972) 386-4834 **FAX:**
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 07/02/2017

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

Facility Information: Facility ID: 007492
 MONTE CARLO COMMUNITY HOME
 12 MONTE CARLO
 GLADEWATER TX 75647

Phone (903) 845-6662 **Fax** (903) 295-7394

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

Owner Information
 H M S INVESTMENTS INC
 112 S WARD DR
 LONGVIEW TX 75604

PHONE: (903) 295-7391 **FAX:** (903) 295-7394
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 12/22/2017

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

Facility Information: Facility ID: 007572
 TENERY STREET COMMUNITY HOME
 502 TENERY ST
 GLADEWATER TX 75647

Phone (903) 845-4275 **Fax** (903) 295-7394

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

Owner Information
 L M R HEALTHCARE SERVICES INC
 112 S WARD
 LONGVIEW TX 75604

PHONE: (903) 295-7391 **FAX:** (903) 295-7394
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 12/03/2017

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

Facility Information: Facility ID: 007224
 EVERGREEN DANVILLE ROAD COMMUNITY HOME
 1104 DANVILLE RD
 KILGORE TX 75662

Phone (903) 984-9370 **Fax** (903) 792-1861

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

Owner Information
 EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC
 10810 SANDEN DR
 DALLAS TX 75238

PHONE: (972) 386-4834 **FAX:**
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 08/14/2018

County	GREGG	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 007431			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				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	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				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	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				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 12/01/2017	

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

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

County	GREGG	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 007359			Owner Information	
EVERGREEN STONE TRAIL COMMUNITY HOME				EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC	
1205 STONE TRAIL				10810 SANDEN DR	
LONGVIEW	TX 75604			DALLAS TX	75238
Phone (903) 295-1277	Fax (903) 295-9993			PHONE: (972) 386-4834	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/23/2018	

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

County	GREGG	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 007255			Owner Information	
HONEYSUCKLE COMMUNITY HOME 9 HONEYSUCKLE LONGVIEW	TX 75604			D & S RESIDENTIAL SERVICES LP 8911 N CAPITAL OF TX HWY AUSTIN TX 78759	.BLDG 1 STE 1300
Phone (903) 297-3056	Fax			PHONE: (512) 327-2325	FAX: (512) 327-5355
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 12/01/2017	

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

County	GREGG	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 007587			Owner Information	
MARTIN COMMUNITY HOME 2809 CLENDENEN LONGVIEW	TX 75601			L M R HEALTHCARE SERVICES INC 112 S WARD LONGVIEW TX 75604	
Phone (903) 758-6801	Fax (903) 295-7394			PHONE: (903) 295-7391	FAX: (903) 295-7394
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 09/24/2017	

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

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

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

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

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

Facility Information: Facility ID: 007297 **Owner Information**
 THELMA COMMUNITY HOME D & S RESIDENTIAL SERVICES LP
 1009 THELMA 8911 N CAPITAL OF TX HWY ,BLDG 1 STE 1300
 LONGVIEW TX 75604 AUSTIN TX 78759
Phone (903) 759-3890 **Fax** (512) 327-5355 **PHONE:** (512) 327-2325 **FAX:** (512) 327-5355
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 12/01/2017

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

County **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 750 RUSK
 SEGUIN TX 78155 NEW BRAUNFELS TX 78130
Phone (830) 379-8539 **Fax** (214) 723-5331 **PHONE:** (830) 372-2920 **FAX:** (214) 723-5331
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 8 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 09/01/2017

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 750 RUSK
 SEGUIN TX 78155 NEW BRAUNFELS TX 78130
Phone (830) 372-2920 **Fax** (214) 723-5331 **PHONE:** (830) 372-2920 **FAX:** (214) 723-5331
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 8 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE** PRIVATELY OWNED
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 09/01/2017

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) 394-2285
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: 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 RD. 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			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE PRIVATELY OWNED			
		License Exp Dt: 01/01/2017			

County	GUADALUPE	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 003604			Owner Information	
MOSAIC				MOSAIC	
109 BARR OAK				2245 MIDWAY RD. STE 300	
SEGUIN	TX 78155			CARROLLTON	TX 75006
Phone (830) 372-2525	Fax (830) 303-3075			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			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE PRIVATELY OWNED			
		License Exp Dt: 01/01/2019			

County	GUADALUPE	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 003943			Owner Information	
MOSAIC				MOSAIC	
1622 WILLOW LN				2245 MIDWAY RD. 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			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE PRIVATELY OWNED			
		License Exp Dt: 01/01/2019			

County	GUADALUPE	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 003627			Owner Information	
RIVER OAK				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) 394-2285
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: 05/20/2017			

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			
PRIVATE Beds: 0	TITLE 18/19: 0	SERVICE TYPE GOVERNMENT BASED			
		License Exp Dt:			

County	HARDIN	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 003809	Owner Information			
FRIES HOUSE		ST GILES - BAYTOWN INC			
190 E AVE J		2203 KILGORE ROAD			
SILSBEE	TX 77656	BAYTOWN TX 77520			
Phone (409) 651-9185	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	License Exp Dt: 09/01/2017			
PRIVATE Beds: 0	TITLE 18/19: 0				

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

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	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: 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	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: 003605	Owner Information			
KILGORE HOUSE		ST GILES - BAYTOWN INC			
2203 KILGORE RD		2203 KILGORE ROAD			
BAYTOWN	TX 77520	BAYTOWN TX 77520			
Phone (281) 837-1942	Fax (281) 427-0586	PHONE: (281) 837-1942 FAX: (281) 427-0586			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	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	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	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: 003671			Owner Information	
MCFARLAND HOUSE				ST GILES - BAYTOWN INC	
1706 MCFARLAND				2203 KILGORE ROAD	
BAYTOWN	TX 77520			BAYTOWN TX 77520	
Phone (281) 837-8686	Fax			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	License Exp Dt: 09/01/2017			

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007381			Owner Information	
NORTH SHEPHERD HOUSE				ST GILES - BAYTOWN INC	
1112 N SHEPHERD				2203 KILGORE ROAD	
BAYTOWN	TX 77520			BAYTOWN TX 77520	
Phone (281) 837-6238	Fax (713) 271-8585			PHONE: (281) 837-1942	FAX: (281) 427-0586
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	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	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	License Exp Dt: 09/23/2017			

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	License Exp Dt: 06/14/2018			

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003654			Owner Information	
CYPRESS GROUP HOME				BETHESDA LUTHERAN COMMUNITIES INC	
18211 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			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 03/20/2018			

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

Facility Information: Facility ID: 003655
 GOOD SAMARITAN GROUP HOME
 18937 K Z RD
 CYPRESS TX 77433
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

Owner Information
 BETHESDA LUTHERAN COMMUNITIES INC
 18937 K Z RD
 CYPRESS TX 77433
PHONE: (281) 516-4000 **FAX:** (281) 351-5897
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 03/22/2018

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

Facility Information: Facility ID: 003615
 KINGS COURT GROUP HOME
 17626 KINGS CT
 CYPRESS TX 77429
Phone (281) 576-4000 **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

Owner Information
 BETHESDA LUTHERAN COMMUNITIES INC
 18937 K Z RD
 CYPRESS TX 77433
PHONE: (281) 516-4000 **FAX:** (281) 351-5897
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 07/14/2018

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

Facility Information: Facility ID: 003619
 MAVERICK VALLEY GROUP HOME
 14802 MAVERICK VALLEY LANE
 CYPRESS TX 77429
Phone (281) 758-4865 **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

Owner Information
 BETHESDA LUTHERAN COMMUNITIES INC
 18937 K Z RD
 CYPRESS TX 77433
PHONE: (281) 516-4000 **FAX:** (281) 351-5897
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 07/31/2018

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

Facility Information: Facility ID: 010197
 MUELLER HOUSE
 11910 MUELLER CEMETERY RD
 CYPRESS TX 77429
Phone (281) 373-9406 **Fax** (281) 373-4074
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 9
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
 REACH UNLIMITED INC
 12777 JONES RD #103
 HOUSTON TX 77070
PHONE: (281) 469-8058 **FAX:** (281) 469-5030
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 09/24/2017

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

Facility Information: Facility ID: 003909
 NORTHWEST VILLA COMMUNITY HOME
 11910 MEADOWVIEW DR
 CYPRESS TX 77429
Phone (281) 370-2103 **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 **HARRIS** Reg Svcs: UNIT 21 (ICF/MR) Region 06 - HOUSTON

Facility Information: Facility ID: 007283
 GARDEN LIVING CENTER
 913 E X STREET
 DEER PARK TX 77536
Phone (713) 475-2228 **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

Owner Information
 DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF HOUSTON LLC
 4115 GALVESTON RD
 HOUSTON TX 77017
PHONE: (713) 475-2220 **FAX:** (713) 472-2332
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: 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	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: 007661	Owner Information			
1801 BRANARD		ST GILES - BAYTOWN INC			
1801 BRANARD ST		2203 KILGORE ROAD			
HOUSTON	TX 77098	BAYTOWN TX 77520			
Phone (713) 524-7473	Fax (713) 524-4153	PHONE: (281) 837-1942 FAX: (281) 427-0586			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13	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	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007660	Owner Information			
616 WEST BELL		ST GILES - BAYTOWN INC			
616 W BELL ST		2203 KILGORE ROAD			
HOUSTON	TX 77019	BAYTOWN TX 77520			
Phone (713) 524-5392	Fax (713) 524-3821	PHONE: (281) 837-1942 FAX: (281) 427-0586			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13	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	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	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 12/01/2017			
PRIVATE Beds: 0	TITLE 18/19: 0				

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	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 11/29/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 010183			Owner Information	
AVONDALE HOUSE III 4826 MCDERMED HOUSTON	TX 77035			AVONDALE HOUSE 3737 OMEARA DR 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: 02/07/2018	

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 010182			Owner Information	
AVONDALE HOUSE II 8515 BLUEGATE HOUSTON	TX 77025			AVONDALE HOUSE 3737 OMEARA DR 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: 10/08/2017	

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003914			Owner Information	
BEARCREEK 5006 STANHOPE HOUSTON	TX 77064			EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST 9901 LINN STATION ROAD LOUISVILLE KY 40223-3808	
Phone (281) 463-2227	Fax			PHONE: (512) 498-2700	FAX: (512) 498-2777
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
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 8114 BEECHNUT HOUSTON	TX 77036			VITA-LIVING INC 3300 S GESSNER ,STE 150 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 5126 BOSWORTH ST HOUSTON	TX 77017			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: 003915			Owner Information	
BRIAR GROVE PARK 10038 BRIAR FOREST DR HOUSTON	TX 77042			EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST 9901 LINN STATION ROAD LOUISVILLE KY 40223-3808	
Phone (713) 782-5454	Fax			PHONE: (512) 498-2700	FAX: (512) 498-2777
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
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		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 08/21/2018	
PRIVATE Beds: 0	TITLE 18/19: 0				

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	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 02/23/2018	
PRIVATE Beds: 0	TITLE 18/19: 0				

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: (512) 498-2700	FAX: (512) 498-2777
TOTAL Lic Capacity: 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: 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	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 02/01/2018	
PRIVATE Beds: 0	TITLE 18/19: 0				

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: (512) 498-2700	FAX: (512) 498-2777
TOTAL Lic Capacity: 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: 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: (512) 498-2700	FAX: (512) 498-2777
TOTAL Lic Capacity: 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: 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 SERVICE TYPE GOVERNMENT BASED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt:			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003980	Owner Information			
EBONY COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
2519 LOWER VALLEY DRIVE		9901 LINN STATION ROAD			
HOUSTON	TX 77067-1901	LOUISVILLE KY 40223-3808			
Phone (281) 586-7067	Fax	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: 003885	Owner Information			
FAITH HOUSE		EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST			
7418 ANTOINE		9901 LINN STATION ROAD			
HOUSTON	TX 77088	LOUISVILLE KY 40223-3808			
Phone (281) 999-5066	Fax	PHONE: (512) 498-2700 FAX: (512) 498-2777			
TOTAL Lic Capacity: 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: 007585	Owner Information			
FROSTVIEW HOUSE II		D & D CARE HOMES INC			
15331 E ANTONE		820 PARK TWO DRIVE			
HOUSTON	TX 77071	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	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	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007437	Owner Information			
GREAT HOME CARE INC		GREAT HOME CARE INC			
12502 LIMA DRIVE		12502 LIMA DRIVE			
HOUSTON	TX 77099	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	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 04/10/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003913	Owner Information			
HEARTHSTONE		EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST			
7206 BENWICH CIRCLE		9901 LINN STATION ROAD			
HOUSTON	TX 77095	LOUISVILLE KY 40223-3808			
Phone (281) 463-1034	Fax	PHONE: (512) 498-2700 FAX: (512) 498-2777			
TOTAL Lic Capacity: 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: 003978	Owner Information			
HOPE HOUSE		EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST			
9107 SPELLMAN		9901 LINN STATION ROAD			
HOUSTON	TX 77031	LOUISVILLE KY 40223-3808			
Phone (713) 988-1461	Fax	PHONE: (512) 498-2700 FAX: (512) 498-2777			
TOTAL Lic Capacity: 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: 007317	Owner Information			
HOUSTON IN A VISION		HOUSTON IN-A-VISION INC			
6442 GLADEWELL		3203 CYPRESS POINT DRIVE			
HOUSTON	TX 77072	MISSOURI CITY TX 77459			
Phone (281) 495-7509	Fax (713) 495-7509	PHONE: (281) 416-0607 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: 09/01/2017			
PRIVATE Beds: 0	TITLE 18/19: 0				

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: (512) 498-2700 FAX: (512) 498-2777			
TOTAL Lic Capacity: 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: (512) 498-2700 FAX: (512) 498-2777			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 10/09/2017			
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: (512) 498-2700	FAX: (512) 498-2777
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 10/10/2018			

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

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007239			Owner Information	
MERIDIAN LIVING CENTER				MERIDIAN LIVING CENTER INC	
7231 AUGUSTINE DR				#4 MOCKINGBIRD	
HOUSTON	TX 77036			HOUSTON	TX 77074
Phone (713) 272-9707	Fax (713) 778-9313			PHONE: (713) 778-9300	FAX: (713) 778-9313
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	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 I I				MERIDIAN LIVING CENTER INC	
10610 ODYSSEY CT				#4 MOCKINGBIRD	
HOUSTON	TX 77099			HOUSTON	TX 77074
Phone (281) 568-1338	Fax (713) 778-9300			PHONE: (713) 778-9300	FAX: (713) 778-9313
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	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.				PACE OPPORTUNITY CENTERS INC	
4002 WYNE STREET				1101 JAYCEE DR	
HOUSTON	TX 77017			LONGVIEW	TX 75604
Phone (903) 238-9523	Fax (903) 238-9528			PHONE: (903) 238-9523	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	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				S&G COMMUNITY LIVING CENTER INC	
7865 PECAN VILLAS				7865 PECAN VILLAS	
HOUSTON	TX 77061			HOUSTON	TX 77061
Phone (713) 640-1044	Fax (281) 334-7850			PHONE: (713) 598-1471	FAX: (281) 334-7850
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
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				JOHN M LUGAY	
1638 PERIWINKLE ST				17126 WUNDER HILL DR	
HOUSTON	TX 77038			SPRING TX 77379	
Phone (281) 448-9005		Fax (281) 379-6068		PHONE: (281) 379-4833	FAX: (281) 379-6068
TOTAL Lic Capacity: 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	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007384			Owner Information	
RAVENHEAD LIVING CENTER				DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF HOUSTON LLC	
314 RAVENHEAD ST				4115 GALVESTON RD	
HOUSTON	TX 77034			HOUSTON TX 77017	
Phone (713) 475-2228		Fax (713) 475-2212		PHONE: (713) 475-2220	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: 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: (512) 498-2700	FAX: (512) 498-2777
TOTAL Lic Capacity: 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: 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		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: 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		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 09/27/2017	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003971			Owner Information	
SPRING SHADOWS				EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST	
2803 QUINCANNON				9901 LINN STATION ROAD	
HOUSTON	TX 77043			LOUISVILLE KY 40223-3808	
Phone (713) 690-3127		Fax		PHONE: (512) 498-2700	FAX: (512) 498-2777
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 02/14/2018	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007472			Owner Information	
UCG - ALBURY HOUSE				FROSTVIEW LANE LLC	
11019 ALBURY				820 PARK TWO	
HOUSTON	TX 77096			SUGARLAND TX	77478
Phone (713) 774-3656		Fax (281) 568-8125		PHONE: (713) 835-0527	FAX: (713) 271-8585
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 09/01/2017	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007263			Owner Information	
UCG - HUMMINGBIRD HOUSE				FROSTVIEW LANE LLC	
9726 S. HANWORTH DR.				820 PARK TWO	
HOUSTON	TX 77031			SUGARLAND TX	77478
Phone (713) 271-7777		Fax (713) 271-8585		PHONE: (713) 835-0527	FAX: (713) 271-8585
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 09/01/2017	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007801			Owner Information	
UCG NIGHTINGALE I				FROSTVIEW LANE LLC	
13927 MAGNUS LANE				820 PARK TWO	
HOUSTON	TX 77083			SUGARLAND TX	77478
Phone (713) 981-1571		Fax (713) 271-8585		PHONE: (713) 835-0527	FAX: (713) 271-8585
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 09/01/2017	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007806			Owner Information	
UCG NIGHTINGALE I I				FROSTVIEW LANE LLC	
7327 BEECHNUT ST				820 PARK TWO	
HOUSTON	TX 77074			SUGARLAND TX	77478
Phone (713) 541-2667		Fax (713) 271-8585		PHONE: (713) 835-0527	FAX: (713) 271-8585
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 09/01/2017	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007604			Owner Information	
UNITY HOUSE				EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST	
10507 OFFER ST				9901 LINN STATION ROAD	
HOUSTON	TX 77031			LOUISVILLE KY	40223-3808
Phone (713) 776-0072		Fax		PHONE: (512) 498-2700	FAX: (512) 498-2777
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 07/31/2018	
PRIVATE Beds: 0	TITLE 18/19: 0				

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

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

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003941	Owner Information			
WESTLAKE FOREST		EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST			
2422 HEATHER GOLD		9901 LINN STATION ROAD			
HOUSTON	TX 77084	LOUISVILLE KY 40223-3808			
Phone (281) 578-7050	Fax	PHONE: (512) 498-2700 FAX: (512) 498-2777			
TOTAL Lic Capacity: 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: 007571	Owner Information			
WESTVIEW I		QHS ENTERPRISES INC			
10018 WESTVIEW DR		2926 COLONEL COURT DR			
HOUSTON	TX 77055	RICHMOND TX 77406			
Phone (713) 722-7102	Fax (713) 722-7155	PHONE: (281) 375-5507 FAX:			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 11/19/2017			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003940	Owner Information			
WOODEDGE		EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST			
11914 GREEN CREEK CIRCLE		9901 LINN STATION ROAD			
HOUSTON	TX 77070	LOUISVILLE KY 40223-3808			
Phone (281) 469-8589	Fax (512) 498-2777	PHONE: (512) 498-2700 FAX: (512) 498-2777			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/25/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

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

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

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

Facility Information: Facility ID: 007540

MEADOWPLACE LIVING CENTER
5205 MEADOW PLACE
LA PORTE TX 77571

Phone (713) 475-2228 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

Owner Information
DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF HOUSTON LLC
4115 GALVESTON RD
HOUSTON TX 77017
PHONE: (713) 475-2220 **FAX:** (713) 472-2332
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

SHELL ROCK LIVING CENTER
9734 SHELL ROCK
LA PORTE TX 77571

Phone (713) 475-2228 Fax (713) 472-2212

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
DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF HOUSTON LLC
4115 GALVESTON RD
HOUSTON TX 77017
PHONE: (713) 475-2220 **FAX:** (713) 472-2332
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

FELLOWS BLOCK
3419 BOCA RATON DRIVE
MISSOURI CITY TX 77459

Phone (281) 835-9303 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 - GULF COAST
9901 LINN STATION ROAD
LOUISVILLE KY 40223-3808
PHONE: (512) 498-2700 **FAX:** (512) 498-2777
PROGRAM TYPE: ICF/IID **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: 007218

FROSTVIEW HOUSE
7310 FROSTVIEW LN
MISSOURI CITY TX 77489

Phone (713) 271-0480 Fax (713) 271-8585

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
FROSTVIEW LANE LLC
820 PARK TWO
SUGARLAND TX 77478
PHONE: (713) 835-0527 **FAX:** (713) 271-8585
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: 007346

JUDY LIVING CENTER
2012 JUDY LN
PASADENA TX 77502

Phone (713) 475-2228 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

Owner Information
DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF HOUSTON LLC
4115 GALVESTON RD
HOUSTON TX 77017
PHONE: (713) 475-2220 **FAX:** (713) 472-2332
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: 007807

PASADENA COTTAGE
2122 WICHITA
PASADENA TX 77502

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

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

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

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007378	Owner Information			
GREEN VALLEY HOUSE		EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST			
5202 ALAMOSA LN		9901 LINN STATION ROAD			
SPRING	TX 77379	LOUISVILLE KY 40223-3808			
Phone (832) 717-0065	Fax	PHONE: (512) 498-2700 FAX: (512) 498-2777			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 07/31/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

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

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003847	Owner Information			
PASSION HOUSE		EDUCARE COMMUNITY LIVING CORPORATION - GULF COAST			
19110 CANDLETRAIL DRIVE		9901 LINN STATION ROAD			
SPRING	TX 77388	LOUISVILLE KY 40223-3808			
Phone (281) 528-9570	Fax (713) 434-5041	PHONE: (512) 498-2700 FAX: (512) 498-2777			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 07/31/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003990			Owner Information	
SPRING GROUP HOME				BETHESDA LUTHERAN COMMUNITIES INC	
17403 DEER CREEK				18937 K Z RD	
SPRING	TX 77379			CYPRESS TX 77433	
Phone (281) 576-4000	Fax (281) 351-5897			PHONE: (281) 516-4000	FAX: (281) 351-5897
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 01/25/2018	
PRIVATE Beds: 0	TITLE 18/19: 0				

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

County	HARRIS	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 105856			Owner Information	
CHOCTAW GROUP HOME				UCG CENTRAL TEXAS HOLDINGS LLC	
11719 COCONINO LANE				750 RUSK	
TOMBALL	TX 77377			NEW BRAUNFELS TX 78130	
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: 09/01/2017	
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				750 RUSK	
TOMBALL	TX 77377			NEW BRAUNFELS TX 78130	
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				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 01/18/2018			

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

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

County	HAYS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007542	Owner Information			
CEDAR VALLEY COMMUNITY RESIDENCE		RESCARE SERVICES INC			
12800 DANIEL BOONE DR		3711 SAN ANTONIO ST			
AUSTIN	TX 78737	AUSTIN TX		78734-2126	
Phone (512) 288-4259	Fax (512) 328-1832	PHONE: (512) 328-1832	FAX: (512) 328-1833		
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: 06/09/2018			

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	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	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	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	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				750 RUSK	
SAN MARCOS	TX 78666			NEW BRAUNFELS TX	78130
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: 09/01/2017	

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				750 RUSK	
SAN MARCOS	TX 78666			NEW BRAUNFELS TX	78130
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: 09/01/2017	

County	HAYS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 105956			Owner Information	
R&K SPECIALIZED HOMES, INC.				R & K SPECIALIZED HOMES INC	
707 EASTON DR				1550 NE LOOP 410	,STE 206
SAN MARCOS	TX 78666			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	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 09/23/2018	

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				750 RUSK	
SAN MARCOS	TX 78666			NEW BRAUNFELS TX	78130
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			
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	HENDERSON	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 010354			Owner Information	
ATHENS PLACE GROUP HOME				ANDREWS CENTER	
4875 FM 2709				2323 W FRONT ST	
ATHENS	TX 75751			TYLER TX	75702
Phone (903) 675-6784	Fax			PHONE: (903) 567-1351	FAX: (903) 535-7384
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 8			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt:	

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

County	HIDALGO	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 003956			Owner Information	
922 DIANA DRIVE				SOUTH TEXAS COMMUNITY LIVING CORP	
922 DIANA DRIVE				18 AUGUSTA PINES DR	,STE 140 E
EDINBURG	TX 78542			SPRING	TX 77389
Phone (956) 381-0026	Fax (956) 631-6156			PHONE: (281) 351-1758	FAX: (210) 255-4500
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 03/01/2018	

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

County	HIDALGO	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 007525			Owner Information	
6000 NORTH 26TH STREET				SOUTH TEXAS COMMUNITY LIVING CORP	
6000 N 26TH ST				18 AUGUSTA PINES DR	,STE 140 E
MCALLEN	TX 78504			SPRING	TX 77389
Phone (956) 631-3070	Fax (956) 631-6156			PHONE: (281) 351-1758	FAX: (210) 255-4500
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 03/01/2018	

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				18 AUGUSTA PINES DR	,STE 140 E
MISSION	TX 78574			SPRING	TX 77389
Phone (956) 585-7192	Fax (956) 631-6156			PHONE: (281) 351-1758	FAX: (210) 255-4500
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 03/01/2018	

County	HOCKLEY	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:	Facility ID: 007455			Owner Information	
SUNRISE GROUP HOME				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
308 W 7TH STREET				9901 LINN STATION ROAD	
SUNDOWN	TX 79372			LOUISVILLE	KY 40223
Phone (806) 229-2153	Fax (806) 894-9605			PHONE: (502) 394-2100	FAX: (502) 394-2285
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: 08/01/2017	

County	HOOD	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003779			Owner Information	
GRANBURY HOUSE				SOUTHERN CONCEPTS INC	
826 N. THORP SPRINGS ROAD				PO BOX 758	
GRANBURY	TX 76049			GRANBURY	TX 76048
Phone (817) 573-1559	Fax (817) 579-6611			PHONE: (817) 573-6922	FAX: (817) 579-6611
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 8			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 04/01/2018	

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		PO BOX 758			
TOLAR	TX 76476	GRANBURY TX 76048			
Phone (254) 835-4977	Fax (817) 579-6611	PHONE: (817) 573-6922 FAX: (817) 579-6611			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	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	HOWARD	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 003792	Owner Information			
COMANCHE FLATS		D & S RESIDENTIAL SERVICES LP			
1315 BAYLOR		8911 N CAPITAL OF TX HWY ,BLDG 1 STE 1300			
BIG SPRING	TX 79720	AUSTIN TX 78759			
Phone (432) 263-1408	Fax (512) 327-5355	PHONE: (512) 327-2325 FAX: (512) 327-5355			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 12/01/2017			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	HUNT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003937	Owner Information			
BONNIE LEA GROUP HOME		LAKES REGIONAL MHMR CENTER			
3408 BONNIE LEA		400 AIRPORT RD			
GREENVILLE	TX 75402	TERRELL TX 75160			
Phone (903) 455-4476	Fax	PHONE: (972) 388-2000 FAX: (972) 563-5322			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	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	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	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 04/01/2017			
PRIVATE Beds: 0	TITLE 18/19: 0				

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	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 04/01/2019			
PRIVATE Beds: 0	TITLE 18/19: 0				

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	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	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	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 04/01/2017			
PRIVATE Beds: 0	TITLE 18/19: 0				

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	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	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	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	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				
Phone (409) 384-2832	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	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	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	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	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: 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) 394-2285			
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: 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) 394-2285			
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: 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		2203 KILGORE ROAD			
BEAUMONT	TX 77708	BAYTOWN TX 77520			
Phone (409) 833-4550	Fax (409) 833-0229	PHONE: (281) 837-1942 FAX: (281) 427-0586			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
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	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	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: 003754	Owner Information			
COLE ROAD HOUSE		ST GILES - BAYTOWN INC			
5820 COLE RD		2203 KILGORE ROAD			
BEAUMONT	TX 77706	BAYTOWN TX 77520			
Phone (409) 896-2345	Fax (409) 835-0229	PHONE: (281) 837-1942 FAX: (281) 427-0586			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13			
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	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 003791			Owner Information	
HORIZON HOUSE				ST GILES - BAYTOWN INC	
4176 TREADWAY				2203 KILGORE ROAD	
BEAUMONT	TX 77706			BAYTOWN TX 77520	
Phone (409) 833-4550	Fax (409) 833-0229			PHONE: (281) 837-1942	FAX: (281) 427-0586
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 8			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 09/01/2017			

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	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	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) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	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	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	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				2203 KILGORE ROAD	
BEAUMONT	TX 77708			BAYTOWN TX 77520	
Phone (409) 833-4550	Fax (409) 833-0229			PHONE: (281) 837-1942	FAX: (281) 427-0586
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 09/01/2017			

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	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	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			
Cert Alzh Capacity: 0	TITLE19: 0				
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: 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) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 02/28/2018			

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

County	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 007567	Owner Information			
GRIFFIN LIVING CENTER 3905 28TH STREET PORT ARTHUR	TX 77642	DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF BEAUMONT, LLC 4115 GALVESTON ROAD HOUSTON TX 77017			
Phone (409) 832-4112	Fax (409) 832-6974	PHONE: (713) 475-2220	FAX: (713) 475-2212		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	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	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 007574	Owner Information			
MODEL LIVING CENTER 411 5TH AVE PORT ARTHUR	TX 77642	DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF BEAUMONT, LLC 4115 GALVESTON ROAD HOUSTON TX 77017			
Phone (409) 832-4112	Fax (409) 832-6974	PHONE: (713) 475-2220	FAX: (713) 475-2212		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	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	JEFFERSON	Reg Svcs:	REGION 5 ICF/IID	Region	05 - BEAUMONT
Facility Information:	Facility ID: 007530	Owner Information			
SHERIDAN LIVING CENTER 2810 SHERIDAN PORT ARTHUR	TX 77640	DEVELOPMENTAL DISABILITIES MANAGEMENT SERVICES OF BEAUMONT, LLC 4115 GALVESTON ROAD 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				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 01/01/2019			

County	JIM WELLS	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 007295	Owner Information			
GREEN ACRES 5927 S HWY 281 ALICE	TX 78332	ASSISTED HOME CARE INC 704 E FIRST ST 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 601 N REYNOLDS ALICE	TX 78332	ASSISTED HOME CARE INC 704 E FIRST ST ALICE TX 78332			
Phone (361) 668-0126	Fax (361) 664-7776	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: 09/04/2017			

County	JOHNSON	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003929	Owner Information			
OAK HOUSE 208 ALVARADO OAKS DR ALVARADO	TX 76009	EDUCARE COMMUNITY LIVING CORPORATION - TEXAS 9901 LINN STATION ROAD LOUISVILLE KY 40223			
Phone (817) 790-3476	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: 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
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 **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
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 **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
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PHONE:** (817) 558-9559 **FAX:** (817) 558-9560
Cert Alzh Capacity: 0 **TITLE19:** 0 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE:** PRIVATELY OWNED
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 01/09/2019

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

Facility Information: Facility ID: 003865 **Owner Information**
 COMMUNITY LIVING CONCEPTS INC COMMUNITY LIVING CONCEPTS INC
 201 FEATHERSTON 110 E WALNUT ST
 CLEBURNE TX 76031 KEENE TX 76059
Phone (817) 774-3613 **Fax** (817) 558-9560
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 13 **PHONE:** (817) 558-9559 **FAX:** (817) 558-9560
Cert Alzh Capacity: 0 **TITLE19:** 0 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE:** PRIVATELY OWNED
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 01/09/2019

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

Facility Information: Facility ID: 003806 **Owner Information**
 COMMUNITY LIVING CONCEPTS INC COMMUNITY LIVING CONCEPTS INC
 1709 FM 2135 110 E WALNUT ST
 CLEBURNE TX 76031 KEENE TX 76059
Phone (817) 558-9559 **Fax** (817) 558-9560
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 12 **PHONE:** (817) 558-9559 **FAX:** (817) 558-9560
Cert Alzh Capacity: 0 **TITLE19:** 0 **PROGRAM TYPE:** ICF/IID **SERVICE TYPE:** PRIVATELY OWNED
PRIVATE Beds: 0 **TITLE 18/19:** 0 **License Exp Dt:** 01/09/2019

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
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6 **PHONE:** (254) 968-4004 **FAX:** (254) 965-8653
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	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				PROGRAM TYPE: ICF/IID
PRIVATE Beds: 0	TITLE 18/19: 0				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				PROGRAM TYPE: ICF/IID
PRIVATE Beds: 0	TITLE 18/19: 0				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				PROGRAM TYPE: ICF/IID
PRIVATE Beds: 0	TITLE 18/19: 0				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) 394-2285
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: 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				PROGRAM TYPE: ICF/IID
PRIVATE Beds: 0	TITLE 18/19: 0				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				PROGRAM TYPE: ICF/IID
PRIVATE Beds: 0	TITLE 18/19: 0				SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 01/09/2019	

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

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

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

County	JONES	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 003705			Owner Information	
SAGEBRUSH LIVING CENTER				SAGEBRUSH LIVING CENTER LTD	
1101 COLUMBIA ST				845 PROTON RD	
STAMFORD	TX 79553			SAN ANTONIO	TX 78258
Phone (325) 773-2791		Fax (325) 773-2448		PHONE: (210) 340-7155	FAX: (210) 340-4832
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 86		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 07/01/2017	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	LEE	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007583			Owner Information	
COUNTRY CLUB HOUSE				JAMES-LEACH INC	
1070 CR 227				339 W COLORADO	
GIDDINGS	TX 78942			LA GRANGE	TX 78945
Phone (979) 542-9315		Fax		PHONE: (979) 968-8502	FAX: (979) 968-5210
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 01/26/2018	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	LEE	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007523			Owner Information	
EDGEWOOD HOUSE				JAMES-LEACH INC	
486 EDGEWOOD				339 W COLORADO	
GIDDINGS	TX 78942			LA GRANGE	TX 78945
Phone (979) 542-0360		Fax		PHONE: (979) 968-8502	FAX: (979) 968-5210
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 04/08/2018	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	LEE	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007471			Owner Information	
JOEKEL HOUSE				JAMES-LEACH INC	
666 JOEKEL				339 W COLORADO	
GIDDINGS	TX 78942			LA GRANGE	TX 78945
Phone (979) 542-1877	Fax			PHONE: (979) 968-8502	FAX: (979) 968-5210
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 10/08/2017	

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 STREET HOUSE				TRI COUNTY MHMR SERVICES	
802 LEE ST				PO BOX 3067	
CLEVELAND	TX 77327			CONROE	TX 77305
Phone (719) 592-3651	Fax (409) 756-8331			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	LIBERTY	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003891			Owner Information	
LEGION STREET HOUSE				TRI COUNTY MHMR SERVICES	
206 CHARLES BARKER				PO BOX 3067	
CLEVELAND	TX 77327			CONROE	TX 77305
Phone (409) 756-8331	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	LIBERTY	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003982			Owner Information	
AVENUE B HOUSE				TRI COUNTY MHMR SERVICES	
201 AVE B RTE 3 BOX 65 P				PO BOX 3067	
LIBERTY	TX 77575			CONROE	TX 77305
Phone (409) 336-2629	Fax (409) 756-8331			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	LIBERTY	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007566			Owner Information	
HOLLY STREET HOUSE				TRI COUNTY MHMR SERVICES	
1420 HOLLY ST				PO BOX 3067	
LIBERTY	TX 77575			CONROE	TX 77305
Phone (409) 756-8122	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	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: 02/05/2018	

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

County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:	Facility ID: 007330			Owner Information	
23RD MANOR				ANNADALE MANOR INC.	
5423 23RD ST				7614 BAYLOR	
LUBBOCK	TX 79407			LUBBOCK TX 79416	
Phone (806) 632-6588	Fax			PHONE: (806) 632-6588	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 07/01/2017	

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

County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:	Facility ID: 007344			Owner Information	
5735 DARTMOUTH DRIVE				CALAB INC	
5735 DARTMOUTH DR				3803 S ROBINSON RD	
LUBBOCK	TX 79416			GRAND PRAIRIE	TX 75052-1239
Phone (806) 793-6608	Fax (806) 767-0687			PHONE: (972) 263-2112	FAX: (972) 263-2115
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 09/01/2017	

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

County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:	Facility ID: 007447			Owner Information	
6603 DOVER AVENUE				CALAB INC	
6603 DOVER AVE				3803 S ROBINSON RD	
LUBBOCK	TX 79423			GRAND PRAIRIE	TX 75052-1239
Phone (806) 767-0685	Fax (806) 767-0687			PHONE: (972) 263-2112	FAX: (972) 263-2115
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 09/01/2017	

County	LUBBOCK	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:	Facility ID: 007448			Owner Information	
7409 RICHMOND AVENUE				CALAB INC	
7409 RICHMOND AVE				3803 S ROBINSON RD	
LUBBOCK	TX 79424			GRAND PRAIRIE	TX 75052-1239
Phone (806) 795-8920	Fax (806) 767-0687			PHONE: (972) 263-2112	FAX: (972) 263-2115
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 09/01/2017	

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			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	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 RD. STE 300			
LUBBOCK	TX 79415	CARROLLTON	TX	75006	
Phone (806) 794-9334	Fax (806) 794-9337				
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PHONE: (972) 866-9989	FAX: (972) 991-0834	
Cert Alzh Capacity: 0	TITLE19: 0		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
PRIVATE Beds: 0	TITLE 18/19: 0		License Exp Dt: 01/01/2017		

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 RD. STE 300			
LUBBOCK	TX 79412	CARROLLTON	TX	75006	
Phone (806) 794-9334	Fax (806) 794-9337				
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PHONE: (972) 866-9989	FAX: (972) 991-0834	
Cert Alzh Capacity: 0	TITLE19: 0		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
PRIVATE Beds: 0	TITLE 18/19: 0		License Exp Dt: 01/01/2017		

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 RD. STE 300			
LUBBOCK	TX 79416	CARROLLTON	TX	75006	
Phone (806) 794-9334	Fax (806) 794-9337				
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PHONE: (972) 866-9989	FAX: (972) 991-0834	
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: 007491
 ANNADALE MANOR INC.
 10702 COUNTY RD 1300
 WOLFFORTH TX 79382

Phone (806) 866-9186 **Fax** (806) 924-7773

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
 ANNADALE MANOR INC.
 7614 BAYLOR
 LUBBOCK TX 79416

PHONE: (806) 632-6588 **FAX:**
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 04/01/2018

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

Facility Information: Facility ID: 007557
 MOSAIC
 103 E VISER
 MADISONVILLE TX 77864

Phone (979) 823-7622 **Fax** (979) 775-5733

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
 MOSAIC
 2245 MIDWAY RD. STE 300
 CARROLLTON TX 75006

PHONE: (972) 866-9989 **FAX:** (972) 991-0834
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 01/01/2017

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

Facility Information: Facility ID: 003826
 NORTHWEST WACO LIVING RESIDENCE
 2323 N 39TH ST
 WACO TX 76708

Phone (254) 752-7230 **Fax** (254) 752-1931

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
 HEART OF TEXAS REGIONAL MHMR CENTER
 110 S 12TH ST
 WACO TX 76703

PHONE: **FAX:**
PROGRAM TYPE: ICF/IID **SERVICE TYPE** GOVERNMENT BASED
License Exp Dt:

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

Facility Information: Facility ID: 007628
 WEST WARD GROUP HOME
 108 WEST WARD
 WACO TX 76706

Phone (254) 662-6144 **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
 HEART OF TEXAS REGIONAL MHMR CENTER
 110 S 12TH ST
 WACO TX 76703

PHONE: **FAX:**
PROGRAM TYPE: ICF/IID **SERVICE TYPE** GOVERNMENT BASED
License Exp Dt:

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

Facility Information: Facility ID: 007327
 28TH STREET COMMUNITY HOME
 1506 28TH ST
 HONDO TX 78861-3208

Phone (830) 741-4624 **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 **MIDLAND** Reg Svcs: ICF/IID Region 09 - ABILENE

Facility Information: Facility ID: 003959
 BARNEY GREATHOUSE MEMORIAL HOME
 3005 W GOLFCOURSE RD
 MIDLAND TX 79701

Phone (432) 695-9028 **Fax** (432) 695-9909

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
 MARC INC
 2701 NORTH A ST
 MIDLAND TX 79705

PHONE: (432) 695-9901 **FAX:**
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 01/23/2018

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			License Exp Dt: 06/25/2018	
PRIVATE Beds: 0	TITLE 18/19: 0				

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			License Exp Dt: 12/13/2017	
PRIVATE Beds: 0	TITLE 18/19: 0				

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			License Exp Dt: 11/01/2017	
PRIVATE Beds: 0	TITLE 18/19: 0				

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			License Exp Dt: 11/01/2017	
PRIVATE Beds: 0	TITLE 18/19: 0				

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

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	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 10/01/2018	
PRIVATE Beds: 0	TITLE 18/19: 0				

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 SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 10/01/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

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 SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 10/01/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

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

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

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

County	MONTGOMERY	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003882	Owner Information			
NORTH THOMPSON HOUSE		TRI COUNTY MHMR SERVICES			
2223 N THOMPSON ST		PO BOX 3067			
CONROE	TX 77303	CONROE TX 77305			
Phone (713) 760-3660	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	MONTGOMERY	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003905			Owner Information	
PATRICIA STREET HOUSE				TRI COUNTY MHMR SERVICES	
104 PATRICIA ST				PO BOX 3067	
CONROE	TX 77301			CONROE TX 77305	
Phone (409) 760-4074	Fax (409) 756-8331			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	MONTGOMERY	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 003883			Owner Information	
SHENANDOAH HOUSE				TRI COUNTY MHMR SERVICES	
28902 ENCHANTED DRIVE				PO BOX 3067	
SPRING	TX 77381			CONROE TX 77305	
Phone (281) 292-3712	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	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		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	NAVARRO	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003773			Owner Information	
45TH STREET I COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
1348 N 45TH ST				9901 LINN STATION ROAD	
CORSICANA	TX 75110-1733			LOUISVILLE KY 40223-3808	
Phone (903) 872-2200	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13		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: 003836			Owner Information	
45TH STREET I I COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
1348 1/2 N 45TH ST				9901 LINN STATION ROAD	
CORSICANA	TX 75110-1733			LOUISVILLE KY 40223-3808	
Phone (903) 872-2200	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13		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: 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: 01/01/2017			
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: 09/11/2017			
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

SUNSET ACRES HOUSE
5835 NW COUNTY RD 2091
CORSICANA TX 75110

Phone (903) 872-6138 Fax (903) 872-0895

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
CEN-TEX ASSOCIATION FOR RETARDED CHILDREN
PO DRAWER 750
MEXIA TX 76667
PHONE: (254) 562-2891 **FAX:** (254) 562-7656
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 12/14/2017

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

Facility Information: Facility ID: 007519

TAMMY HOUSE
1312 TAMMY
CORSICANA TX 75110

Phone (903) 872-6086 Fax (903) 872-0895

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
CEN-TEX ASSOCIATION FOR RETARDED CHILDREN
PO DRAWER 750
MEXIA TX 76667
PHONE: (254) 562-2891 **FAX:** (254) 562-7656
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 03/23/2018

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

Facility Information: Facility ID: 003996

NEWTON GROUP HOME
700 MCMAHON
NEWTON TX 75966

Phone (409) 379-3335 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
THE BURKE CENTER
4101 SOUTH MEDFORD DR
LUFKIN TX 75901
PHONE: **FAX:**
PROGRAM TYPE: ICF/IID **SERVICE TYPE** GOVERNMENT BASED
License Exp Dt:

County **NOLAN** Reg Svcs: **ICF/IID** Region **02 - ABILENE**

Facility Information: Facility ID: 007225

HACKBERRY HOUSE
1916 LAKEVIEW
SWEETWATER TX 79556

Phone (325) 235-2568 Fax (325) 235-1364

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
LIVING RESOURCES LLC
3125 S 27TH ST
ABILENE TX 79605
PHONE: (325) 695-2112 **FAX:** (325) 794-0023
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 01/23/2018

County **NOLAN** Reg Svcs: **ICF/IID** Region **02 - ABILENE**

Facility Information: Facility ID: 007657

WALNUT CREEK HOME
301 W AVE D
SWEETWATER TX 79556

Phone (325) 235-2568 Fax (325) 235-1364

TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 13
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

Owner Information
LIVING RESOURCES LLC
3125 S 27TH ST
ABILENE TX 79605
PHONE: (325) 695-2112 **FAX:** (325) 794-0023
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 01/01/2019

County **NUECES** Reg Svcs: **CORPUS CHRISTI 61** Region **11 - CORPUS CHRISTI**

Facility Information: Facility ID: 007511

BROCKHAMPTON HOUSE
6102 BROCKHAMPTON
CORPUS CHRISTI TX 78414

Phone (361) 992-7763 Fax (361) 852-2181

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
LMS CONCEPTS INC
PO BOX 270755
CORPUS CHRISTI TX 78427-0755
PHONE: (361) 854-9332 **FAX:** (361) 852-2181
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 02/12/2018

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		
Cert Alzh Capacity: 0	TITLE19: 0			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: 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		
Cert Alzh Capacity: 0	TITLE19: 0			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: 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		
Cert Alzh Capacity: 0	TITLE19: 0			SERVICE TYPE: PRIVATELY OWNED	
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 09/01/2018			

County	NUECES	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 003664	Owner Information			
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
9230 EVENING STAR		9901 LINN STATION ROAD			
CORPUS CHRISTI	TX 78410	LOUISVILLE KY 40223			
Phone (361) 241-0365	Fax	PHONE: (502) 394-2100		FAX: (502) 394-2285	
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: 08/01/2017			

County	NUECES	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 003660	Owner Information			
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
5310 WENTWORTH		9901 LINN STATION ROAD			
CORPUS CHRISTI	TX 78413	LOUISVILLE KY 40223			
Phone (361) 906-1005	Fax	PHONE: (502) 394-2100		FAX: (502) 394-2285	
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: 08/01/2017			

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) 394-2285	
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: 08/01/2017			

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) 394-2285
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: 08/01/2017			

County	NUECES	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 003659			Owner Information	
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
5502 BOWIE		9901 LINN STATION ROAD			
CORPUS CHRISTI TX 78415-1965		LOUISVILLE KY 40223			
Phone (361) 854-7333	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2285
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: 08/27/2017			

County	NUECES	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 003858			Owner Information	
EDUCARE COMMUNITY LIVING CORPORATION - TEXAS		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
4038 KILLARMET		9901 LINN STATION ROAD			
CORPUS CHRISTI TX 78413		LOUISVILLE KY 40223			
Phone (361) 852-3928	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2285
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: 08/01/2017			

County	NUECES	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 007363			Owner Information	
EDUCARE COMMUNITY LIVING CORPORATION-TEXAS		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
9329 MOON LIGHT DR		9901 LINN STATION ROAD			
CORPUS CHRISTI TX 78409		LOUISVILLE KY 40223			
Phone (361) 242-1641	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2285
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: 09/01/2017			

County	NUECES	Reg Svcs:	CORPUS CHRISTI 61	Region	11 - CORPUS CHRISTI
Facility Information:	Facility ID: 007433			Owner Information	
EDUCARE COMMUNITY LIVING CORPORATION-TEXAS		EDUCARE COMMUNITY LIVING CORPORATION - TEXAS			
4053 MOUNTAIN VIEW		9901 LINN STATION ROAD			
CORPUS CHRISTI TX 78410		LOUISVILLE KY 40223			
Phone (361) 241-9921	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2285
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: 09/01/2017			

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) 394-2285
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: 08/01/2017			

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 AVENUE				9901 LINN STATION ROAD	
ORANGE	TX 77630			LOUISVILLE KY 40223	
Phone (409) 882-9442	Fax (409) 882-9900			PHONE: (502) 394-2100	FAX: (502) 394-2285
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: 08/01/2017	

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				301 COMMERCE	
AZLE	TX 76020			AZLE TX 76020	
Phone (817) 270-2747	Fax (817) 270-1477			PHONE: (817) 270-2747	FAX: (817) 270-1477
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE: PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 07/11/2017	

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		301 COMMERCE			
AZLE	TX 76020	AZLE TX 76020			
Phone (817) 221-4945	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: 07/11/2017			
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 190E		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: 09/01/2017			
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: 01/30/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	RANDALL	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:	Facility ID: 007619	Owner Information			
EL PASO		ADVO COMPANIES INC			
8511 EL PASO DR		PO BOX 51744			
AMARILLO	TX 79118	AMARILLO TX 79159			
Phone (806) 342-0600	Fax (806) 342-0900	PHONE: (806) 342-0600 FAX: (806) 342-0900			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 08/09/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	RANDALL	Reg Svcs:	HIGH PLAINS ICF/MR	Region	01 - LUBBOCK
Facility Information:	Facility ID: 007273			Owner Information	
HAMPTON				ADVO COMPANIES INC	
6004 HAMPTON				PO BOX 51744	
AMARILLO	TX 79109			AMARILLO TX 79159	
Phone (806) 342-0600	Fax (806) 342-0900			PHONE: (806) 342-0600	FAX: (806) 342-0900
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 06/03/2018	

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: 12/11/2017	

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			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 11/08/2017	

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:	12/01/2017

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:	12/20/2017

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

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

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

Owner Information
 BAPTIST CARE FACILITIES FOR PERSONS WITH MENTAL DISABILITIES INC
 15062 CR 1145
 TYLER TX 75704
PHONE: (903) 596-8100 **FAX:** (903) 596-8104
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 11/01/2017

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: 11/01/2017

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: 11/10/2017

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: 09/18/2017

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

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

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

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

County	SMITH	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 007342			Owner Information	
GAIL HOUSE				COMMUNITY ACCESS INC	
3323 GAIL LN				2040 SHILOH RD	
TYLER	TX 75701			TYLER TX 75703	
Phone (903) 566-1441	Fax (903) 526-0881			PHONE: (903) 579-8527	FAX: (903) 526-0881
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 05/19/2018	

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

County	SMITH	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 003634			Owner Information	
PETTIT HOUSE				COMMUNITY ACCESS INC	
1519 PETTIT ST				2040 SHILOH RD	
TYLER	TX 75701			TYLER TX 75703	
Phone (903) 509-9932	Fax (903) 526-0881			PHONE: (903) 579-8527	FAX: (903) 526-0881
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 10/01/2017	

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

County	SMITH	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 007345			Owner Information	
PRESTON HOUSE				COMMUNITY ACCESS INC	
2525 PRESTON				2040 SHILOH RD	
TYLER	TX 75701			TYLER TX 75703	
Phone (903) 595-4430	Fax (903) 526-0881			PHONE: (903) 579-8527	FAX: (903) 526-0881
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 10/15/2017	

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: 09/01/2017	

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: 09/01/2017	

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: 09/01/2017	

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			
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	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 104605			Owner Information	
A & M CARE INC				A & M CARE INC	
2605 GLASSBORO CIR				2410 E HWY 377	
ARLINGTON	TX 76015			GRANBURY TX	76049
Phone (817) 795-7999	Fax (817) 548-0911			PHONE: (817) 795-7999	FAX: (817) 548-0911
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 06/17/2017	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007584			Owner Information	
AMICUS AT RIFLEMAN				AMICUS, INC	
405 RIFLEMAN TRAIL				1129 N LITTLE SCHOOL RD	
ARLINGTON	TX 76018			ARLINGTON TX	76017-1900
Phone (817) 467-3626	Fax (817) 563-7906			PHONE: (817) 563-7900	FAX: (817) 563-7906
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 09/01/2017	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007526			Owner Information	
AMICUS AT SHAWN				AMICUS, INC	
517 SHAWN COURT				1129 N LITTLE SCHOOL RD	
ARLINGTON	TX 76014			ARLINGTON TX	76017-1900
Phone (817) 784-1806	Fax (817) 563-7906			PHONE: (817) 563-7900	FAX: (817) 563-7906
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 12/01/2017	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007589			Owner Information	
AMICUS AT XAVIER				AMICUS, INC	
817 XAVIER DR				1129 N LITTLE SCHOOL RD	
ARLINGTON	TX 76001			ARLINGTON TX	76017-1900
Phone (817) 467-3731	Fax (817) 563-7906			PHONE: (817) 563-7900	FAX: (817) 563-7906
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 09/01/2017	

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

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007817			Owner Information	
CALIFORNIA				TARRANT COUNTY MHMR SERVICES	
2812 CALIFORNIA				PO BOX 2603	
ARLINGTON	TX 76016			FORT WORTH TX	76113
Phone (817) 860-6257	Fax			PHONE: (817) 569-5634	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	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007302	Owner Information			
CEDAR OAKS COMMUNITY HOME		EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP			
1000 COKE RD		9901 LINN STATION ROAD			
ARLINGTON TX 76010		LOUISVILLE KY 40223-3808			
Phone (817) 459-3556	Fax	PHONE: (502) 394-2100	FAX: (502) 394-2285		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID	SERVICE TYPE	PRIVATELY OWNED	
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 01/01/2019			

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 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) 394-2285		
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: 01/01/2018			

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) 394-2285		
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: 01/01/2018			

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) 394-2285		
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: 01/01/2018			

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) 394-2285		
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: 01/01/2018			

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

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

Owner Information
 EVERGREEN PRESBYTERIAN MINISTRIES OF TEXAS INC
 10810 SANDEN DR
 DALLAS TX 75238
PHONE: (972) 386-4834 **FAX:**
PROGRAM TYPE: ICF/IID **SERVICE TYPE** PRIVATELY OWNED
License Exp Dt: 11/01/2017

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: 08/12/2017

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: 06/06/2017

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
 FOX HILL COMMUNITY HOME
 3202 FOX HILL DR
 ARLINGTON TX 76015
Phone (817) 468-1444 **Fax**
TOTAL Lic Capacity: 0 **TITLE 18:** 0 **ICF/IID:** 6
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 0 **TITLE 18/19:** 0

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

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003952			Owner Information	
MAGNOLIA COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
500 MAGNOLIA				9901 LINN STATION ROAD	
ARLINGTON	TX 76012			LOUISVILLE	KY 40223-3808
Phone (817) 543-0807	Fax (713) 622-9141			PHONE: (502) 394-2100	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: 003665			Owner Information	
NEWSTART LIVING CENTER V				NEWSTART INC	
4503 PALOMINO CT				PO BOX 331629	
ARLINGTON	TX 76017			FORT WORTH	TX 76163
Phone (817) 294-9675	Fax (817) 294-9907			PHONE: (817) 294-9675	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: 007524			Owner Information	
QUINCY HOUSE				A & M CARE INC	
2004 QUINCY CT				2410 E HWY 377	
ARLINGTON	TX 76013			GRANBURY	TX 76049
Phone (817) 548-0911	Fax (817) 459-4818			PHONE: (817) 795-7999	FAX: (817) 548-0911
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 04/08/2018	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007576			Owner Information	
RACQUET CLUB				TARRANT COUNTY MHMR SERVICES	
4809 RACQUET CLUB DRIVE				PO BOX 2603	
ARLINGTON	TX 76017-2625			FORT WORTH	TX 76113
Phone (817) 569-5632	Fax (817) 569-4130			PHONE: (817) 569-5634	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	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007441			Owner Information	
REVERCHON COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
2121 REVERCHON DR				9901 LINN STATION ROAD	
ARLINGTON	TX 76017			LOUISVILLE	KY 40223-3808
Phone (817) 557-5417	Fax			PHONE: (502) 394-2100	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: 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			
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: 007451	Owner Information			
DENVER TRAIL		MAINSTREAM HABILITATION SERVICES OF TEXAS INC			
129 DENVER TRAIL		301 COMMERCE			
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: 07/29/2017			
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		TARRANT COUNTY MHMR SERVICES			
1619 PIPELINE ROAD		PO BOX 2603			
BEDFORD	TX 76022	FORT WORTH TX 76113			
Phone (817) 354-8340	Fax	PHONE: (817) 569-5634 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	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) 394-2285			
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: 06/20/2017			
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		TARRANT COUNTY MHMR SERVICES			
2200 BUILDER ROAD		PO BOX 2603			
CROWLEY	TX 76036-4615	FORT WORTH TX 76113			
Phone (817) 332-4778	Fax	PHONE: (817) 569-5634 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	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003845	Owner Information			
NEUWSTART LIVING CENTER I		NEUWSTART INC			
305 N BEVERLY ST		PO BOX 331629			
CROWLEY	TX 76036	FORT WORTH TX 76163			
Phone (817) 297-1325	Fax (817) 294-9907	PHONE: (817) 294-9675 FAX: (817) 294-9907			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 06/01/2018			
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: 10/05/2017			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007575	Owner Information			
AMICUS AT MILLS		AMICUS, INC			
512 S MILLS DR		1129 N LITTLE SCHOOL RD			
EULESS	TX 76040	ARLINGTON TX 76017-1900			
Phone (817) 355-9661	Fax (817) 563-7906	PHONE: (817) 563-7900 FAX: (817) 563-7906			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 01/01/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

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 COURRY 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: 11/02/2017	

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: 07/19/2017	

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: 08/12/2017	

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007802			Owner Information	
CIBOLO HOUSE				TARRANT COUNTY MHMR SERVICES	
3704 CIBOLO				PO BOX 2603	
FORT WORTH	TX 76133			FORT WORTH	TX 76113
Phone (817) 292-8505	Fax			PHONE: (817) 569-5634	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	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) 394-2285			
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: 07/16/2018			
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) 394-2285			
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: 01/01/2018			
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) 394-2285			
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: 01/01/2018			
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) 394-2285			
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: 06/20/2017			
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) 394-2285			
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: 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) 394-2285			
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: 06/20/2017			
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) 394-2285			
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: 08/19/2018			
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: 08/20/2017			
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: 01/01/2018			
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		301 COMMERCE			
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: 07/11/2017			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003843	Owner Information			
OAKLAND PARK		SOUTHERN CONCEPTS INC			
4613/15 MENZER		PO BOX 758			
FORT WORTH	TX 76103	GRANBURY TX 76048			
Phone (817) 496-0252	Fax (817) 579-6611	PHONE: (817) 573-6922 FAX: (817) 579-6611			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 04/01/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007285			Owner Information	
OHARA				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
8321 OHARA				9901 LINN STATION ROAD	
FORT WORTH	TX 76123			LOUISVILLE KY 40223	
Phone (817) 294-4945	Fax (817) 563-1575			PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 06/20/2017			

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	License Exp Dt: 09/13/2017			

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	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	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				TARRANT COUNTY MHMR SERVICES	
701 SANDY LN				PO BOX 2603	
FORT WORTH	TX 76120			FORT WORTH TX 76113	
Phone (817) 446-8324	Fax			PHONE: (817) 569-5634	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 8			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	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				TARRANT COUNTY MHMR SERVICES	
4833 DIAZ				PO BOX 2603	
FORT WORTH	TX 76107			FORT WORTH TX 76113	
Phone (817) 731-3522	Fax			PHONE: (817) 569-5634	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 8			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt:			

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007370	Owner Information			
TRAINING RESIDENCE 7		TARRANT COUNTY MHMR SERVICES			
6312 KINGSWOOD		PO BOX 2603			
FORT WORTH	TX 76133	FORT WORTH TX 76113			
Phone (817) 370-9465	Fax	PHONE: (817) 569-5634 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	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 007351	Owner Information			
TRAINING RESIDENCE 8 TARRANT COUNTY MHMR		TARRANT COUNTY MHMR SERVICES			
6341 JUNEAU		PO BOX 2603			
FORT WORTH	TX 76116	FORT WORTH TX 76113			
Phone (817) 737-2919	Fax	PHONE: (817) 569-5634 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	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) 394-2285			
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: 02/27/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

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) 394-2285			
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: 01/22/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TARRANT	Reg Svcs:	IID TEAM	Region	03 - ARLINGTON
Facility Information:	Facility ID: 003739	Owner Information			
WILLIAMS ROAD		TARRANT COUNTY MHMR SERVICES			
1136 WILLIAMS ROAD		PO BOX 2603			
FORT WORTH	TX 76120	FORT WORTH TX 76113			
Phone (817) 731-3985	Fax	PHONE: (817) 569-5634 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	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		TARRANT COUNTY MHMR SERVICES			
5682 WORRELL		PO BOX 2603			
FORT WORTH	TX 76133	FORT WORTH TX 76113			
Phone (817) 569-5634	Fax	PHONE: (817) 569-5634 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: 11/20/2003			

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) 394-2285			
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: 01/01/2018			

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			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 01/29/2019			

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			
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	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			
Cert Alzh Capacity: 0	TITLE19: 0	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	License Exp Dt: 01/01/2017			

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	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED			
PRIVATE Beds: 0	TITLE 18/19: 0	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) 641-7695
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: 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		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: 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		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	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		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	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				9220 ALYSSA	
WHITE SETTLEMENT	TX 76108			WHITE SETTLEMENT TX	76108
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: 08/01/2017	
PRIVATE Beds: 0	TITLE 18/19: 0				

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				9220 ALYSSA	
WHITE SETTLEMENT	TX 76108			WHITE SETTLEMENT TX	76108
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: 08/01/2017	
PRIVATE Beds: 0	TITLE 18/19: 0				

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

County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 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		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 12/01/2017	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 007324			Owner Information	
BRENDA COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
2326 BRENDA ST				9901 LINN STATION ROAD	
ABILENE	TX 79605-1118			LOUISVILLE	KY 40223-3808
Phone (325) 676-1473		Fax (325) 676-1673		PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 01/01/2019	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 007354			Owner Information	
EAST LAKE				HILL RESOURCES INC	
3325 E LAKE RD				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		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 01/10/2018	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 007803			Owner Information	
HAWTHORNE HOUSE				DISABILITY RESOURCES INC	
526 HAWTHORNE ST				3602 N. CLACK ST.	
ABILENE	TX 79605			ABILENE TX 79601	
Phone (325) 695-1516	Fax (325) 677-6815			PHONE: (325) 669-3670	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: 10/30/2017	

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) 669-3670	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				14504 COMANS 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: 10/01/2017	

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

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) 669-3670	FAX: (325) 673-7829
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 11/04/2017	

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			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			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) 669-3670	FAX: (325) 673-7829
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 12/13/2018	

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	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			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	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 01/03/2019	

County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 007510			Owner Information	
RICHLAND				SOMA RESOURCES INC	
2010 RICHLAND ST				2449 S WILLIS	,STE 201
ABILENE	TX 79605			ABILENE	TX 79605
Phone (325) 673-1418	Fax (325) 695-2707			PHONE: (325) 695-7860	FAX: (325) 695-2707
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 06/01/2018	

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

County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 007254			Owner Information	
STEPPING STONES RESIDENTIAL RESOURCES				HILL RESOURCES II INC	
965 WASHINGTON BLVD				1071 N JUDGE ELY BLVD	# 6424
ABILENE	TX 79601			ABILENE	TX 79601
Phone (325) 673-3346	Fax (325) 794-0023			PHONE: (325) 673-3346	FAX: (325) 794-0023
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 12/01/2017	

County	TAYLOR	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 007578			Owner Information	
WOODRIDGE				SOMA RESOURCES INC	
3410 WOODRIDGE ST				2449 S WILLIS	,STE 201
ABILENE	TX 79605			ABILENE	TX 79605
Phone (325) 692-6800	Fax (325) 695-2707			PHONE: (325) 695-7860	FAX: (325) 695-2707
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 06/01/2018	

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				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				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				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE STATE SCHOOL/STATE CENTER
				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: 01/22/2018	

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: 12/01/2017	

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: 12/01/2017	

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: 01/07/2018	

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: 12/01/2017	

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: 12/01/2017	

County	TOM GREEN	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 003889			Owner Information	
MOSAIC				MOSAIC	
4801 BERMUDA				2245 MIDWAY RD. 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: 007338			Owner Information	
MOSAIC				MOSAIC	
4829 BERMUDA				2245 MIDWAY RD. 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: 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: 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 RD. 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: 01/01/2017	

County	TOM GREEN	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 003923			Owner Information	
MOSAIC				MOSAIC	
3221 SOUTHLAND				2245 MIDWAY RD. 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: 007339			Owner Information	
MOSAIC				MOSAIC	
3613 WILDEWOOD				2245 MIDWAY RD. 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: 003606			Owner Information	
MOSAIC				MOSAIC	
3217 CLEARVIEW				2245 MIDWAY RD. 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: 01/01/2017	

County	TOM GREEN	Reg Svcs:	ICF/IID	Region	09 - ABILENE
Facility Information:	Facility ID: 003916			Owner Information	
MOSAIC				MOSAIC	
165 EDINBURGH				2245 MIDWAY RD. 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: 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			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
PRIVATE Beds: 0	TITLE 18/19: 0			License Exp Dt: 01/22/2018	

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			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: 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) 394-2285
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) 394-2285
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: 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) 394-2285
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: 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) 394-2285
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: 11/01/2017	

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 (512) 339-6001			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: 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: 12/01/2017	

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) 394-2285
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: 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: 01/27/2018	

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) 394-2285
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: 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) 394-2285
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: 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: 12/01/2017	

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) 394-2285
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: 11/01/2017	

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: 01/27/2018	

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: 12/01/2017	

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		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 11/03/2017	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 003832			Owner Information	
MARY LEE FOUNDATION SOUTHPOINTE I I				MARY LEE FOUNDATION	
1336 LAMAR SQUARE DR				1339 LAMAR SQUARE DR	
AUSTIN	TX 78704			AUSTIN TX 78704	
Phone (512) 442-6077		Fax (512) 442-6825		PHONE: (512) 443-5777	FAX: (512) 443-5807
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 11/03/2017	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007242			Owner Information	
MARYWOOD				PREMIEANT INCORPORATED	
4700 GANYMEDE LN				1110 W WILLIAM CANNON ,BLDG 2	
AUSTIN	TX 78727			AUSTIN TX 78745	
Phone (512) 916-1632		Fax (512) 916-1639		PHONE: (512) 916-1632	FAX: (512) 916-1639
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 01/01/2018	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007627			Owner Information	
OAKTREE COMMUNITY RESIDENCE				D & S RESIDENTIAL SERVICES LP	
3509 CONVICT HILL RD				8911 N CAPITAL OF TX HWY ,BLDG 1 STE 1300	
AUSTIN	TX 78745			AUSTIN TX 78759	
Phone (512) 892-1084		Fax (512) 327-7181		PHONE: (512) 327-2325	FAX: (512) 327-5355
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 12/31/2017	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 003663			Owner Information	
PARKFIELD				PREMIEANT INCORPORATED	
9202 PARKFIELD DR				1110 W WILLIAM CANNON ,BLDG 2	
AUSTIN	TX 78758			AUSTIN TX 78745	
Phone (512) 916-1632		Fax (512) 916-1639		PHONE: (512) 916-1632	FAX: (512) 916-1639
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 01/01/2018	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 003661			Owner Information	
PENDLETON				PREMIEANT INCORPORATED	
1304 QUAIL PARK DR				1110 W WILLIAM CANNON ,BLDG 2	
AUSTIN	TX 78758			AUSTIN TX 78745	
Phone (512) 916-1632		Fax (512) 916-1639		PHONE: (512) 916-1632	FAX: (512) 916-1639
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 05/02/2019	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007545			Owner Information	
PILGRIMS PLACE				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
8204 PILGRIMS PL				9901 LINN STATION ROAD	
AUSTIN	TX 78759			LOUISVILLE	KY 40223
Phone (512) 918-2094	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2285
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: 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) 394-2285
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: 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) 394-2285
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: 11/01/2017	

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) 394-2285
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: 11/01/2017	

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		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 08/10/2017	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 003639			Owner Information	
TRAVIS HOUSE				PREMIEANT INCORPORATED	
9112 JAPONICA CT				1110 W WILLIAM CANNON ,BLDG 2	
AUSTIN	TX 78748			AUSTIN TX 78745	
Phone (512) 916-1632		Fax (512) 916-1639		PHONE: (512) 916-1632	FAX: (512) 916-1639
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 01/27/2018	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 003647			Owner Information	
WAGON CROSSING				PREMIEANT INCORPORATED	
1203 ECHO LN				1110 W WILLIAM CANNON ,BLDG 2	
AUSTIN	TX 78745			AUSTIN TX 78745	
Phone (512) 916-1632		Fax (512) 916-1639		PHONE: (512) 916-1632	FAX: (512) 916-1639
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 04/03/2017	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 102416			Owner Information	
WESTGATE				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
7906 APPOMATTOX DR				9901 LINN STATION ROAD	
AUSTIN	TX 78745			LOUISVILLE KY 40223	
Phone (512) 448-1194		Fax		PHONE: (502) 394-2100	FAX: (502) 394-2285
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: 11/01/2017	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007274			Owner Information	
WHISTLESTOP				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
7507 WHISTLESTOP				9901 LINN STATION ROAD	
AUSTIN	TX 78749			LOUISVILLE KY 40223	
Phone (512) 288-5060		Fax		PHONE: (502) 394-2100	FAX: (502) 394-2285
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: 11/01/2017	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 003974			Owner Information	
PFLUGERVILLE COMMUNITY HOME				EDUCARE COMMUNITY LIVING LIMITED PARTNERSHIP	
514 OAT MEADOW DRIVE				9901 LINN STATION ROAD	
PFLUGERVILLE	TX 78660-4347			LOUISVILLE KY 40223-3808	
Phone (512) 251-0427		Fax (713) 622-9141		PHONE: (502) 394-2100	FAX: (502) 394-2285
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 01/01/2019	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	TRAVIS	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007633			Owner Information	
WILDRIDGE				EDUCARE COMMUNITY LIVING CORPORATION - TEXAS	
904 VICTORIA RIDGE				9901 LINN STATION ROAD	
PFLUGERVILLE	TX 78660			LOUISVILLE	KY 40223
Phone (512) 251-4956	Fax			PHONE: (502) 394-2100	FAX: (502) 394-2285
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: 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: 12/01/2017	

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			
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	VAN ZANDT	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 003841			Owner Information	
CANTON GROUP HOME MILLCREEK FEMALES				ANDREWS CENTER	
1611 MILLCREEK				2323 W FRONT ST	
CANTON	TX 75103			TYLER	TX 75702
Phone (903) 567-4526	Fax			PHONE: (903) 567-1351	FAX: (903) 535-7384
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 8			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
				License Exp Dt:	

County	VAN ZANDT	Reg Svcs:	ICF/IID TEAM	Region	04 - TYLER
Facility Information:	Facility ID: 003772			Owner Information	
ELLIOTT DRIVE GROUP HOME				ANDREWS CENTER	
1738 ELLIOTT DR				2323 W FRONT ST	
CANTON	TX 75103			TYLER	TX 75702
Phone (903) 567-4541	Fax			PHONE: (903) 567-1351	FAX: (903) 535-7384
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 10			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
				License Exp Dt:	

County	VICTORIA	Reg Svcs:	TEAM ICF-IID	Region	08 - SAN ANTONIO
Facility Information:	Facility ID: 003938			Owner Information	
EDINBURGH HOME				UCG CENTRAL TEXAS HOLDINGS LLC	
306 EDINBURGH				750 RUSK	
VICTORIA	TX 77904			NEW BRAUNFELS	TX 78130
Phone (512) 578-2940	Fax			PHONE: (830) 372-2920	FAX: (214) 723-5331
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
				License Exp Dt: 03/01/2018	

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				750 RUSK	
VICTORIA	TX 77904			NEW BRAUNFELS	TX 78130
Phone (512) 578-1527	Fax			PHONE: (830) 372-2920	FAX: (214) 723-5331
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
				License Exp Dt: 03/01/2018	

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				750 RUSK	
VICTORIA	TX 77901			NEW BRAUNFELS	TX 78130
Phone (512) 575-1558	Fax			PHONE: (830) 372-2920	FAX: (214) 723-5331
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 03/01/2018	

County	WALKER	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 007504			Owner Information	
HUNTSVILLE HOUSE				TRI COUNTY MHMR SERVICES	
63 STATE HWY 75 N				PO BOX 3067	
HUNTSVILLE	TX 77340			CONROE	TX 77305
Phone (409) 760-2008	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	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	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 03/18/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WALLER	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 105802	Owner Information			
WILLOW RIVER FARMS - #4		THE CENTER SERVING PERSONS WITH MENTAL RETARDATION			
4073 FM 3318		3550 WEST DALLAS			
BROOKSHIRE	TX 77423	HOUSTON TX 77019			
Phone (713) 525-8300	Fax (979) 885-1007	PHONE: (713) 525-8400 FAX: (713) 525-8334			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 03/18/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WALLER	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 103355	Owner Information			
WILLOW RIVER FARMS (1B)		THE CENTER SERVING PERSONS WITH MENTAL RETARDATION			
4073 FM 3318 - 1B		3550 WEST DALLAS			
BROOKSHIRE	TX 77423	HOUSTON TX 77019			
Phone (713) 525-8300	Fax (979) 885-1007	PHONE: (713) 525-8400 FAX: (713) 525-8334			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 5	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 04/11/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WALLER	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 103354	Owner Information			
WILLOW RIVER FARMS (1A)		THE CENTER SERVING PERSONS WITH MENTAL RETARDATION			
4073 FM 3318 - 1A		3550 WEST DALLAS			
BROOKSHIRE	TX 77423	HOUSTON TX 77019			
Phone (979) 885-1007	Fax (979) 885-1007	PHONE: (713) 525-8400 FAX: (713) 525-8334			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 4	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 04/11/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WALLER	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 103357	Owner Information			
WILLOW RIVER FARMS (5A)		THE CENTER SERVING PERSONS WITH MENTAL RETARDATION			
4073 FM 3318 - 5A		3550 WEST DALLAS			
BROOKSHIRE	TX 77423	HOUSTON TX 77019			
Phone (713) 525-8300	Fax (979) 885-1007	PHONE: (713) 525-8400 FAX: (713) 525-8334			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 5	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 04/10/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WALLER	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 103356	Owner Information			
WILLOW RIVER FARMS (5B)		THE CENTER SERVING PERSONS WITH MENTAL RETARDATION			
4073 FM 3318 - 5B		3550 WEST DALLAS			
BROOKSHIRE	TX 77423	HOUSTON TX 77019			
Phone (713) 525-8300	Fax (979) 885-1007	PHONE: (713) 525-8400 FAX: (713) 525-8334			
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 5	PROGRAM TYPE: ICF/IID SERVICE TYPE PRIVATELY OWNED		
Cert Alzh Capacity: 0	TITLE19: 0	License Exp Dt: 04/10/2018			
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WALLER	Reg Svcs:	UNIT 21 (ICF/MR)	Region	06 - HOUSTON
Facility Information:	Facility ID: 101330			Owner Information	
WILLOW RIVER FARMS 10				THE CENTER SERVING PERSONS WITH MENTAL RETARDATION	
4073 FM 3318				3550 WEST DALLAS	
BROOKSHIRE	TX 77423			HOUSTON TX 77019	
Phone (713) 525-8300	Fax (979) 885-1007			PHONE: (713) 525-8400	FAX: (713) 525-8334
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 03/11/2019	

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

County	WASHINGTON	Reg Svcs:	UNIT 21 (ICF/MR)	Region	07 - AUSTIN
Facility Information:	Facility ID: 007110			Owner Information	
BRENHAM STATE SUPPORTED LIVING CENTER				DADS	
HIGHWAY 36 SOUTH				PO BOX 12668	
BRENHAM	TX 77833			AUSTIN TX 78711	
Phone (979) 836-4511	Fax (979) 277-1865			PHONE: (512) 454-3761	FAX:
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 520			
Cert Alzh Capacity: 0	TITLE19: 0				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE STATE SCHOOL/STATE CENTER
				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				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 12/01/2017	

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				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				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				
PRIVATE Beds: 0	TITLE 18/19: 0			PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
				License Exp Dt: 12/01/2017	

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		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 12/01/2017	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WICHITA	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 007361			Owner Information	
CUMBERLAND COURT				HIGH PLAINS HEALTH PROVIDERS INC	
2114 8TH ST				1505 P B LN	
WICHITA FALLS	TX 76301			WICHITA FALLS	TX 76302
Phone (940) 322-2948		Fax		PHONE: (940) 766-6751	FAX: (940) 766-6753
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 04/01/2018	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WICHITA	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 007556			Owner Information	
HAMLIN HOUSE				HIGH PLAINS HEALTH PROVIDERS INC	
1509 P B LN				1505 P B LN	
WICHITA FALLS	TX 76302			WICHITA FALLS	TX 76302
Phone (940) 322-8104		Fax (940) 766-6753		PHONE: (940) 766-6751	FAX: (940) 766-6753
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 08/17/2018	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WICHITA	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 003827			Owner Information	
HORIZON HOUSE				HELEN FARABEE CENTER	
1604 ARLINGTON ST				PO BOX 8266	
WICHITA FALLS	TX 76302			WICHITA FALLS	TX 76307
Phone (940) 723-8048		Fax (940) 723-8048		PHONE: (940) 397-3101	FAX: (940) 397-3150
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt:	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WICHITA	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 007360			Owner Information	
MIRAMAR				HIGH PLAINS HEALTH PROVIDERS INC	
2911 AVE L				1505 P B LN	
WICHITA FALLS	TX 76309			WICHITA FALLS	TX 76302
Phone (940) 767-4548		Fax (940) 766-6753		PHONE: (940) 766-6751	FAX: (940) 766-6753
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 04/01/2018	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WICHITA	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 003853			Owner Information	
NORRIS PLACE				HELEN FARABEE CENTER	
1555 NORRIS ST				PO BOX 8266	
WICHITA FALLS	TX 76302			WICHITA FALLS	TX 76307
Phone (940) 397-3362		Fax (940) 397-3388		PHONE: (940) 397-3101	FAX: (940) 397-3150
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6		PROGRAM TYPE: ICF/IID	SERVICE TYPE GOVERNMENT BASED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt:	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WICHITA	Reg Svcs:	ICF/IID	Region	02 - ABILENE
Facility Information:	Facility ID: 003759			Owner Information	
OUACHITA FLATS				D & S RESIDENTIAL SERVICES LP	
6086 KOVARIK RD				8911 N CAPITAL OF TX HWY	,BLDG 1 STE 1300
WICHITA FALLS	TX 76310-1513			AUSTIN TX	78759
Phone (940) 723-5410	Fax (940) 723-5564			PHONE: (512) 327-2325	FAX: (512) 327-5355
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13			
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	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: 12/01/2017	

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: 12/01/2017	

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	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0		License Exp Dt: 12/01/2017		
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WILLIAMSON	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 003644	Owner Information			
RIVIERA COMMUNITY RESIDENCE		D & S RESIDENTIAL SERVICES LP			
2401 DIJON DR		8911 N CAPITAL OF TX HWY		,BLDG 1 STE 1300	
CEDAR PARK	TX 78613	AUSTIN TX		78759	
Phone (512) 335-3966	Fax (512) 327-5355	PHONE: (512) 327-2325	FAX: (512) 327-5355		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0		License Exp Dt: 12/01/2017		
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WILLIAMSON	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 103555	Owner Information			
BARNABAS HOUSE AT DOWN HOME RANCH		DOWN HOME RANCH INC			
20250 FM 619		20250 FM 619			
ELGIN	TX 78621	ELGIN TX		78621	
Phone (512) 856-0128	Fax (512) 856-0256	PHONE: (512) 856-0128	FAX: (512) 856-0256		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0		License Exp Dt: 12/18/2018		
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WILLIAMSON	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 104838	Owner Information			
ISAIAH HOUSE AT DOWN HOME RANCH		DOWN HOME RANCH INC			
20250 FM 619		20250 FM 619			
ELGIN	TX 78621	ELGIN TX		78621	
Phone (512) 856-0128	Fax (512) 856-0256	PHONE: (512) 856-0128	FAX: (512) 856-0256		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0		License Exp Dt: 08/22/2017		
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WILLIAMSON	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 103554	Owner Information			
MARTHA HOUSE AT DOWN HOME RANCH		DOWN HOME RANCH INC			
20250 FM 619		20250 FM 619			
ELGIN	TX 78621	ELGIN TX		78621	
Phone (512) 856-0128	Fax (512) 856-0256	PHONE: (512) 856-0128	FAX: (512) 856-0256		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0		License Exp Dt: 12/17/2018		
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WILLIAMSON	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 103553	Owner Information			
TERESA HOUSE AT DOWN HOME RANCH		DOWN HOME RANCH INC			
20250 FM 619		20250 FM 619			
ELGIN	TX 78621	ELGIN TX		78621	
Phone (512) 856-0128	Fax (512) 856-0256	PHONE: (512) 856-0128	FAX: (512) 856-0256		
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 6	PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED	
Cert Alzh Capacity: 0	TITLE19: 0		License Exp Dt: 11/05/2018		
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WILLIAMSON	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 003784			Owner Information	
ROCK HOUSE OF GEORGETOWN 1				ROCK HOUSE SUPPORT SERVICES INC	
4142 WILLIAMS DR				2252 LINGLEVILLE ROAD HWY 8	
GEORGETOWN	TX 78628			STEPHENVILLE TX	76401
Phone (512) 869-4661		Fax (512) 869-2176		PHONE: (254) 968-4004	FAX: (254) 965-8653
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 10/01/2018	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WILLIAMSON	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 003813			Owner Information	
ROCK HOUSE OF GEORGETOWN 2				ROCK HOUSE SUPPORT SERVICES INC	
4146 WILLIAMS DR				2252 LINGLEVILLE ROAD HWY 8	
GEORGETOWN	TX 78628			STEPHENVILLE TX	76401
Phone (512) 869-4662		Fax (512) 869-2176		PHONE: (254) 968-4004	FAX: (254) 965-8653
TOTAL Lic Capacity: 0	TITLE 18: 0	ICF/IID: 13		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 10/01/2018	
PRIVATE Beds: 0	TITLE 18/19: 0				

County	WILLIAMSON	Reg Svcs:	ICF-IID (AUSTIN REGION)	Region	07 - AUSTIN
Facility Information:	Facility ID: 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			License Exp Dt: 03/01/2019	
PRIVATE Beds: 0	TITLE 18/19: 0				

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			License Exp Dt: 03/15/2018	
PRIVATE Beds: 0	TITLE 18/19: 0				

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

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		PROGRAM TYPE: ICF/IID	SERVICE TYPE PRIVATELY OWNED
Cert Alzh Capacity: 0	TITLE19: 0			License Exp Dt: 10/19/2017	
PRIVATE Beds: 0	TITLE 18/19: 0				

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	