Texas Department of Aging and Disability Services

Assisted Living Facility Directory

Sorted by: County, City, Facility Name

County **ANDERSON** Reg Svcs: NACOGDOCHES GERIATRIC Region 04 - TYLER

Facility Information: **Facility ID:** 000821

BROOKDALE PALESTINE
101 TRINITY CT
PALESTINE **TX** 75801

Phone (903) 729-1900 **Fax** (903) 729-7093

TOTAL Lic Capacity: 50 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 50 **TITLE 18/19:** 0

Owner Information

BROOKDALE SENIOR LIVING COMMUNITIES INC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214

PHONE: (414) 918-5441 **FAX:** (414) 918-6076

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/01/2017

County **ANDERSON** Reg Svcs: NACOGDOCHES GERIATRIC Region 04 - TYLER

Facility Information: **Facility ID:** 102438

DOGWOOD TRAILS ASSISTED LIVING COMMUNITY
1625 SPRING ST
PALESTINE **TX** 75803

Phone (903) 723-0040 **Fax** (903) 723-0038

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 15 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

CSL S PALESTINE LLC
14160 DALLAS PRWY ,STE 300
DALLAS TX 75254

PHONE: (972) 308-8366 **FAX:** (972) 387-8216

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/10/2016

County **ANDERSON** Reg Svcs: NACOGDOCHES GERIATRIC Region 04 - TYLER

Facility Information: **Facility ID:** 106259

WINDERMERE AT CARTMELL
30 VARIAH ST
PALESTINE **TX** 75801

Phone (903) 727-8500 **Fax** (903) 727-8501

TOTAL Lic Capacity: 56 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 56 **TITLE 18/19:** 0

Owner Information

CARTMELL HOME FOR AGED INC
2212 W REAGAN ST
PALESTINE TX 75801

PHONE: (903) 727-8500 **FAX:** (903) 727-8501

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/02/2017

County **ANGELINA** Reg Svcs: NACOGDOCHES GERIATRIC Region 05 - BEAUMONT

Facility Information: **Facility ID:** 000481

NECHES HOUSE
406 GOBBLERS KNOB RD
LUFKIN **TX** 75901

Phone (409) 639-9727 **Fax** (936) 639-9754

TOTAL Lic Capacity: 48 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 48 **TITLE 18/19:** 0

Owner Information

VERITAS INCARE, LLC
6933 CRUMPLER BLVD ,STE A
OLIVE BRANCH MS 38654

PHONE: (662) 895-1801 **FAX:** (662) 895-1804

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/05/2017

County **ANGELINA** Reg Svcs: NACOGDOCHES GERIATRIC Region 05 - BEAUMONT

Facility Information: **Facility ID:** 000424

PINECREST RETIREMENT COMMUNITY ASSISTED LIVING UNIT
1302 TOM TEMPLE DR
LUFKIN **TX** 75904

Phone (936) 634-1054 **Fax** (936) 634-1056

TOTAL Lic Capacity: 78 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 40 **TITLE19:** 0
PRIVATE Beds: 78 **TITLE 18/19:** 0

Owner Information

MRC PINECREST
1440 LAKE FRONT CIRCLE ,STE 110
THE WOODLANDS TX 77380

PHONE: (281) 363-2600 **FAX:** (281) 292-6360

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/26/2017

County **ARANSAS** Reg Svcs: CORPUS CHRISTI 11 Region 11 - CORPUS CHRISTI

Facility Information: **Facility ID:** 000715

GULF POINTE VILLAGE
900 ENTERPRISE
ROCKPORT **TX** 78382

Phone (361) 729-5254 **Fax** (361) 729-3820

TOTAL Lic Capacity: 40 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 40 **TITLE 18/19:** 0

Owner Information

MERIDIAN ROCKPORT ALF OE, LP
3811 TURTLE CREEK BLVD ,STE 1050
DALLAS TX 75219

PHONE: (214) 651-4000 **FAX:** (214) 651-4001

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/01/2017

County **ARMSTRONG** Reg Svcs: HIGH PLAINS GERI 1 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 030075

HUDSON HOUSE CLAUDE, INC
301 TRICE ST
CLAUDE **TX** 79019
Phone (806) 226-4011 **Fax** (806) 226-7037

TOTAL Lic Capacity: 20 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 20 **TITLE 18/19:** 0

Owner Information

HUDSON HOUSE CLAUDE, INC
301 TRICE STREET
CLAUDE TX 79019
PHONE: (806) 226-4011 **FAX:** (806) 226-7037
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/01/2018

County **ATASCOSA** Reg Svcs: TEAM V Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 102169

ARGENT COURT ATASCOSA COUNTY
1951 HWY 97 E
JOURDANTON **TX** 78026
Phone (830) 769-9797 **Fax**

TOTAL Lic Capacity: 57 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 57 **TITLE 18/19:** 0

Owner Information

ARGENT PLEASANTON OPERATIONS LLC
8301 BROADWAY ,STE 319
SAN ANTONIO TX 78209
PHONE: (210) 829-7121 **FAX:** (210) 372-4477
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/13/2018

County **ATASCOSA** Reg Svcs: TEAM V Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 100688

MICHELLE'S CARE HOME
1310 POPLAR ST
JOURDANTON **TX** 78026
Phone (830) 767-3082 **Fax** (830) 767-3082

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

JM MCCLELLAN PROPERTIES, LLC
25628 SANTOLINA
SAN ANTONIO TX 78261
PHONE: (361) 658-6986 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/30/2017

County **ATASCOSA** Reg Svcs: TEAM X Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 000519

OAK CREEK PERSONAL CARE HOME
299 OAK CREEK ESTATES ROAD
POTEET **TX** 78065
Phone (830) 276-4248 **Fax**

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

ELOY DUNCAN
PO BOX 1479
POTEET TX 78065
PHONE: (830) 276-4248 **FAX:** (830) 276-4248
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/09/2016

County **AUSTIN** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102574

ARBORS OF BRIARWOOD
1517 W MAIN
BELLVILLE **TX** 77418
Phone (979) 865-3969 **Fax** (979) 865-9963

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

LTC OF AUSTIN COUNTY III LLC
1515 W MAIN
BELLVILLE TX 77418
PHONE: (832) 651-3694 **FAX:** (866) 224-5909
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/01/2017

County **AUSTIN** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030012

ROSE HILL RETIREMENT HOME
318 S MASONIC
BELLVILLE **TX** 77418-2516
Phone (979) 865-3883 **Fax** (281) 277-4663

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

RH RETIREMENT HOMES, LLC
3603 ALCORN BEND DR
SUGAR LAND TX 77479
PHONE: (713) 725-4913 **FAX:** (281) 277-4663
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 06/01/2017

County **AUSTIN** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105127

OAK HAVEN ASSISTED LIVING
16416 FORDTRAN BLVD
INDUSTRY **TX** 78944
Phone (979) 357-2535 **Fax** (979) 357-2534

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

OAK HAVEN ASSISTED LIVING LLC
16416 FORDTRAN BLVD
INDUSTRY TX 78944
PHONE: (979) 357-2535 **FAX:** (979) 357-2534
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/18/2017

County **AUSTIN** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105925

VERANDA HOUSE SENIOR LIVING- SEALY
526 FIFTH STREET
SEALY **TX** 77474
Phone (979) 627-7225 **Fax** (281) 310-8689

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

SENIOR HOUSING CENTERS INC
526 FIFTH ST
SEALY TX 77474
PHONE: (281) 804-6422 **FAX:** (281) 392-6659
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/25/2018

County **BASTROP** Reg Svcs: BRENHAM Region 07 - AUSTIN

Facility Information: **Facility ID:** 100336

ARGENT COURT
508 OLD AUSTIN HWY
BASTROP **TX** 78602
Phone (512) 321-9500 **Fax** (512) 321-9508

TOTAL Lic Capacity: 68 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 68 **TITLE 18/19:** 0

Owner Information

ARGENT BASTROP OPERATIONS, LLC
8301 BROADWAY ,STE 319
SAN ANTONIO TX 78209
PHONE: (210) 829-7121 **FAX:** (210) 829-0859
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/01/2017

County **BASTROP** Reg Svcs: BRENHAM Region 07 - AUSTIN

Facility Information: **Facility ID:** 102974

A RAINBOW RIDGE
111 HOGEYE RD
ELGIN **TX** 78621
Phone (512) 278-0674 **Fax** (512) 278-0674

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

Owner Information

CAROLYN J HARSH
1290 UPPER ELGIN RIVER RD
ELGIN TX 78621
PHONE: (512) 789-0543 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/08/2017

County **BASTROP** Reg Svcs: BRENHAM Region 07 - AUSTIN

Facility Information: **Facility ID:** 100088

SILVER CREEK ASSISTED LIVING ELGIN
826 LEXINGTON RD
ELGIN **TX** 78621
Phone (512) 215-3624 **Fax** (512) 281-0217

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

OAKHURST MANOR PERSONAL CARE HOME INC
826 LEXINGTON RD
ELGIN TX 78621
PHONE: (512) 215-3624 **FAX:** (512) 285-3673
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/05/2017

County **BAYLOR** Reg Svcs: WICHITA FALLS GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 001266

JUST LIKE HOME
1137 W CALIFORNIA
SEYMOUR **TX** 76380
Phone (940) 889-3551 **Fax** (940) 889-3551

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

STORMIE CARRINGTON
101 HILL DR
SEYMOUR TX 76380
PHONE: (940) 631-8509 **FAX:** (940) 889-2715
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/15/2017

County **BEE** Reg Svcs: CORPUS CHRISTI 11 Region 11 - CORPUS CHRISTI

Facility Information: **Facility ID:** 101015

801 GRAMMAN LLC
801 E GRAMMAN
BEEVILLE **TX** 78102
Phone (361) 358-4900 **Fax** (361) 358-4909

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

801 GRAMMAN LLC
801 E GRAMMAN
BEEVILLE TX 78102
PHONE: (361) 358-4900 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/02/2018

County **BELL** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 105668

LUVIDA MEMORY CARE
2400 PIAZZA DRIVE
BELTON **TX** 76513
Phone (254) 613-4119 **Fax** (888) 389-4702

TOTAL Lic Capacity: 48 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 48 **TITLE19:** 0
PRIVATE Beds: 48 **TITLE 18/19:** 0

Owner Information

MEMORY CARE MANAGEMENT, LC
304 E. CHURCH AVENUE
KILLEEN TX 76541
PHONE: (254) 519-5801 **FAX:** (254) 519-5826
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/26/2018

County **BELL** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 104460

STONEY BROOK OF BELTON
500 RIVER FAIR BLVD
BELTON **TX** 76513
Phone (254) 933-3800 **Fax**

TOTAL Lic Capacity: 57 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 40 **TITLE19:** 0
PRIVATE Beds: 57 **TITLE 18/19:** 0

Owner Information

BELTON A.L. LLC
613 N W LP 410 ,STE 510
SAN ANTONIO TX 78216
PHONE: (512) 695-5489 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/09/2016

County **BELL** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 104420

STONEY BROOK OF BELTON
500 RIVER FAIR BLVD
BELTON **TX** 76513
Phone (254) 933-3800 **Fax**

TOTAL Lic Capacity: 56 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 56 **TITLE 18/19:** 0

Owner Information

BELTON A.L. LLC
613 N W LP 410 ,STE 510
SAN ANTONIO TX 78216
PHONE: (512) 695-5489 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/09/2016

County **BELL** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 030300

THE ROSEWOOD RETIREMENT COMMUNITY
5700 E CENTRAL TEXAS EXPY
KILLEEN **TX** 76543
Phone (254) 680-5020 **Fax** (254) 690-3238

TOTAL Lic Capacity: 85 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 85 **TITLE 18/19:** 0

Owner Information

PM MANAGEMENT - KILLEEN I NC LLC
600 NORTH PEARL ST ,STE 1100
DALLAS TX 75201
PHONE: (214) 252-7703 **FAX:** (214) 252-7599
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/01/2017

County **BELL** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 103463

ARBOR HOUSE OF TEMPLE
4257 LOWES DR
TEMPLE **TX** 76502
Phone (254) 773-3081 **Fax**

TOTAL Lic Capacity: 52 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 52 **TITLE19:** 0
PRIVATE Beds: 52 **TITLE 18/19:** 0

Owner Information

TEMPLE TX ARBOR HOUSE LP
4257 LOWES DRIVE
TEMPLE TX 76502
PHONE: (405) 801-2879 **FAX:** (405) 360-3301
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/30/2016

County **BELL** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 000302

BROOKDALE WESTERN HILLS
3902 W ADAMS AVE
TEMPLE **TX** 76504
Phone (254) 791-8000 **Fax** (254) 791-8003

TOTAL Lic Capacity: 54 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 54 **TITLE 18/19:** 0

Owner Information

BROOKDALE SENIOR LIVING COMMUNITIES INC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214
PHONE: (414) 918-5441 **FAX:** (414) 918-6076
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/01/2016

County **BELL** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 000365

ELMCROFT OF COTTONWOOD
3002 JACK RABBIT RD
TEMPLE **TX** 76502
Phone (254) 778-2222 **Fax** (254) 778-2845

TOTAL Lic Capacity: 74 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 74 **TITLE 18/19:** 0

Owner Information

COTTONWOOD OPERATIONS LLC
700 N HURSTBOURNE PKWY ,STE 200
LOUISVILLE KY 40222
PHONE: (502) 753-6004 **FAX:** (502) 753-6104
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/03/2017

County **BELL** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 030135

GARDEN ESTATES OF TEMPLE ASSISTED LIVING COMMUNITY
5320 LOOP 205
TEMPLE **TX** 76502
Phone (254) 770-1017 **Fax** (254) 770-1101

TOTAL Lic Capacity: 156 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 156 **TITLE 18/19:** 0

Owner Information

LSREF GOLDEN OPS 26 (TX) LLC
3500 LENOX ROAD NE ,STE 510
ATLANTA GA 30326
PHONE: (770) 754-9660 **FAX:** (770) 754-3085
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/15/2017

County **BELL** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 103040

SODALIS ELDER LIVING TEMPLE I
2728 COTTONWOOD LN
TEMPLE **TX** 76502
Phone (254) 771-9911 **Fax** (254) 771-2928

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

ALZCARE I LTD
195 S ACADEMY
NEW BRAUNFELS TX 78130
PHONE: (830) 624-1044 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/14/2017

County **BELL** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 103473

SODALIS ELDER LIVING TEMPLE II
2728 COTTONWOOD LN BLDG B
TEMPLE **TX** 76502
Phone (254) 771-9911 **Fax** (254) 771-2928

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

ALZCARE I LTD
195 S ACADEMY
NEW BRAUNFELS TX 78130
PHONE: (830) 624-1044 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/16/2017

County **BELL** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 000973

WILDFLOWER PLACE
706 RED COAT DR
TEMPLE **TX** 76504
Phone (254) 742-1581 **Fax** (254) 742-0425

TOTAL Lic Capacity: 47 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 47 **TITLE 18/19:** 0

Owner Information

WILDFLOWER AID OPCO LLC
330 N WABASH ,STE 3700
CHICAGO IL 60611
PHONE: (312) 725-7000 **FAX:** (312) 332-5300
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/11/2017

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

Facility Information: **Facility ID:** 000641

RIOJAS ASSISTED LIVING HOME
14212 GREENWOOD RD
ATASCOSA **TX** 78002

Phone (830) 709-3541 **Fax** (830) 709-3541

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

EDDIE RIOJAS
14212 GREENWOOD RD
ATASCOSA TX 78002

PHONE: (830) 709-4196 **FAX:** (830) 709-3541

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/12/2017

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

Facility Information: **Facility ID:** 030056

TINSLEY HOME CARE
17425 LUCKEY RD
ATASCOSA **TX** 78002

Phone (210) 622-9033 **Fax** (210) 622-0208

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

CONSUELO V SALINAS
17425 LUCKEY RD
ATASCOSA TX 78002

PHONE: (210) 885-9011 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/13/2017

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

Facility Information: **Facility ID:** 105203

NEURORESTORATIVE SAN ANTONIO
124 SOUTH WINSTON LANE
CASTLE HILLS **TX** 78213

Phone (210) 979-0830 **Fax** (210) 979-0842

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

Owner Information

MENTOR ABI, LLC
313 CONGRESS ST ,5TH FLR
BOSTON MA 02210

PHONE: (617) 790-4800 **FAX:** (617) 790-4271

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/01/2018

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

Facility Information: **Facility ID:** 030364

ESPLANADE GARDENS SENIOR INC
10790 TOEPPERWEIN
CONVERSE **TX** 78109

Phone (210) 566-7600 **Fax** (210) 566-7605

TOTAL Lic Capacity: 120 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 60 **TITLE19:** 0
PRIVATE Beds: 120 **TITLE 18/19:** 0

Owner Information

ESPLANADE GARDENS SENIOR INC
10790 TOPPERWEIN RD
CONVERSE TX 78109

PHONE: (210) 566-7600 **FAX:** (210) 566-7605

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/17/2017

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

Facility Information: **Facility ID:** 103742

ISAIAH'S HOUSE
7118 CLIPPER RIDGE
CONVERSE **TX** 78109

Phone (210) 391-9537 **Fax** (210) 590-1646

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

ISAIAH HOME CARE INC
7118 CLIPPER RIDGE
CONVERSE TX 78109

PHONE: (210) 391-9537 **FAX:** (210) 590-1646

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/12/2017

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

Facility Information: **Facility ID:** 105159

MIRAMAR HOME CARE
8662 GAVEL DRIVE
CONVERSE **TX** 78109

Phone (210) 957-4769 **Fax** (210) 932-8250

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

Owner Information

LAURA DORCA
8622 GAVEL DRIVE
CONVERSE TX 78109

PHONE: (210) 957-4769 **FAX:** (210) 932-8250

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/30/2016

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

Facility Information: **Facility ID:** 105882

HONEY'S HOUSE OF HELOTES
10410 PARRIGIN RD
HELOTES **TX** 78023
Phone (210) 540-8288 **Fax**

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

RESIDENTIAL CARE HOMES OF AMERICA LLC
10410 PARRIGIN RD
HELOTES TX 78023
PHONE: (210) 540-8288 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/07/2016

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

Facility Information: **Facility ID:** 030200

BROOKDALE HOLLYWOOD PARK
16911 SAN PEDRO
HOLLYWOOD PARK **TX** 78232
Phone (210) 495-9340 **Fax** (210) 495-3570

TOTAL Lic Capacity: 101 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 28 **TITLE19:** 0
PRIVATE Beds: 101 **TITLE 18/19:** 0

Owner Information

ESC-NGH, LP
111 WESTWOOD PL ,STE 400
BRENTWOOD TN 37027
PHONE: (206) 298-2909 **FAX:** (206) 301-4500
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/01/2016

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

Facility Information: **Facility ID:** 103436

TEXAS COMFORT CARE HOME
6206 SETTING SUN ST
LEON VALLEY **TX** 78238
Phone (210) 520-4747 **Fax** (210) 888-2224

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

Owner Information

TEXAS COMFORT LLC
6206 SETTING SUN
LEON VALLEY TX 78238
PHONE: (210) 823-9676 **FAX:** (210) 888-2224
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/20/2017

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

Facility Information: **Facility ID:** 103167

COUNTRY LIFE
16680 FM 2790 S
LYTLE **TX** 78052
Phone (830) 709-0163 **Fax** (888) 398-5945

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

CRS HEALTHCARE, LLC
16680 W FM 27905
LYTLE TX 78052
PHONE: (830) 569-7510 **FAX:** (888) 398-5945
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/21/2016

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

Facility Information: **Facility ID:** 106299

GOLDEN YEARS ASSISTED LIVING
16860 W. FM 2790 S
LYTLE **TX** 78052
Phone (830) 772-5888 **Fax** (830) 772-5888

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

GOLDEN YEARS ASSISTED LIVING
16860 W FM 2790 S
LYTLE TX 78052
PHONE: (830) 772-5888 **FAX:** (830) 772-5888
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/21/2018

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

Facility Information: **Facility ID:** 106325

A GOLDEN AGE ASSISTED LIVING, LLC
1635 HILLCREST DR
SAN ANTONIO **TX** 78228
Phone (210) 432-2128 **Fax** (210) 432-2128

TOTAL Lic Capacity: 11 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 11 **TITLE 18/19:** 0

Owner Information

A GOLDEN AGE ASSISTED LIVING, LLC
1635 HILLCREST DR
SAN ANTONIO TX 78228
PHONE: (210) 430-6392 **FAX:** (210) 503-5418
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/22/2017

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

Facility Information: **Facility ID:** 100902

AGAPE HOUSE II
3443 WILLOWWOOD ST
SAN ANTONIO **TX** 78219
Phone (210) 253-9081 **Fax**

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

JUNE SORRELL
2551 GROVE PARK
SCHERTZ TX 78154
PHONE: (210) 862-5221 **FAX:** (210) 475-3307
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/18/2016

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

Facility Information: **Facility ID:** 000881

AMAZING PEACE HOME CARE LLC
1202 DONALDSON AVE
SAN ANTONIO **TX** 78228
Phone (210) 736-2305 **Fax** (210) 736-0226

TOTAL Lic Capacity: 24 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 24 **TITLE 18/19:** 0

Owner Information

AMAZING PEACE HOME CARE LLC
2327 FOX MEADOW
SAN ANTONIO TX 78251
PHONE: (210) 858-9585 **FAX:** (210) 736-0226
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/15/2017

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

Facility Information: **Facility ID:** 100310

ANGEL PLACE ASSISTED LIVING HOMES INC #1
3907 SHERRIL BROOK DR
SAN ANTONIO **TX** 78228
Phone (210) 435-8234 **Fax** (210) 401-1819

TOTAL Lic Capacity: 15 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 15 **TITLE 18/19:** 0

Owner Information

ANGEL PLACE ASSISTED LIVING HOMES INC
173 W LIGUSTRUM DR
SAN ANTONIO TX 78228
PHONE: (210) 618-6436 **FAX:** (210) 568-4413
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/27/2017

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

Facility Information: **Facility ID:** 000660

ANGEL PLACE ASSISTED LIVING HOMES INC #2
3911 SHERRIL BROOK DR
SAN ANTONIO **TX** 78228
Phone (210) 435-8234 **Fax** (210) 401-1819

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

Owner Information

ANGEL PLACE ASSISTED LIVING HOMES INC
173 W LIGUSTRUM DR
SAN ANTONIO TX 78228
PHONE: (210) 618-6436 **FAX:** (210) 568-4413
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/27/2017

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

Facility Information: **Facility ID:** 100213

ARDEN COURTS OF SAN ANTONIO
15290 HUEBNER RD
SAN ANTONIO **TX** 78231
Phone (210) 408-9100 **Fax** (210) 408-9101

TOTAL Lic Capacity: 64 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 64 **TITLE19:** 0
PRIVATE Beds: 64 **TITLE 18/19:** 0

Owner Information

ARDEN COURTS OF SAN ANTONIO TX LLC
333 NORTH SUMMIT ST
TOLEDO OH 43604
PHONE: (419) 252-5500 **FAX:** (877) 385-9446
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/07/2017

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

Facility Information: **Facility ID:** 105837

ARDEN PARK ASSISTED LIVING, LLC
7023 WEST HAUSMAN RD
SAN ANTONIO **TX** 78249
Phone (210) 723-6602 **Fax** (210) 877-5386

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

ARDEN PARK ASSISTED LIVING, LLC
7023 WEST HAUSMAN RD
SAN ANTONIO TX 78255
PHONE: (210) 663-3887 **FAX:** (210) 877-5386
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/25/2018

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

Facility Information: **Facility ID:** 104902

ARNOLD HOUSE AT BLUE SKIES OF TEXAS EAST
4917 RAVENSWOOD DRIVE
SAN ANTONIO **TX** 78227
Phone (210) 568-5061 **Fax** (210) 568-5155

TOTAL Lic Capacity: 24 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 24 **TITLE 18/19:** 0

Owner Information

BST HEALTH SERVICES CORP
12455 FREEDOM WAY
SAN ANTONIO TX 78245
PHONE: (210) 838-6332 **FAX:** (210) 838-6315

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/01/2016

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

Facility Information: **Facility ID:** 102947

AUTISM TREATMENT CENTER INC
16511 HUNTING VALLEY
SAN ANTONIO **TX** 78247
Phone (210) 590-2107 **Fax** (210) 590-3143

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

AUTISTIC TREATMENT CENTER INC
16111 NACOGDOCHES
SAN ANTONIO TX 78247
PHONE: (210) 590-2107 **FAX:** (210) 590-3143

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/18/2016

County **BEXAR** Reg Svcs: UNASSIGNED Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 106309

AUTISTIC TREATMENT CENTER
16330 MARTINS FERRY
SAN ANTONIO **TX** 78247
Phone (210) 590-2107 **Fax** (210) 590-3143

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

AUTISTIC TREATMENT CENTER INC
16111 NACOGDOCHES
SAN ANTONIO TX 78247
PHONE: (210) 590-2107 **FAX:** (210) 590-3143

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/15/2017

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

Facility Information: **Facility ID:** 105328

AUTUMN GROVE - BLANCO
1418 WALKERS WAY
SAN ANTONIO **TX** 78216
Phone (210) 493-1181 **Fax** (210) 493-1185

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

GLEN HOPE HARBOR INC
101 FIREBIRD COVE
LAKEWAY TX 78734
PHONE: (469) 371-0445 **FAX:** (512) 761-3548

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/26/2017

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

Facility Information: **Facility ID:** 105829

AUTUMN LEAVES OF STONE OAK
20272 STONE OAK PARKWAY
SAN ANTONIO **TX**
Phone (210) 497-5200 **Fax** (210) 497-5502

TOTAL Lic Capacity: 50 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 50 **TITLE19:** 0
PRIVATE Beds: 50 **TITLE 18/19:** 0

Owner Information

STONE OAK MEMORY CARE LLC
20272 STONE OAK PARKWAY
SAN ANTONIO TX 78258
PHONE: **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/18/2016

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

Facility Information: **Facility ID:** 030361

AUTUMN LEAVES RESIDENTIAL HOME
6411 RIDGE PLACE
SAN ANTONIO **TX** 78250
Phone (210) 681-1343 **Fax** (210) 681-2901

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

WILMA J LA CROIX
6411 RIDGE PLACE
SAN ANTONIO TX 78250
PHONE: (210) 681-1343 **FAX:** (210) 681-2901

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/06/2016

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

Facility Information: **Facility ID:** 106414

AUTUMN LEAVS OF WESTOVER HILLS
10107 W MILITARY DR
SAN ANTONIO **TX** 78251

Phone (210) 608-9302 **Fax**

TOTAL Lic Capacity: 54 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 54 **TITLE19:** 0
PRIVATE Beds: 54 **TITLE 18/19:** 0

Owner Information

WESTOVER HILLS MEMORY CARE, LLC
545 E JOHN CARPENTER FRWY ,STE 500
IRVING TX 75062

PHONE: (214) 845-4000 **FAX:** (214) 845-4501

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/26/2018

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

Facility Information: **Facility ID:** 105770

AUTUMNGROVE COTTAGE (STONE OAK)
20718 STONE OAK PKWY
SAN ANTONIO **TX** 78258

Phone (210) 497-8645 **Fax** (210) 497-8614

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

GLEN HOPE HARBOR INC
101 FIREBIRD COVE
LAKEWAY TX 78734

PHONE: (469) 371-0445 **FAX:** (512) 761-3548

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/26/2017

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

Facility Information: **Facility ID:** 106230

BADER HOUSE
3411 PAESANO'S PARKWAY
SAN ANTONIO **TX** 78231

Phone (210) 408-1002 **Fax**

TOTAL Lic Capacity: 24 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 24 **TITLE19:** 0
PRIVATE Beds: 24 **TITLE 18/19:** 0

Owner Information

BADER HOUSE OF SHAVANO PARK I, LTD.
11503 NW MILITARY ,SUITE 330
SAN ANTONIO TX 78231

PHONE: (210) 332-8676 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/02/2017

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

Facility Information: **Facility ID:** 104432

BLOSSOM CARE ASSISTED LIVING
24803 BROAD OAK TRAIL
SAN ANTONIO **TX** 78255

Phone (210) 267-9106 **Fax** (210) 272-0800

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

ELIZABETH DAVIS
24803 BROAD OAK TRL
SAN ANTONIO TX 78255

PHONE: (210) 267-9106 **FAX:** (210) 272-0800

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/26/2016

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

Facility Information: **Facility ID:** 100822

BOARDING WITH TENDER CARE INC
1002 GALLATIN DR
SAN ANTONIO **TX** 78245

Phone (210) 670-1440 **Fax** (210) 670-1440

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

BOARDING WITH TENDER CARE INC
1002 GALLATIN DR
SAN ANTONIO TX 78245

PHONE: (210) 670-1440 **FAX:** (210) 675-2306

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/10/2016

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

Facility Information: **Facility ID:** 000945

BROOKDALE ALAMO HEIGHTS
855 E BASSE RD
SAN ANTONIO **TX** 78209

Phone (210) 930-1040 **Fax** (210) 930-1844

TOTAL Lic Capacity: 97 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 97 **TITLE 18/19:** 0

Owner Information

S-H OPCO LINCOLN HEIGHTS LLC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214

PHONE: (414) 918-5000 **FAX:** (414) 918-6076

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/29/2016

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

Facility Information: **Facility ID:** 100252

BROOKDALE CASTLE HILLS
1207 JACKSON KELLER
SAN ANTONIO **TX** 78213

Phone (210) 375-8132 **Fax** (210) 375-2341

TOTAL Lic Capacity: 160 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 160 **TITLE 18/19:** 0

Owner Information

BROOKDALE CASTLE HILLS LLC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214

PHONE: (414) 918-5000 **FAX:** (414) 918-5054

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/29/2017

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

Facility Information: **Facility ID:** 100251

BROOKDALE CASTLE HILLS
1207 JACKSON KELLER
SAN ANTONIO **TX** 78213

Phone (210) 375-8132 **Fax** (210) 375-2341

TOTAL Lic Capacity: 31 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 31 **TITLE19:** 0
PRIVATE Beds: 31 **TITLE 18/19:** 0

Owner Information

BROOKDALE CASTLE HILLS LLC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214

PHONE: (414) 918-5000 **FAX:** (414) 918-5054

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/01/2017

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

Facility Information: **Facility ID:** 030050

BROOKDALE HAMILTON WOLFE
5331 HAMILTON WOLFE RD
SAN ANTONIO **TX** 78229

Phone (210) 641-7200 **Fax** (210) 696-2911

TOTAL Lic Capacity: 96 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 96 **TITLE 18/19:** 0

Owner Information

ESC III LP
6737 W WASHINGTON STREET ,SUITE 2300
MILWAUKEE WI 53214

PHONE: (206) 298-2909 **FAX:** (206) 301-4510

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/18/2016

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

Facility Information: **Facility ID:** 030049

BROOKDALE HAMILTON WOLFE
5331 HAMILTON WOLFE RD
SAN ANTONIO **TX** 78229

Phone (210) 641-7200 **Fax** (210) 696-2911

TOTAL Lic Capacity: 32 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 32 **TITLE19:** 0
PRIVATE Beds: 32 **TITLE 18/19:** 0

Owner Information

ESC III LP
6737 W WASHINGTON STREET ,SUITE 2300
MILWAUKEE WI 53214

PHONE: (206) 298-2909 **FAX:** (206) 301-4510

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/18/2017

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

Facility Information: **Facility ID:** 000350

BROOKDALE MALTSBERGER
13303 JONES MALTSBERGER RD
SAN ANTONIO **TX** 78247

Phone (210) 402-3800 **Fax** (210) 402-4047

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

BROOKDALE SENIOR LIVING COMMUNITIES INC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214

PHONE: (414) 918-5441 **FAX:** (414) 918-6076

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/01/2016

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

Facility Information: **Facility ID:** 030044

BROOKDALE MEDICAL CENTER KINGSLEY
9000 FLOYD CURL DR
SAN ANTONIO **TX** 78240

Phone (210) 697-0772 **Fax** (210) 697-0653

TOTAL Lic Capacity: 136 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 27 **TITLE19:** 0
PRIVATE Beds: 136 **TITLE 18/19:** 0

Owner Information

ESC IV LP
111 WESTWOOD PL ,STE 400
BRENTWOOD TN 37027

PHONE: (414) 918-5441 **FAX:** (414) 918-5054

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/01/2017

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

Facility Information: **Facility ID:** 000360

BROOKDALE MEDICAL CENTER WHITBY
5996 WHITBY RD
SAN ANTONIO **TX** 78240
Phone (210) 561-9500 **Fax** (210) 561-9546

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

BROOKDALE SENIOR LIVING COMMUNITIES INC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214
PHONE: (414) 918-5441 **FAX:** (414) 918-6076
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/01/2016

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

Facility Information: **Facility ID:** 000731

BROOKDALE N. FREDERICKSBURG ROAD
9505 FREDERICKSBURG RD
SAN ANTONIO **TX** 78240
Phone (210) 641-6257 **Fax** (210) 641-6922

TOTAL Lic Capacity: 120 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 25 **TITLE19:** 0
PRIVATE Beds: 120 **TITLE 18/19:** 0

Owner Information

ESC-NGH, LP
111 WESTWOOD PL ,STE 400
BRENTWOOD TN 37027
PHONE: (206) 298-2909 **FAX:** (206) 301-4500
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/01/2017

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

Facility Information: **Facility ID:** 000313

BROOKDALE NACOGDOCHES
14595 NACOGDOCHES RD
SAN ANTONIO **TX** 78247
Phone (210) 653-6100 **Fax** (210) 653-2082

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 60 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

BROOKDALE SENIOR LIVING COMMUNITIES INC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214
PHONE: (414) 918-5441 **FAX:** (414) 918-6076
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/01/2017

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

Facility Information: **Facility ID:** 030087

BROOKDALE OAKWELL
3360 OAKWELL COURT
SAN ANTONIO **TX** 78218
Phone (210) 820-8744 **Fax** (210) 820-8233

TOTAL Lic Capacity: 136 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 34 **TITLE19:** 0
PRIVATE Beds: 136 **TITLE 18/19:** 0

Owner Information

ESC IV LP
111 WESTWOOD PL ,STE 400
BRENTWOOD TN 37027
PHONE: (414) 918-5441 **FAX:** (414) 918-5054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/01/2018

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

Facility Information: **Facility ID:** 050689

BROOKDALE SHAVANO PARK
4096 DEZAVALA
SAN ANTONIO **TX** 78249
Phone (210) 408-7411 **Fax** (210) 408-6411

TOTAL Lic Capacity: 30 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 30 **TITLE19:** 0
PRIVATE Beds: 30 **TITLE 18/19:** 0

Owner Information

ARC SHAVANO LP
111 WESTWOOD PL ,STE 400
BRENTWOOD TN 37027
PHONE: (615) 221-2250 **FAX:** (615) 221-2280
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/25/2016

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

Facility Information: **Facility ID:** 050670

BROOKDALE SHAVANO PARK
4096 DEZAVALA
SAN ANTONIO **TX** 78249
Phone (210) 408-7411 **Fax** (210) 408-6411

TOTAL Lic Capacity: 120 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 120 **TITLE 18/19:** 0

Owner Information

ARC SHAVANO LP
111 WESTWOOD PL ,STE 400
BRENTWOOD TN 37027
PHONE: (615) 221-2250 **FAX:** (615) 221-2280
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/25/2017

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

Facility Information: **Facility ID:** 104961

BROOKHOLLOW ASSISTED LIVING
14211 CHADBOURNE ST
SAN ANTONIO **TX** 78232

Phone (210) 545-4012 **Fax** (210) 545-4012

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

Owner Information

CLAUDIA BELDEAN
14211 CHADBOURNE ST
SAN ANTONIO TX 78232

PHONE: (210) 823-2604 **FAX:** (210) 545-4012

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/10/2017

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

Facility Information: **Facility ID:** 105931

BROOKS HOME FOR SENIORS
4139 BRIAR GLEN DR.
SAN ANTONIO **TX** 78218

Phone (210) 590-8927 **Fax**

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

Owner Information

BROOKS HOME FOR SENIORS LLC
4139 BRIAR GLEN DR
SAN ANTONIO TX 78218

PHONE: (210) 590-8927 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/29/2017

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

Facility Information: **Facility ID:** 030254

CAROL ANN'S HOME INC
8005 CHAMBERS RD
SAN ANTONIO **TX** 78229

Phone (210) 621-3685 **Fax** (210) 635-0110

TOTAL Lic Capacity: 15 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 15 **TITLE 18/19:** 0

Owner Information

CAROL ANN'S HOME INC
21022 CACTUS CLIFF
SAN ANTONIO TX 78258

PHONE: (210) 621-3685 **FAX:** (210) 635-0110

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/04/2018

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

Facility Information: **Facility ID:** 103570

CAROL ANN'S HOME INC
4215 HILTON HEAD
SAN ANTONIO **TX** 78217

Phone (210) 375-4664 **Fax** (210) 635-0110

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

CAROL ANN'S HOME INC
21022 CACTUS CLIFF
SAN ANTONIO TX 78258

PHONE: (210) 621-3685 **FAX:** (210) 635-0110

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/14/2016

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

Facility Information: **Facility ID:** 000432

CASA FELICITAS
107 BARBARA DR
SAN ANTONIO **TX** 78216

Phone (210) 824-5344 **Fax** (210) 824-5344

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

KINCARE INCORPORATED
107 BARBARA DR
SAN ANTONIO TX 78216

PHONE: (210) 824-5344 **FAX:** (210) 822-2494

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/10/2016

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

Facility Information: **Facility ID:** 000314

CHANDLER ASSISTED LIVING
1510 HOWARD STREET
SAN ANTONIO **TX** 78212

Phone (210) 737-5200 **Fax** (210) 737-5221

TOTAL Lic Capacity: 32 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 32 **TITLE 18/19:** 0

Owner Information

MORNINGSIDE MINISTRIES
700 BABCOCK RD
SAN ANTONIO TX 78201-2600

PHONE: (210) 734-1000 **FAX:** (210) 734-1111

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/12/2017

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

Facility Information: **Facility ID:** 105463

CINDY'S PLACE
16906 TURKEY POINT
SAN ANTONIO **TX** 78232

Phone (210) 255-8056 **Fax**

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

CLAUDETTE C. ROBERTS
16906 TURKEY POINT
SAN ANTONIO TX 78232

PHONE: (210) 255-8056 **FAX:** (210) 233-1038

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/07/2017

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

Facility Information: **Facility ID:** 030045

COLONIAL GARDENS OF SAN ANTONIO SA-1
20 LYNN BATTS LANE
SAN ANTONIO **TX** 78218

Phone (210) 826-6090 **Fax** (210) 826-6516

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

ASF LIVING INC
P O BOX 3666
SAN ANGELO TX 76902

PHONE: (325) 653-3180 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/01/2016

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

Facility Information: **Facility ID:** 030288

COLONIAL GARDENS OF SAN ANTONIO SA-2
10 LYNN BATTS LANE
SAN ANTONIO **TX** 78218

Phone (210) 826-6212 **Fax** (210) 826-7985

TOTAL Lic Capacity: 20 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 20 **TITLE19:** 0
PRIVATE Beds: 20 **TITLE 18/19:** 0

Owner Information

ASF LIVING INC
P O BOX 3666
SAN ANGELO TX 76902

PHONE: (325) 653-3180 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/01/2017

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

Facility Information: **Facility ID:** 102765

DIANA'S ASSISTED LIVING HOME
214 TALISMAN
SAN ANTONIO **TX** 78210

Phone (210) 849-3415 **Fax** (210) 267-2485

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

DIANA L DELEON
207 JO MARIE
SAN ANTONIO TX 78222

PHONE: (210) 845-3826 **FAX:** (210) 267-2485

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/31/2018

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

Facility Information: **Facility ID:** 104238

DIGNITY SENIOR CARE HOMES
4530 BRIARWICK
SAN ANTONIO **TX** 78217

Phone (210) 451-7171 **Fax**

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

DIGNITY SENIOR CARE LLC
4530 BRIARWICK
SAN ANTONIO TX 78219

PHONE: (210) 274-3556 **FAX:** (210) 451-7171

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/11/2016

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

Facility Information: **Facility ID:** 106320

DIGNITY SENIOR CARE LLC
4639 RADER PASS
SAN ANTONIO **TX** 78247

Phone (210) 451-7155 **Fax** (210) 451-7171

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

Owner Information

DIGNITY SENIOR CARE LLC
8410 APACHE BEND
CONVERSE TX 78109

PHONE: (210) 451-7155 **FAX:** (210) 451-7171

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/30/2017

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

Facility Information: **Facility ID:** 101047

DOVES NEST ASSISTED LIVING
14311 PARKHURST DR
SAN ANTONIO **TX** 78232
Phone (210) 496-0299 **Fax** (210) 496-0299

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

ANA M KHAN
14202 TURTLE ROCK ST
SAN ANTONIO TX 78232
PHONE: (210) 495-0481 **FAX:** (210) 496-0299
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/08/2017

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

Facility Information: **Facility ID:** 106041

EARLY TRAIL, INC.
322 EARLY TRAIL
SAN ANTONIO **TX** 78228
Phone (210) 888-5486 **Fax** (210) 277-0487

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

Owner Information

EARLY TRAIL, INC.
322 EARLY TRAIL
SAN ANTONIO TX 78228
PHONE: (210) 888-5486 **FAX:** (210) 277-0487
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/15/2017

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

Facility Information: **Facility ID:** 001075

ELISAS FOSTERCARE
147 CROESUS
SAN ANTONIO **TX** 78213
Phone (210) 979-9251 **Fax** (210) 979-9251

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

ELISA M DURDA
147 CROESUS
SAN ANTONIO TX 78213
PHONE: (210) 979-9251 **FAX:** (210) 979-9251
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE C
License Exp Dt: 09/26/2017

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

Facility Information: **Facility ID:** 030383

ELMCROFT OF WINDCREST
6849 CRESTWAY
SAN ANTONIO **TX** 78239
Phone (210) 946-4994 **Fax** (210) 946-5775

TOTAL Lic Capacity: 113 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 113 **TITLE 18/19:** 0

Owner Information

WINDCREST OPERATIONS LLC
700 N HURSTBOURNE PKWY ,STE 200
LOUISVILLE KY 40222
PHONE: (502) 753-6004 **FAX:** (502) 753-6104
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/01/2017

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

Facility Information: **Facility ID:** 000652

EMERITUS AT AMBER OAKS
4415 RIO D ORO
SAN ANTONIO **TX** 78233
Phone (210) 653-3132 **Fax** (210) 653-9791

TOTAL Lic Capacity: 205 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 205 **TITLE 18/19:** 0

Owner Information

ESC III LP
6737 W WASHINGTON STREET ,SUITE 2300
MILWAUKEE WI 53214
PHONE: (206) 298-2909 **FAX:** (206) 301-4510
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/01/2017

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

Facility Information: **Facility ID:** 101083

ESDRAS MENDOZA
4618 MANITOU
SAN ANTONIO **TX** 78228
Phone (210) 436-6885 **Fax** (210) 233-9634

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

MARIA I LOPEZ MENDOZA
4618 MANITOU
SAN ANTONIO TX 78228
PHONE: (210) 639-2560 **FAX:** (210) 431-7884
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/23/2018

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

Facility Information: **Facility ID:** 101026

FAITH HOME
4218 CLEAR LAKE
SAN ANTONIO **TX** 78217
Phone (210) 637-7848 **Fax** (210) 348-5567

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

ROSA CORTES
13731 SUNNY GLEN
SAN ANTONIO TX 78233
PHONE: (210) 859-5507 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/14/2017

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

Facility Information: **Facility ID:** 102535

FENWOOD RESIDENTIAL HOME CARE
8862 FENWOOD
SAN ANTONIO **TX** 78250
Phone (210) 296-7260 **Fax** (210) 233-6197

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

FENWOOD HOME CARE ALF LLC
8862 FENWOOD
SAN ANTONIO TX 78250
PHONE: (210) 233-6197 **FAX:** (210) 233-6197

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/21/2018

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

Facility Information: **Facility ID:** 104458

FRANKLIN PARK SONTERRA ASSISTED LIVING
18323 SONTERRA PLACE
SAN ANTONIO **TX** 78258
Phone (210) 404-1444 **Fax** (210) 490-2801

TOTAL Lic Capacity: 70 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 70 **TITLE 18/19:** 0

Owner Information

FAM SONTERRA, LTD
21260 GATHERING OKA ,STE 101
SAN ANTONIO TX 78260
PHONE: (210) 694-2223 **FAX:** (210) 594-2225

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/10/2017

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

Facility Information: **Facility ID:** 104834

FRANKLIN PARK TPC PARKWAY
21802 ENCINO COMMONS
SAN ANTONIO **TX** 78258
Phone (210) 483-9999 **Fax**

TOTAL Lic Capacity: 125 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 45 **TITLE19:** 0
PRIVATE Beds: 125 **TITLE 18/19:** 0

Owner Information

FRANKLIN PARK STONE OAK, LTD
21260 GATHERING OAK, ,SUITE #101
SAN ANTONIO TX 78260
PHONE: (210) 694-2223 **FAX:** (210) 694-2225

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/30/2016

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

Facility Information: **Facility ID:** 030259

FREEDOM HOUSE ALZHEIMER'S CARE AND RESEARCH CENTER
12455 FREEDOM WAY
SAN ANTONIO **TX** 78245
Phone (210) 838-6300 **Fax** (210) 838-6310

TOTAL Lic Capacity: 72 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 72 **TITLE19:** 0
PRIVATE Beds: 72 **TITLE 18/19:** 0

Owner Information

ALZHEIMERS CARE AND RESEARCH CENTER FOUNDATION
12455 FREEDOM WAY
SAN ANTONIO TX 78245
PHONE: (210) 838-6300 **FAX:** (210) 838-6310

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/05/2018

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

Facility Information: **Facility ID:** 101298

GARCIA FOSTER HOME
558 FERRIS ST
SAN ANTONIO **TX** 78220
Phone (210) 271-9433 **Fax** (210) 223-1434

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

LALITA GARCIA
558 FERRIS ST
SAN ANTONIO TX 78220
PHONE: (210) 271-9433 **FAX:** (210) 223-1434

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE C
License Exp Dt: 05/25/2017

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

Facility Information: **Facility ID:** 010240

GOLDEN CASA ASSISTED LIVING FACILITY 2
7715 BARREN RIDGE
SAN ANTONIO **TX** 78239
Phone (210) 656-3690 **Fax** (210) 656-8024

TOTAL Lic Capacity: 11 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 11 **TITLE 18/19:** 0

Owner Information

RONALD A DYGERT
7714 BARREN RIDGE
SAN ANTONIO TX 78239
PHONE: (210) 656-3690 **FAX:** (210) 656-8024
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/22/2016

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

Facility Information: **Facility ID:** 104091

GOLDEN STAGE ASSISTED LIVING
24911 N SADDLE TRL
SAN ANTONIO **TX** 78255
Phone (210) 858-5200 **Fax** (210) 616-4808

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

LENUTA PUMNUT
24911 N SADDLE TRL
SAN ANTONIO TX 78255
PHONE: (210) 858-5200 **FAX:** (210) 616-4808
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/08/2017

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

Facility Information: **Facility ID:** 000562

GUZMANS PERSONAL CARE
325 E LOCUST ST
SAN ANTONIO **TX** 78212
Phone (210) 735-1779 **Fax** (210) 735-1776

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

RAUL M GUZMAN SR
325 E LOCUST
SAN ANTONIO TX 78212
PHONE: (210) 735-1779 **FAX:** (210) 735-1776
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/08/2015

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

Facility Information: **Facility ID:** 000926

HAPPY HOME ADULT PERSONAL CARE HOME
4635 LORD RD
SAN ANTONIO **TX** 78220
Phone (210) 267-8142 **Fax** (210) 493-8289

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

GERALDINE DOLORES WALKER
4523 EMORY OAK WOODS
SAN ANTONIO TX 78249
PHONE: (210) 445-7282 **FAX:** (210) 493-8289
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/05/2017

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

Facility Information: **Facility ID:** 030196

HAVENS INN
110 MARY LOUISE DR
SAN ANTONIO **TX** 78201
Phone (210) 736-0044 **Fax** (210) 736-0448

TOTAL Lic Capacity: 36 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 36 **TITLE 18/19:** 0

Owner Information

MARGARET L VELASQUEZ
110 MARY LOUISE DR
SAN ANTONIO TX 78201
PHONE: (210) 736-0044 **FAX:** (210) 736-0448
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/13/2016

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

Facility Information: **Facility ID:** 103524

HEART TO HEART RESIDENTIAL CARE HOME LLC
12119 SAN MIGUEL
SAN ANTONIO **TX** 78233
Phone (210) 777-1039 **Fax** (210) 265-5516

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

HEART TO HEART RESIDENTIAL CARE HOME LLC
12119 SAN MIGUEL
SAN ANTONIO TX 78233
PHONE: (210) 777-1039 **FAX:** (210) 265-5516
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/08/2017

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

Facility Information: **Facility ID:** 105674

HERITAGE CREEK
6538 ECKHERT RD.
SAN ANTONIO **TX** 78240

Phone (210) 439-8729 **Fax**

TOTAL Lic Capacity: 52 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 52 **TITLE 18/19:** 0

Owner Information

HERITAGE CREEK ASSISTED LIVING INC
6538 ECKHERT RD.
SAN ANTONIO TX 78240

PHONE: (210) 439-8729 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/01/2017

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

Facility Information: **Facility ID:** 000843

HIGHLAND GARDENS PERSONAL CARE
802 MONTICELLO
SAN ANTONIO **TX** 78223

Phone (210) 534-9451 **Fax** (888) 333-1141

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

GLADYS M KOVAL & GEORGE J KOVAL
802 MONTICELLO
SAN ANTONIO TX 78223

PHONE: (210) 534-9451 **FAX:** (888) 333-1141

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/01/2017

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

Facility Information: **Facility ID:** 030354

HOPES RESIDENCE
5046 GALAHAD DR
SAN ANTONIO **TX** 78218

Phone (210) 564-0870 **Fax** (210) 251-4279

TOTAL Lic Capacity: 11 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 11 **TITLE 18/19:** 0

Owner Information

HEALTH OPERATION PROVIDING ECONOMICAL SOLUTIONS (HOPES)
5102 GAWAIN DR
SAN ANTONIO TX 78218

PHONE: (210) 599-2551 **FAX:** (210) 251-4279

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/29/2017

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

Facility Information: **Facility ID:** 101528

HOPES RESIDENCE
5102 GAWAIN THE CHOSEN
SAN ANTONIO **TX** 78218

Phone (210) 559-2551 **Fax** (210) 559-1316

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

HEALTH OPERATION PROVIDING ECONOMICAL SOLUTIONS (HOPES)
5102 GAWAIN DR
SAN ANTONIO TX 78218

PHONE: (210) 599-2551 **FAX:** (210) 251-4279

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/06/2017

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

Facility Information: **Facility ID:** 050192

IHCS RESIDENTIAL
15218 PEBBLE FOREST DR
SAN ANTONIO **TX** 78232

Phone (210) 559-9500 **Fax** (210) 858-5231

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

IHCS RESIDENTIAL
15218 PEBBLE FOREST
SAN ANTONIO TX 78232

PHONE: (210) 559-9500 **FAX:** (866) 343-7703

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/07/2017

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

Facility Information: **Facility ID:** 100102

INDEPENDENCE HILL ASSISTED LIVING FACILITY
20500 HUEBNER RD
SAN ANTONIO **TX** 78258

Phone (210) 482-2000 **Fax** (210) 482-2006

TOTAL Lic Capacity: 115 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 115 **TITLE 18/19:** 0

Owner Information

STONE OAK VILLAS II LTD
20500 HUEBNER RD
SAN ANTONIO TX 78258

PHONE: (210) 615-4040 **FAX:** (210) 615-4288

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/08/2017

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

Facility Information: **Facility ID:** 106118

ISLE AT WATERCREST - ALAMO RANCH
11349 ALAMO RANCH PARKWAY
SAN ANTONIO **TX** 78253
Phone (210) 688-9966 **Fax**

TOTAL Lic Capacity: 152 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 50 **TITLE19:** 0
PRIVATE Beds: 152 **TITLE 18/19:** 0

Owner Information

ALAMO RANCH CARE GROUP LP
5307 E MOCKINGBIRD LANE ,STE 1010
DALLAS TX 75206
PHONE: (214) 370-2600 **FAX:** (214) 370-2699
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/22/2017

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

Facility Information: **Facility ID:** 106149

JUST LIKE HOME CARE
4126 SHADY OAK ST
SAN ANTONIO **TX** 78229
Phone (210) 274-8280 **Fax** (210) 979-0239

TOTAL Lic Capacity: 11 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 11 **TITLE 18/19:** 0

Owner Information

JUST LIKE HOME CARE
4126 SHADY OAK ST
SAN ANTONIO TX 78229
PHONE: (210) 274-8280 **FAX:** (210) 979-0239
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/20/2017

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

Facility Information: **Facility ID:** 000514

KOVALS ADULT FOSTER HOME
804 MONTICELLO
SAN ANTONIO **TX** 78223
Phone (210) 534-9451 **Fax** (888) 333-1141

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

Owner Information

GLADYS M KOVAL & GEORGE J KOVAL
802 MONTICELLO
SAN ANTONIO TX 78223
PHONE: (210) 534-9451 **FAX:** (888) 333-1141
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/01/2016

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

Facility Information: **Facility ID:** 102599

KSL TEXAS COMMUNITIES SA LLC
8103 N HOLLOW
SAN ANTONIO **TX** 78240
Phone (210) 558-7600 **Fax** (210) 558-7604

TOTAL Lic Capacity: 61 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 61 **TITLE 18/19:** 0

Owner Information

KSL TEXAS COMMUNITIES, SA, LLC
5790 FLEET STREET ,SUITE 300
CARLSBAD CA 92008
PHONE: (760) 804-5900 **FAX:** (760) 804-0589
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 06/10/2016

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

Facility Information: **Facility ID:** 050560

LA BONA VITA HOMES
251 W HIGH ST
SAN ANTONIO **TX** 78210
Phone (210) 532-8842 **Fax** (210) 532-8842

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

CLEO M ARRAMBIDE
251 W HIGH ST
SAN ANTONIO TX 78210
PHONE: (210) 532-8842 **FAX:** (210) 532-8842
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/20/2017

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

Facility Information: **Facility ID:** 105750

LAKESIDE ASSISTED LIVING BY TRISUN HEALTHCARE
8627 LAKESIDE PARKWAY
SAN ANTONIO **TX** 78245
Phone (210) 670-4900 **Fax** (210) 670-0010

TOTAL Lic Capacity: 71 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 29 **TITLE19:** 0
PRIVATE Beds: 71 **TITLE 18/19:** 0

Owner Information

PM MANAGEMENT - SAN ANTONIO AL, LLC
1717 W 6TH STREET ,SUITE 450
AUSTIN TX 78703
PHONE: (512) 340-7829 **FAX:** (877) 639-9530
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/23/2018

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

Facility Information: **Facility ID:** 105022

LAKESIDE VILLAS AT THE ARC
10000 RHINELAND
SAN ANTONIO **TX** 78239
Phone (210) 646-5200 **Fax** (210) 646-5395

TOTAL Lic Capacity: 68 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 68 **TITLE 18/19:** 0

Owner Information

THE ARMY RETIREMENT RESIDENCE FOUNDATION SAN ANTONIO INC
7400 CRESTWAY DR
SAN ANTONIO TX 78239
PHONE: (210) 646-5300 **FAX:** (210) 646-5395
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/21/2017

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

Facility Information: **Facility ID:** 000449

LEDESMA PERSONAL CARE HOME
1809 ALLENDE ST
SAN ANTONIO **TX** 78237
Phone (210) 432-2087 **Fax** (210) 438-1177

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

RODOLFO R LEDESMA
1809 ALLENDE STREET
SAN ANTONIO TX 78237
PHONE: (210) 432-2087 **FAX:** (210) 438-1177
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/30/2018

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

Facility Information: **Facility ID:** 103438

LEON SPRINGS LODGE LLC
24137 BOERNE STAGE RD
SAN ANTONIO **TX** 78255
Phone (210) 698-9365 **Fax** (210) 735-8271

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

LEON SPRINGS LODGE LLC
24137 BOERNE STAGE RD
SAN ANTONIO TX 78255
PHONE: (210) 735-1190 **FAX:** (210) 735-8271
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/02/2017

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

Facility Information: **Facility ID:** 101035

LIBERTY HOUSE AT BLUE SKIES OF TEXAS WEST
5200 JOHN D RYAN BLVD
SAN ANTONIO **TX** 78245
Phone (210) 568-3420 **Fax** (210) 568-3336

TOTAL Lic Capacity: 51 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 51 **TITLE 18/19:** 0

Owner Information

BST HEALTH SERVICES CORP
12455 FREEDOM WAY
SAN ANTONIO TX 78245
PHONE: (210) 838-6332 **FAX:** (210) 838-6315
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/01/2016

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

Facility Information: **Facility ID:** 101767

LOMA PARK ASSISTED LIVING
1014 NW 38 ST
SAN ANTONIO **TX** 78228
Phone (210) 438-5052 **Fax** (210) 681-6667

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

LOMA PARK ASSISTED LIVING INC
1014 N.W. 38TH STREET
SAN ANTONIO TX 78228
PHONE: (210) 438-5052 **FAX:** (210) 509-7823
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/01/2018

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

Facility Information: **Facility ID:** 100358

LOPEZ ASSISTED LIVING HOME
1611 W COMMERCE ST
SAN ANTONIO **TX** 78207
Phone (210) 251-3896 **Fax** (210) 436-9106

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

LOPEZ ASSISTED LIVING HOMES, INC
3706 SHERRIL BROOK
SAN ANTONIO TX 78228
PHONE: (210) 434-7216 **FAX:** (210) 436-9106
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/07/2017

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

Facility Information: **Facility ID:** 030366

LOPEZ ASSISTED LIVING HOMES
3706 SHERRIL BROOK
SAN ANTONIO **TX** 78228

Phone (210) 434-7216 **Fax** (210) 436-9106

TOTAL Lic Capacity: 11 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 11 **TITLE 18/19:** 0

Owner Information

LOPEZ ASSISTED LIVING HOMES, INC
3706 SHERRIL BROOK
SAN ANTONIO TX 78228

PHONE: (210) 434-7216 **FAX:** (210) 436-9106

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/02/2017

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

Facility Information: **Facility ID:** 103075

LOPEZ HOMES
118 WALLACE RD
SAN ANTONIO **TX** 78237

Phone (210) 438-8750 **Fax** (210) 552-4903

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

Owner Information

TOMAS G LOPEZ
118 WALLACE RD
SAN ANTONIO TX 78237

PHONE: (210) 438-8750 **FAX:** (830) 438-7471

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/04/2016

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

Facility Information: **Facility ID:** 101847

LOPEZ HOMES MCG LLC
511 W. QUILL
SAN ANTONIO **TX** 78228

Phone (210) 432-0552 **Fax** (210) 314-5708

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

LOPEZ HOMES MCG LLC
4818 OAKWAY DR
SAN ANTONIO TX 78228

PHONE: (210) 365-0532 **FAX:** (210) 314-5708

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/10/2018

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

Facility Information: **Facility ID:** 101538

MACKENZIE MANOR
5450 MAPLE VISTA
SAN ANTONIO **TX** 78247

Phone (210) 387-3390 **Fax** (877) 812-0812

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

MCKENZIE MANOR LLC
5450 MAPLE VISTA
SAN ANTONIO TX 78247

PHONE: (210) 387-3390 **FAX:** (877) 812-0812

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/27/2016

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

Facility Information: **Facility ID:** 105241

MARINA'S ASSISTED LIVING LLC
3515 BACKBAY DRIVE
SAN ANTONIO **TX** 78230

Phone (210) 257-9596 **Fax** (866) 745-1547

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

MARINA'S ASSISTED LIVING LLC
3515 BACKBAY DRIVE
SAN ANTONIO TX 78230

PHONE: (210) 257-9596 **FAX:** (210) 560-2147

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/30/2016

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

Facility Information: **Facility ID:** 030098

MCDANIELS PERSONAL CARE HOME
6292 MONTGOMERY DR
SAN ANTONIO **TX** 78239-3237

Phone (210) 590-6840 **Fax** (210) 590-7559

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

PRABETG INC
6292 MONTGOMERY DR
SAN ANTONIO TX 78239

PHONE: (210) 590-6840 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 06/16/2015

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

Facility Information: **Facility ID:** 101631

MEADOWS
8706 MISSION ROAD
SAN ANTONIO **TX** 78214
Phone (210) 924-9265 **Fax** (210) 922-6006

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **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: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/28/2017

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

Facility Information: **Facility ID:** 106423

MEMORY CARE OF WESTOVER HILLS
10910 TOWN CENTER DRIVE
SAN ANTONIO **TX** 78251
Phone (210) 802-6653 **Fax**

TOTAL Lic Capacity: 64 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 64 **TITLE19:** 0
PRIVATE Beds: 64 **TITLE 18/19:** 0

Owner Information

MCA WESTOVER HILLS OPERATING COMPANY LLC
4009 HILLSBORO PIKE ,SUITE 211
NASHVILLE TN 37215
PHONE: (615) 983-0171 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/18/2018

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

Facility Information: **Facility ID:** 105454

MENDOZA ASSISTED LIVING
208 HOPE DR.
SAN ANTONIO **TX** 78228
Phone (210) 639-2560 **Fax** (210) 233-9636

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

MARIA G. LOPEZ
155 AMIRES ST.
SAN ANTONIO TX 78237
PHONE: (210) 347-4599 **FAX:** (210) 233-9636
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/14/2017

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

Facility Information: **Facility ID:** 102302

MI CASA ES SU CASA
4902 E BEVERLY MAE DRIVE
SAN ANTONIO **TX**
Phone (210) 614-2913 **Fax** (210) 614-4768

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

SUSIE M VILLARREAL
4902 E BEVERLY MAE
SAN ANTONIO TX 78229
PHONE: (210) 614-2913 **FAX:** (210) 614-2913
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/27/2018

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

Facility Information: **Facility ID:** 000555

MISSION ROAD DEVELOPMENT CENTER - HORN BLVD.
10602 HORN BLVD
SAN ANTONIO **TX** 78240
Phone (210) 561-2715 **Fax** (210) 692-1524

TOTAL Lic Capacity: 6 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 6 **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: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/25/2018

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

Facility Information: **Facility ID:** 000938

MISSION ROAD DEVELOPMENTAL CENTER - COUNTRY BREEZE
6706 COUNTRY BREEZE
SAN ANTONIO **TX** 78240
Phone (210) 614-1657 **Fax** (210) 692-1524

TOTAL Lic Capacity: 6 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 6 **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: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/25/2018

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

Facility Information: **Facility ID:** 103268

MISSION ROAD DEVELOPMENTAL CENTER - COUNTRY HAVEN
6827 COUNTRY HAVEN
SAN ANTONIO **TX** 78240
Phone (210) 558-7638 **Fax** (210) 692-1524

TOTAL Lic Capacity: 6 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 6 **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: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/25/2018

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

Facility Information: **Facility ID:** 103269

MISSION ROAD DEVELOPMENTAL CENTER-COUNTRY FLOWER
10607 COUNTRY FLOWER
SAN ANTONIO **TX** 78240
Phone (210) 558-7625 **Fax** (210) 692-1524

TOTAL Lic Capacity: 6 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 6 **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: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/25/2018

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

Facility Information: **Facility ID:** 105978

NEURORESTORATIVE SAN ANTONIO- TWISTED OAKS
3502 TWISTED OAKS DRIVE
SAN ANTONIO **TX** 78217
Phone (210) 650-0367 **Fax** (210) 599-2856

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

MENTOR ABI, LLC
313 CONGRESS ST ,5TH FLR
BOSTON MA 02210
PHONE: (617) 790-4800 **FAX:** (617) 790-4271
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/18/2016

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

Facility Information: **Facility ID:** 102550

NEWFOREST ESTATES
5034 NEWFOREST DRIVE
SAN ANTONIO **TX** 78229
Phone (210) 680-3649 **Fax** (210) 680-8108

TOTAL Lic Capacity: 32 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 32 **TITLE 18/19:** 0

Owner Information

PACIFICA NEW F ESTATES LLC
1775 HANCOCK STREET ,SUITE 200
SAN DIEGO CA 92110
PHONE: (619) 296-9000 **FAX:** (619) 296-9090
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/22/2017

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

Facility Information: **Facility ID:** 102932

NO GREATER LOVE
1711 E. CARSON
SAN ANTONIO **TX** 78208
Phone (210) 225-1461 **Fax**

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

JOE L SMITH
1711 E CARSON
SAN ANTONIO TX 78208
PHONE: (210) 225-1461 **FAX:** (210) 223-1461
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE C
License Exp Dt: 05/10/2017

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

Facility Information: **Facility ID:** 106467

ORTEGA'S HOMESTYLE ASSISTE LIVINGS, LLC
4711 SADDLE RIDGE
SAN ANTONIO **TX** 78217
Phone (210) 455-7471 **Fax**

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

Owner Information

ORTEGA'S HOMESTYLE ASSISTED LIVINGS LLC
4711 SADDLE RIDGE
SAN ANTONIO TX 78247
PHONE: (210) 455-7471 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/14/2018

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

Facility Information: **Facility ID:** 106452

ORTEGA'S HOMESTYLE ASSISTED LIVINGS, LLC
3417 FOREST FROST
SAN ANTONIO **TX** 78247
Phone (210) 503-5386 **Fax**

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

Owner Information

ORTEGA'S HOMESTYLE ASSISTED LIVINGS LLC
4711 SADDLE RIDGE
SAN ANTONIO TX 78247
PHONE: (210) 455-7471 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/28/2018

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

Facility Information: **Facility ID:** 104918

PAMS HOME CARE
2322 FRONTIER TRAIL
SAN ANTONIO **TX** 78251
Phone (210) 250-1525 **Fax** (210) 520-2272

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

PAMS HOME CARE
2322 FRONTIER TRAIL
SAN ANTONIO TX 78251
PHONE: **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/12/2017

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

Facility Information: **Facility ID:** 000724

PARKLANE WEST HEALTHCARE CENTER P C UNIT
2 TOWERS PARK LN
SAN ANTONIO **TX** 78209
Phone (210) 829-1400 **Fax** (210) 841-7741

TOTAL Lic Capacity: 17 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 17 **TITLE 18/19:** 0

Owner Information

ARC PARKLANE INC
111 WESTWOOD PL ,STE 400
BRENTWOOD TN 37027
PHONE: (615) 221-2250 **FAX:** (615) 221-2280
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/25/2017

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

Facility Information: **Facility ID:** 100248

PARLAND PLACE COMMUNITY LIVING
133 PARLAND PL
SAN ANTONIO **TX** 78209-6534
Phone (210) 828-1460 **Fax** (210) 828-3784

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

PARLAND PLACE COMMUNITY LIVING INC
123 PARLAND PL
SAN ANTONIO TX 78209-6534
PHONE: (210) 828-1460 **FAX:** (210) 549-2599
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/20/2017

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

Facility Information: **Facility ID:** 010286

PARLAND PLACE COMMUNITY LIVING INC
115 PARLAND PLACE
SAN ANTONIO **TX** 78209-6534
Phone (210) 828-1460 **Fax** (210) 828-3784

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

PARLAND PLACE COMMUNITY LIVING INC
123 PARLAND PL
SAN ANTONIO TX 78209-6534
PHONE: (210) 828-1460 **FAX:** (210) 549-2599
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/31/2016

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

Facility Information: **Facility ID:** 010287

PARLAND PLACE COMMUNITY LIVING INC
123 PARLAND PL
SAN ANTONIO **TX** 78209-6534
Phone (210) 828-1460 **Fax** (210) 549-2599

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

PARLAND PLACE COMMUNITY LIVING INC
123 PARLAND PL
SAN ANTONIO TX 78209-6534
PHONE: (210) 828-1460 **FAX:** (210) 549-2599
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/07/2018

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

Facility Information: **Facility ID:** 000923

PIPESTONE PLACE ASSISTED LIVING
2104 PIPESTONE DR
SAN ANTONIO **TX** 78232
Phone (210) 545-6272 **Fax** (210) 579-6557

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

SEV INC
2251 FAWN MIST LN
SAN ANTONIO TX 78248
PHONE: (210) 722-5271 **FAX:** (210) 579-6557
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/07/2017

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

Facility Information: **Facility ID:** 010384

PROVIDENCE PLACE
6487 WHITBY RD
SAN ANTONIO **TX** 78240-2198
Phone (210) 696-2410 **Fax** (210) 699-1866

TOTAL Lic Capacity: 61 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 61 **TITLE 18/19:** 0

Owner Information

WHITBY ROAD ALLIANCE INC
6487 WHITBY RD
SAN ANTONIO TX 78240-2198
PHONE: (210) 696-2410 **FAX:** (210) 699-1866
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/25/2017

County **BEXAR** Reg Svcs: UNLICENSED FACILITIES Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 105623

SEASON'S ALZHEIMERS AND ASSISTED CARE
15170 NACOGDOCHES ROAD
SAN ANTONIO **TX** 78247
Phone (210) 584-4238 **Fax**

TOTAL Lic Capacity: 15 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 15 **TITLE19:** 0
PRIVATE Beds: 15 **TITLE 18/19:** 0

Owner Information

THE SEASONS ON TEZEL LLC
8245 OLD TEZEL RD
SAN ANTONIO TX 78250
PHONE: (210) 584-4238 **FAX:** (210) 800-9756
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/25/2017

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

Facility Information: **Facility ID:** 104790

SENIOR HAVEN ASSISTED LIVING LLC
14706 HIDDEN GLEN WOODS
SAN ANTONIO **TX** 78249
Phone (210) 413-5072 **Fax** (210) 547-7784

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

SENIOR HAVEN ASSISTED LIVING LLC
14706 HIDDEN GLEN WOODS
SAN ANTONIO TX 78249
PHONE: (210) 413-5072 **FAX:** (210) 267-5334
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/18/2016

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

Facility Information: **Facility ID:** 103368

SERAPHIM ASSISTED LIVING SERVICES INC
3235 ROCK CREEK RUN
SAN ANTONIO **TX** 78230
Phone (210) 541-8868 **Fax**

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

SERAPHIM ASSISTED LIVING SERVICES INC
100 SADDLE BLANKET TRAIL
BUDA TX 78610
PHONE: (512) 415-4039 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/03/2017

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

Facility Information: **Facility ID:** 106523

SERVING FAITHFULLY ASSISTED LIVING, LLC
7521 LINKVIEW ST.
SAN ANTONIO **TX** 78240
Phone (210) 647-7303 **Fax** (210) 951-9039

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

SERVING FAITHFULLY ASSISTED LIVING, LLC
7521 LINKVIEW ST
SAN ANTONIO TX 78240
PHONE: (210) 647-7303 **FAX:** (210) 951-9039
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/13/2018

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

Facility Information: **Facility ID:** 102808

SHALIMAR PLACE - A KINCARE ASSISTED LIVING HOME
202 SHALIMAR
SAN ANTONIO **TX** 78213
Phone (210) 349-4452 **Fax** (210) 349-4452

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

Owner Information

KINCARE INCORPORATED
107 BARBARA DR
SAN ANTONIO TX 78216
PHONE: (210) 824-5344 **FAX:** (210) 822-2494
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/24/2017

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

Facility Information: **Facility ID:** 103082

SILVER LAKE CASA DEL SOL
4330 SILVER LAKE
SAN ANTONIO **TX** 78219
Phone (210) 359-1970 **Fax** (210) 224-1097

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

PAZMINO ENTERPRISES INC
4330 SILVER LAKE
SAN ANTONIO TX 78219
PHONE: (210) 849-7356 **FAX:** (210) 599-0704
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 06/15/2017

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

Facility Information: **Facility ID:** 000740

SOUTH TEXAS ASSISTED LIVING LLC
10218 DESERT SAND DR
SAN ANTONIO **TX** 78216
Phone (210) 341-1012 **Fax** (210) 349-7876

TOTAL Lic Capacity: 42 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 42 **TITLE 18/19:** 0

Owner Information

SOUTH TEXAS ASSISTED LIVING LLC
10218 DESERT SANDS
SAN ANTONIO TX 78216
PHONE: (210) 441-2557 **FAX:** (210) 349-7876
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/01/2015

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

Facility Information: **Facility ID:** 010230

ST MARYS ASSISTED LIVING INC
1618 S SAINT MARYS
SAN ANTONIO **TX** 78210-1634
Phone (210) 532-7698 **Fax** (210) 532-6155

TOTAL Lic Capacity: 40 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 40 **TITLE 18/19:** 0

Owner Information

ST MARYS ASSISTED LIVING INC
1618 S ST MARYS
SAN ANTONIO TX 78210
PHONE: (210) 532-7698 **FAX:** (210) 532-6155
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/01/2018

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

Facility Information: **Facility ID:** 105156

STARLIGHT HOMES ASSISTED LIVING
4623 BRIARDALE ST
SAN ANTONIO **TX** 78217
Phone (210) 599-2707 **Fax**

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

SHINES ASSISTED LIVING CARE, LLC
4623 BRIARDALE STREET
SAN ANTONIO TX 78217
PHONE: (210) 560-1497 **FAX:** (210) 599-2707
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/07/2017

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

Facility Information: **Facility ID:** 104245

SUNSHINE SENIOR LIVING
22310 CIELO VISTA DR.
SAN ANTONIO **TX** 78255
Phone (210) 781-4873 **Fax** (210) 592-1252

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

FIBIA BAHNEAN
22310 CIELO VISTA DR
SAN ANTONIO TX 78255
PHONE: (210) 781-4873 **FAX:** (210) 592-1252
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/04/2018

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

Facility Information: **Facility ID:** 102902

SUPERLATIVE SENIOR CARE INC
6718 LAZYRIDGE DR
SAN ANTONIO **TX** 78229

Phone (210) 617-7961 **Fax** (210) 592-7225

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

Owner Information

DIANA C RODRIGUEZ
1106 FAULK
SAN ANTONIO TX 78221

PHONE: (210) 317-8095 **FAX:** (210) 979-8581

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/25/2017

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

Facility Information: **Facility ID:** 102130

SUSAN HOME CARE
8426 CASCADE RIDGE DR
SAN ANTONIO **TX** 78239

Phone (210) 630-9982 **Fax** (210) 590-0860

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

SUSAN HOME CARE, INC
8426 CASCADE RIDGE DRIVE
SAN ANTONIO TX 78239

PHONE: (210) 630-9982 **FAX:** (210) 590-0860

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/24/2016

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

Facility Information: **Facility ID:** 104864

TCG SAN ANTONIO CAMPUS LLC
2739 CEMBALO BLVD
SAN ANTONIO **TX** 78230

Phone (210) 493-0101 **Fax** (210) 493-0102

TOTAL Lic Capacity: 90 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 20 **TITLE19:** 0
PRIVATE Beds: 90 **TITLE 18/19:** 0

Owner Information

TCG SAN ANTONIO CAMPUS LLC
2739 CEMBALO BLVD
SAN ANTONIO TX 78230

PHONE: (210) 493-0101 **FAX:** (210) 493-0102

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/10/2017

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

Facility Information: **Facility ID:** 000523

THE ARMY RESIDENCE COMMUNITY HEALTH CARE CENTER
7402 CRESTWAY DRIVE
SAN ANTONIO **TX** 78239

Phone (210) 646-5200 **Fax** (210) 646-5395

TOTAL Lic Capacity: 30 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 30 **TITLE 18/19:** 0

Owner Information

THE ARMY RETIREMENT RESIDENCE FOUNDATION SAN ANTONIO INC
7400 CRESTWAY DR
SAN ANTONIO TX 78239

PHONE: (210) 646-5300 **FAX:** (210) 646-5395

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/01/2018

County **BEXAR** Reg Svcs: UNASSIGNED Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 106324

THE COTTAGES ON DANNY KAYE (A)
5962 DANNY KAYE
SAN ANTONIO **TX** 78240

Phone (210) 540-8288 **Fax**

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

RESIDENTIAL CARE HOMES OF AMERICA LLC
10410 PARRIGIN RD
HELOTES TX 78023

PHONE: (210) 540-8288 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/07/2018

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

Facility Information: **Facility ID:** 106326

THE COTTAGES ON DANNY KAYE (B)
5962 DANNY KAYE
SAN ANTONIO **TX** 78240

Phone (210) 233-9099 **Fax** (210) 233-9126

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

RESIDENTIAL CARE HOMES OF AMERICA LLC
10410 PARRIGIN RD
HELOTES TX 78023

PHONE: (210) 540-8288 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/07/2018

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

Facility Information: **Facility ID:** 101357

THE HAVEN IN STONE OAK
511 KNIGHTS CROSS
SAN ANTONIO **TX** 78258

Phone (210) 404-2687 **Fax** (210) 481-1599

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 60 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

FSQC-TX LLC
400 CENTRE ST
NEWTON MA 02458

PHONE: (617) 796-8387 **FAX:** (617) 219-1435

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/17/2017

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

Facility Information: **Facility ID:** 000793

THE INN AT LOS PATIOS
8700 POST OAK LN
SAN ANTONIO **TX** 78217

Phone (210) 829-7357 **Fax** (210) 829-8238

TOTAL Lic Capacity: 30 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 30 **TITLE 18/19:** 0

Owner Information

CANTON II INC
2403 GREYMOORE DR
FRISCO TX 75034

PHONE: (972) 298-0411 **FAX:** (972) 283-0376

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/15/2017

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

Facility Information: **Facility ID:** 000697

THE KAULBACH ASSISTED LIVING CENTER
602 BABCOCK RD
SAN ANTONIO **TX** 78201

Phone (210) 731-1204 **Fax** (210) 731-1132

TOTAL Lic Capacity: 88 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 88 **TITLE 18/19:** 0

Owner Information

MORNINGSIDE MINISTRIES
700 BABCOCK RD
SAN ANTONIO TX 78201-2600

PHONE: (210) 734-1000 **FAX:** (210) 734-1111

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/01/2018

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

Facility Information: **Facility ID:** 105598

THE LANDING AT STONE OAK
19110 HUEBNER ROAD
SAN ANTONIO **TX** 78258

Phone (210) 479-0155 **Fax**

TOTAL Lic Capacity: 67 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 67 **TITLE19:** 0
PRIVATE Beds: 67 **TITLE 18/19:** 0

Owner Information

SA NORTH OP CO, LLC
5307 E MOCKINGBIRD LANE ,STE 1010
DALLAS TX 75206

PHONE: (214) 370-2600 **FAX:** (214) 370-2699

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/22/2017

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

Facility Information: **Facility ID:** 101354

THE LAURELS IN STONE OAK
575 KNIGHTS CROSS DR
SAN ANTONIO **TX** 78258

Phone (210) 249-0991 **Fax** (210) 497-5143

TOTAL Lic Capacity: 40 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 40 **TITLE 18/19:** 0

Owner Information

FSQC-TX LLC
400 CENTRE ST
NEWTON MA 02458

PHONE: (617) 796-8387 **FAX:** (617) 219-1435

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/17/2017

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

Facility Information: **Facility ID:** 101554

THE LAURELS IN STONE OAK
575 KNIGHTS CROSS DR
SAN ANTONIO **TX** 78258

Phone (210) 249-0991 **Fax** (210) 497-5143

TOTAL Lic Capacity: 62 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 62 **TITLE 18/19:** 0

Owner Information

FSQC-TX LLC
400 CENTRE ST
NEWTON MA 02458

PHONE: (617) 796-8387 **FAX:** (617) 219-1435

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/17/2017

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

Facility Information: **Facility ID:** 030092

THE LODGE AT LEON SPRINGS
24137 BOERNE STAGE RD
SAN ANTONIO **TX** 78255
Phone (210) 698-9365 **Fax** (210) 735-8271

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

LEON SPRINGS LODGE LLC
24137 BOERNE STAGE RD
SAN ANTONIO TX 78255
PHONE: (210) 735-1190 **FAX:** (210) 735-8271
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/07/2017

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

Facility Information: **Facility ID:** 000969

THE RENAISSANCE HOUSE INC
227 SARATOGA
SAN ANTONIO **TX** 78213
Phone (210) 348-9678 **Fax**

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

Owner Information

THE RENAISSANCE HOUSE INC
227 SARATOGA
SAN ANTONIO TX 78213
PHONE: (210) 348-9678 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/06/2017

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

Facility Information: **Facility ID:** 106221

THE SEASON ON TEZEL
8245 OLD TEZEL ROAD
SAN ANTONIO **TX** 78250
Phone (210) 584-4238 **Fax** (210) 800-9756

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

THE SEASONS ON TEZEL LLC
8245 OLD TEZEL RD
SAN ANTONIO TX 78250
PHONE: (210) 584-4238 **FAX:** (210) 800-9756
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/21/2017

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

Facility Information: **Facility ID:** 106217

THE SEASONS ON TEZEL
8245 OLD TEZEL ROAD BLDG. 1
SAN ANTONIO **TX** 78250
Phone (210) 584-4238 **Fax** (210) 800-9756

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

THE SEASONS ON TEZEL LLC
8245 OLD TEZEL RD
SAN ANTONIO TX 78250
PHONE: (210) 584-4238 **FAX:** (210) 800-9756
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/15/2017

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

Facility Information: **Facility ID:** 010295

THE SPECIAL CARE CENTER AT THE FORUM AT LINCOLN HEIGHTS
311 W NOTTINGHAM
SAN ANTONIO **TX** 78209
Phone (210) 824-2314 **Fax** (210) 824-6556

TOTAL Lic Capacity: 88 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 28 **TITLE19:** 0
PRIVATE Beds: 88 **TITLE 18/19:** 0

Owner Information

FIVE STAR LINCOLN HEIGHTS LLC
311 W NOTTINGHAM
SAN ANTONIO TX 78209
PHONE: (210) 824-2314 **FAX:** (210) 824-6556
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/01/2018

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

Facility Information: **Facility ID:** 100473

THE VILLAGE AT INCARNATE WORD
4707 BROADWAY
SAN ANTONIO **TX** 78209-6200
Phone (210) 829-7561 **Fax** (210) 832-0378

TOTAL Lic Capacity: 45 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 24 **TITLE19:** 0
PRIVATE Beds: 45 **TITLE 18/19:** 0

Owner Information

INCARNATE WORD RETIREMENT COMMUNITY INC
4707 BROADWAY
SAN ANTONIO TX 78209-6200
PHONE: (210) 829-7561 **FAX:** (210) 829-1601
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/03/2018

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

Facility Information: **Facility ID:** 000777

THE VILLAGE AT INCARNATE WORD
4707 BROADWAY
SAN ANTONIO **TX** 78209-6200

Phone (210) 829-7561 **Fax** (210) 829-0022

TOTAL Lic Capacity: 42 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 42 **TITLE 18/19:** 0

Owner Information

INCARNATE WORD RETIREMENT COMMUNITY INC
4707 BROADWAY
SAN ANTONIO TX 78209-6200

PHONE: (210) 829-7561 **FAX:** (210) 829-1601

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 06/21/2018

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

Facility Information: **Facility ID:** 102941

THERA MED REHABILITATION CLINIC INC
9571 NEW WORLD
SAN ANTONIO **TX** 78239

Phone (210) 927-7930 **Fax** (210) 927-9193

TOTAL Lic Capacity: 11 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 11 **TITLE 18/19:** 0

Owner Information

THERA MED REHABILITATION CLINIC INC
1630 SW MILITARY DR
SAN ANTONIO TX 78221

PHONE: (210) 927-7930 **FAX:** (210) 922-9193

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/26/2016

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

Facility Information: **Facility ID:** 104719

VERBENA SERAPHIM ASSISTED LIVING LLC
5683 VERBENA ST
SAN ANTONIO **TX** 78240

Phone (210) 310-3257 **Fax** (210) 310-3384

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

VERBENA SERAPHIM ASSISTED LIVING LLC
1430 NIXON DR.
BOERNE TX 78006

PHONE: (512) 415-4039 **FAX:** (512) 523-8185

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/17/2017

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

Facility Information: **Facility ID:** 030324

VIBRANT RETIREMENT LIVING
9303 CINNAMON HILL
SAN ANTONIO **TX** 78240

Phone (210) 641-5046 **Fax** (210) 641-5048

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 14 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

CSH SAN ANTONIO LLC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214

PHONE: (414) 918-5000 **FAX:** (414) 918-6076

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/30/2017

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

Facility Information: **Facility ID:** 104309

VIBRANT RETIREMENT LIVING
9303 CINNAMON HILL COTTAGE C
SAN ANTONIO **TX** 78240

Phone (210) 641-5046 **Fax**

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 14 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

CSH SAN ANTONIO LLC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214

PHONE: (414) 918-5000 **FAX:** (414) 918-6076

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/10/2016

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

Facility Information: **Facility ID:** 030265

VIBRANT RETIREMENT LIVING
9203 CINNAMON HILL
SAN ANTONIO **TX** 78240

Phone (210) 641-5046 **Fax** (210) 641-5048

TOTAL Lic Capacity: 100 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 100 **TITLE 18/19:** 0

Owner Information

CSH SAN ANTONIO LLC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214

PHONE: (414) 918-5000 **FAX:** (414) 918-6076

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/30/2016

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

Facility Information: **Facility ID:** 030333

VIBRANT RETIREMENT LIVING
9303 CINNAMON HILL
SAN ANTONIO **TX** 78240
Phone (210) 641-5046 **Fax** (210) 641-5048

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 14 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

CSH SAN ANTONIO LLC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214
PHONE: (414) 918-5000 **FAX:** (414) 918-6076
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/30/2016

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

Facility Information: **Facility ID:** 103048

VICTORY HOME HEALTH CARE
5326 CHESTNUT VIEW DRIVE
SAN ANTONIO **TX** 78247
Phone (210) 462-7818 **Fax** (210) 545-7497

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

MARIA J ARAUJO
15739 KNOLLCLIFF
SAN ANTONIO TX 78247
PHONE: (210) 908-2063 **FAX:** (210) 545-7497
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/21/2016

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

Facility Information: **Facility ID:** 030245

WOOD LIVING CENTER OF SAN ANTONIO #11
127 CLOUDHAVEN
SAN ANTONIO **TX** 78209
Phone (210) 804-2377 **Fax** (210) 804-2385

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

WOOD CARE CENTERS INC
3610 BARNETT RD
WICHITA FALLS TX 76310
PHONE: (940) 767-0463 **FAX:** (940) 767-0466
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/23/2018

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

Facility Information: **Facility ID:** 100002

WOODCREST HOME FOR SENIOR CITIZENS
11307 FOREST SHOWER
SAN ANTONIO **TX** 78233
Phone (210) 599-3053 **Fax** (210) 627-6322

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

VILMA D STOLZE
7728 FOREST STREAM
SAN ANTONIO TX 78233
PHONE: (210) 627-6322 **FAX:** (210) 627-6322
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/27/2017

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

Facility Information: **Facility ID:** 105889

ALPHA SENIOR CARE HOME
96 WINDMILL ROAD
SHAVANO PARK **TX** 78231
Phone (210) 290-9131 **Fax** (210) 290-9131

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

Owner Information

ALPHA SENIOR HOME CARE
96 WINDMILL ROAD
SHAVANO PARK TX 78231
PHONE: (210) 290-9131 **FAX:** (210) 290-9131
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/28/2018

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

Facility Information: **Facility ID:** 106436

SHAVANO PARK SENIOR LIVING
3220 N. LOOP 1604 W
SHAVANO PARK **TX** 78231
Phone (210) 492-4040 **Fax**

TOTAL Lic Capacity: 90 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 44 **TITLE19:** 0
PRIVATE Beds: 90 **TITLE 18/19:** 0

Owner Information

MERIDIAN SHAVANO PARK AL/ALZ OE, LP
3220 W LOOP 1604
SAN ANTONIO TX 78251
PHONE: (214) 651-4000 **FAX:** (214) 651-4001
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/27/2018

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

Facility Information: **Facility ID:** 105124

MENTIS NEURO HEALTH
6849 CRESTWAY DR STE B
WINDCREST **TX** 78239
Phone (210) 599-4400 **Fax** (210) 599-1046

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

MENTIS NEURO SAN ANTONIO LLC
6849 CRESTWAY DR ,STE B
SAN ANTONIO TX 78239
PHONE: (210) 599-4400 **FAX:** (210) 599-1046
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/15/2017

County **BLANCO** Reg Svcs: TEAM W Region 07 - AUSTIN

Facility Information: **Facility ID:** 000522

HENRY HOUSE ASSISTED LIVING LC
515 3RD ST
BLANCO **TX** 78606
Phone (830) 833-4674 **Fax** (830) 833-4684

TOTAL Lic Capacity: 42 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 42 **TITLE 18/19:** 0

Owner Information

HENRY HOUSE ASSISTED LIVING LC
515 THIRD ST
BLANCO TX 78606
PHONE: (830) 833-4674 **FAX:** (830) 833-5684
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/20/2016

County **BOSQUE** Reg Svcs: WACO Region 07 - AUSTIN

Facility Information: **Facility ID:** 103643

COLLEGE HILL ASSISTED LIVING
1700 W 9TH ST
CLIFTON **TX** 76634
Phone (254) 675-8637 **Fax** (254) 675-3044

TOTAL Lic Capacity: 32 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 32 **TITLE 18/19:** 0

Owner Information

LUTHERAN SUNSET MINISTRIES
PO BOX 71
CLIFTON TX 76634
PHONE: (254) 675-8637 **FAX:** (254) 675-3044
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/30/2016

County **BOWIE** Reg Svcs: TYLER NW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 000759

BROOKDALE TEXARKANA
4204 MOORES LN
TEXARKANA **TX** 75503
Phone (903) 838-3562 **Fax** (903) 832-8787

TOTAL Lic Capacity: 50 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 50 **TITLE 18/19:** 0

Owner Information

BROOKDALE SENIOR LIVING COMMUNITIES INC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214
PHONE: (414) 918-5441 **FAX:** (414) 918-6076
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/01/2017

County **BOWIE** Reg Svcs: TYLER NW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 000326

CORNERSTONE RETIREMENT COMMUNITY PERSONAL CARE UNIT
4100 MOORES LN
TEXARKANA **TX** 75503
Phone (903) 832-5515 **Fax** (903) 832-5553

TOTAL Lic Capacity: 66 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 36 **TITLE19:** 0
PRIVATE Beds: 66 **TITLE 18/19:** 0

Owner Information

METHODIST RETIREMENT COMMUNITIES
1440 LAKE FRONT CIRCLE ,STE 110
THE WOODLANDS TX 77380
PHONE: **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/24/2017

County **BOWIE** Reg Svcs: TYLER NW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 030066

MSHC COLONIAL LODGE OF TEXARKANA LLC
5001 N ELIZABETH
TEXARKANA **TX** 75503
Phone (903) 792-0838 **Fax** (903) 793-4562

TOTAL Lic Capacity: 45 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 45 **TITLE 18/19:** 0

Owner Information

MSHC COLONIAL LODGE OF TEXARKANA LLC
4939 ELIZABETH
TEXARKANA TX 75503
PHONE: (903) 832-0429 **FAX:** (903) 255-0385
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/01/2017

County **BOWIE** Reg Svcs: TYLER NW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 000937

MSHC THE OAKS ASSISTED LIVING LLC
4317 MCKNIGHT RD
TEXARKANA **TX** 75503
Phone (903) 838-5001 **Fax** (903) 838-4898

TOTAL Lic Capacity: 80 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 80 **TITLE 18/19:** 0

Owner Information

MSHC THE OAKS ASSISTED LIVING LLC
4939 ELIZABETH
TEXARKANA TX 75503
PHONE: (903) 832-0429 **FAX:** (903) 255-0385
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/01/2017

County **BOWIE** Reg Svcs: TYLER NW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 030351

MSHC WHISPERING PINES OF TEXARKANA, LLC
5002 N ELIZABETH
TEXARKANA **TX** 75503
Phone (903) 792-8014 **Fax** (903) 792-6689

TOTAL Lic Capacity: 55 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 55 **TITLE 18/19:** 0

Owner Information

MSHC WHISPERING PINES OF TEXARKANA, LLC
4939 ELIZABETH
TEXARKANA TX 75503
PHONE: (903) 832-0429 **FAX:** (903) 255-0385
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/01/2017

County **BOWIE** Reg Svcs: TYLER NW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 104639

THE MAGNOLIA ALZHEIMER'S ASSISTED LIVING
4205 RICHMOND MEADOWS
TEXARKANA **TX** 75503
Phone (903) 838-7319 **Fax** (903) 838-0494

TOTAL Lic Capacity: 40 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 40 **TITLE19:** 0
PRIVATE Beds: 40 **TITLE 18/19:** 0

Owner Information

OLMM PROPERTIES LLC
4205 RICHARD MEADOW
TEXARKANA TX 75503
PHONE: (903) 838-7319 **FAX:** (903) 838-0494
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/13/2017

County **BOWIE** Reg Svcs: TYLER NW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 106200

THE RETREAT AT KENWOOD
210 N. KENWOOD
TEXARKANA **TX** 75501
Phone (903) 336-6134 **Fax** (903) 336-6135

TOTAL Lic Capacity: 80 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 80 **TITLE 18/19:** 0

Owner Information

THE RETREAT AT KENWOOD INC
210 N KENWOOD
TEXARKANA TX 75501
PHONE: (903) 336-6134 **FAX:** (903) 336-6135
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/04/2017

County **BRAZORIA** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 104341

DESIRE TO LIVE
2220 CR 144
ALVIN **TX** 77511
Phone (832) 512-3863 **Fax** (281) 331-0453

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

DESIRE TO LIVE
2220 CR 144
ALVIN TX 77511
PHONE: (832) 512-3863 **FAX:** (281) 331-0453
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/26/2017

County **BRAZORIA** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 050756

EVENING STAR PERSONAL CARE HOME
2960 ROWAN BURTON RD
ALVIN **TX** 77511
Phone (281) 331-6753 **Fax** (281) 585-3914

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

EVENING STAR PERSONAL CARE HOME DBA
PO BOX 1726
ALVIN TX 77512-1726
PHONE: (281) 331-6753 **FAX:** (281) 585-3914
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/25/2015

County **BRAZORIA** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102809

KOZY KORNER ASSISTED LIVING
1501 PARKWAY
ALVIN **TX** 77511
Phone (281) 331-1289 **Fax** (281) 585-3914

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

Owner Information

VSSL INVESTMENT INC
1501 PARKWAY
ALVIN TX 77511
PHONE: (832) 890-9005 **FAX:** (281) 585-8914

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/28/2017

County **BRAZORIA** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105031

LABORING WITH LOVED ONES PERSONAL CARE HOME
6911 COUNTY RD 171
ALVIN **TX** 77511
Phone (281) 581-9991 **Fax** (281) 581-2045

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

ALVIN LABOR OF LOVE MINISTRIES
240 E HOUSE ST
ALVIN TX 77511
PHONE: (281) 585-9109 **FAX:** (281) 581-2045

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/20/2018

County **BRAZORIA** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105654

COUNTRY VILLAGE CARE INC
721 W.MULBERRY
ANGLETON **TX** 77515
Phone (979) 849-8281 **Fax** (979) 849-0249

TOTAL Lic Capacity: 32 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 32 **TITLE19:** 0
PRIVATE Beds: 32 **TITLE 18/19:** 0

Owner Information

COUNTRY VILLAGE CARE INC
721 W MULBERRY
ANGLETON TX 77515
PHONE: (979) 849-8281 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/13/2018

County **BRAZORIA** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000918

COUNTRY VILLAGE CARE INC P C
721 W MULBERRY
ANGLETON **TX** 77515
Phone (979) 849-8281 **Fax** (979) 849-0249

TOTAL Lic Capacity: 38 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 38 **TITLE 18/19:** 0

Owner Information

COUNTRY VILLAGE CARE INC
721 W MULBERRY
ANGLETON TX 77515
PHONE: (979) 849-8281 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/01/2017

County **BRAZORIA** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 106477

K'S PLACE PERSONAL CARE HOME, LLC
25806 CR 46
ANGLETON **TX** 77515
Phone (979) 922-1800 **Fax** (979) 922-1800

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

K'S PLACE PERSONAL CARE HOME, LLC
25806 CR 46
ANGLETON TX 77515
PHONE: (979) 922-1800 **FAX:** (979) 922-1800

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/03/2018

County **BRAZORIA** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000712

WHITE'S COTTAGE CENTER
332 MARSHALL ALLEY
ANGLETON **TX** 77515
Phone (979) 849-4744 **Fax** (979) 849-3506

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

WHITE'S COTTAGE CENTER
332 MARSHALL ALLEY
ANGLETON TX 77515
PHONE: (979) 849-4744 **FAX:** (979) 849-3506

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/15/2017

County **BRAZORIA** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105675

CARRIAGE INN-LAKE JACKSON
130 LAKE ROAD
LAKE JACKSON **TX** 77566
Phone (979) 285-0300 **Fax** (979) 285-0338

TOTAL Lic Capacity: 50 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 32 **TITLE19:** 0
PRIVATE Beds: 50 **TITLE 18/19:** 0

Owner Information

BRIDGEWOOD LAKE JACKSON LLC
6363 WOODWAY ,SUITE 410
HOUSTON TX 77057
PHONE: (713) 623-6767 **FAX:** (713) 623-6772
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/05/2016

County **BRAZORIA** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030051

ELMCROFT OF LAKE JACKSON
206 OAK DR S
LAKE JACKSON **TX** 77566
Phone (979) 297-5577 **Fax** (979) 297-5623

TOTAL Lic Capacity: 108 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 108 **TITLE 18/19:** 0

Owner Information

LAKE JACKSON OPERATIONS LLC
700 N HURSTBOURNE PKWY ,STE 200
LOUISVILLE KY 40222
PHONE: (502) 753-6004 **FAX:** (502) 753-6104
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/01/2017

County **BRAZORIA** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000980

REVERED TEXAN HEARTH & HOME LLC
1005 SYCAMORE
LAKE JACKSON **TX** 77566
Phone (979) 266-9982 **Fax** (979) 529-9565

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

Owner Information

REVERED TEXAN HEARTH & HOME LLC
1005 SYCAMORE
LAKE JACKSON TX 77566
PHONE: (979) 429-1691 **FAX:** (979) 266-9982
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/18/2016

County **BRAZORIA** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102118

MANVEL ASSISTED LIVING FACILITY
8903 HARVEST
MANVEL **TX** 77578
Phone (281) 756-8097 **Fax** (713) 733-3695

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

BRINGING LOVE BACK INTO THE COMMUNITY LLC
P O BOX ,330344
HOUSTON TX 77233
PHONE: (713) 240-1567 **FAX:** (713) 733-3695
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/04/2016

County **BRAZORIA** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105865

ORCHARD PARK AT SOUTHFORK
3151 SOUTHFORK PARKWAY
MANVEL **TX** 77578
Phone (713) 960-4727 **Fax** (972) 385-0029

TOTAL Lic Capacity: 136 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 75 **TITLE19:** 0
PRIVATE Beds: 136 **TITLE 18/19:** 0

Owner Information

SOUTHFORK SENIOR CARE LLC
1000 LEGION PLACE ,SUITE 1750
ORLANDO FL 32801
PHONE: (407) 999-2400 **FAX:** (407) 999-7759
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/02/2017

County **BRAZORIA** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105398

SIX PALMS
5409 CROIX RD
MANVEL **TX** 77578
Phone (832) 713-7256 **Fax** (281) 369-3635

TOTAL Lic Capacity: 15 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 15 **TITLE 18/19:** 0

Owner Information

SIX PALMS AT DAMOOR ESTATES LLC
5409 CROIX RD
MANVEL TX 77578
PHONE: (281) 543-9458 **FAX:** (281) 369-3635
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/29/2017

County **BRAZORIA** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 104029

AUTUMN GROVE-PEARLAND
3403 SOUTHFORK PARKWAY
PEARLAND **TX** 77578

Phone (281) 489-1505 **Fax** (281) 489-3380

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

GLEN HOPE HARBOR INC
101 FIREBIRD COVE
LAKEWAY TX 78734

PHONE: (469) 371-0445 **FAX:** (512) 761-3548

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/26/2017

County **BRAZORIA** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 104926

AUTUMN LEAVES OF PEARLAND
11200 DISCOVERY BAY DRIVE
PEARLAND **TX** 77584

Phone (713) 436-3941 **Fax** (713) 436-4159

TOTAL Lic Capacity: 45 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 45 **TITLE19:** 0
PRIVATE Beds: 45 **TITLE 18/19:** 0

Owner Information

PEARLAND MEMORY CARE LLC
545 E JOHN CARPENTER FREEWAY #500
IRVING TX 75062

PHONE: (214) 845-4500 **FAX:** (214) 845-4501

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/15/2017

County **BRAZORIA** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030110

BROOKDALE PEARLAND
2121 SCARSDALE BLVD
PEARLAND **TX** 77581

Phone (281) 464-8740 **Fax** (281) 464-8739

TOTAL Lic Capacity: 84 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 84 **TITLE 18/19:** 0

Owner Information

ARC PEARLAND L P
111 WESTWOOD PL ,STE 400
BRENTWOOD TN 37027

PHONE: (615) 221-2250 **FAX:** (615) 221-2280

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/25/2017

County **BRAZORIA** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030227

BROOKDALE PEARLAND
2121 SCARSDALE BLVD
PEARLAND **TX** 77581

Phone (281) 464-8740 **Fax** (281) 464-8739

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

Owner Information

ARC PEARLAND L P
111 WESTWOOD PL ,STE 400
BRENTWOOD TN 37027

PHONE: (615) 221-2250 **FAX:** (615) 221-2280

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/25/2018

County **BRAZORIA** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103887

COLONIAL OAKS AT PEARLAND
2940 CULLEN PARKWAY
PEARLAND **TX** 77584

Phone (281) 997-2500 **Fax** (281) 997-1080

TOTAL Lic Capacity: 108 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 20 **TITLE19:** 0
PRIVATE Beds: 108 **TITLE 18/19:** 0

Owner Information

PEARLAND ASSISTED LIVING LP
510 BERING DR ,STE 210
HOUSTON TX 77057

PHONE: (713) 780-8100 **FAX:** (713) 780-8105

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/10/2017

County **BRAZORIA** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105090

LAKEHOUSE ON DIXIE
3504 DIXIE FARM ROAD
PEARLAND **TX** 77581

Phone (281) 992-2650 **Fax**

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

LAKEHOUSE ON DIXIE INC
3504 DIXIE FARM RD
PASADENA TX 77581

PHONE: (281) 723-3861 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/21/2016

County **BRAZORIA** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105584

LIGHT HEART MEMORY CARE - PEARLAND
6923 AMIE LN
PEARLAND **TX** 77584
Phone (281) 282-0770 **Fax** (281) 280-8048

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

ALZHEIMER'S RESIDENTIAL MANAGEMENT INC
1615 BOWLINE
HOUSTON TX 77062
PHONE: (281) 282-0770 **FAX:** (281) 280-8048
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/17/2017

County **BRAZORIA** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 100756

TRINITY OAKS OF PEARLAND
3033 PEARLAND PKWY
PEARLAND **TX** 77581
Phone (281) 997-8880 **Fax** (281) 997-8497

TOTAL Lic Capacity: 120 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 120 **TITLE 18/19:** 0

Owner Information

CHG SENIOR LIVING OF PEARLAND LLC
227 E EDGEWOOD DRIVE
FRIENDSWOOD TX 77546
PHONE: (281) 482-9700 **FAX:** (281) 482-9705
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/27/2018

County **BRAZORIA** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102247

THE FOUNTAINS
1101 E 2ND ST
SWEENY **TX** 77480
Phone (979) 548-1524 **Fax** (979) 548-1526

TOTAL Lic Capacity: 46 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 46 **TITLE 18/19:** 0

Owner Information

SWEENY HOSPITAL DISTRICT
305 NORTH MCKINNEY
SWEENY TX 77480
PHONE: (979) 548-1598 **FAX:** (979) 548-1595
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/07/2017

County **BRAZOS** Reg Svcs: BRENHAM Region 07 - AUSTIN

Facility Information: **Facility ID:** 000495

BROADMOOR PLACE
2601 E VILLA MARIA
BRYAN **TX** 77802
Phone (979) 823-4446 **Fax** (979) 731-8254

TOTAL Lic Capacity: 36 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 36 **TITLE 18/19:** 0

Owner Information

MILLICAN AID OPCO LLC
330 N WABASH AVE ,STE 3700
CHICAGO IL 60611
PHONE: **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/11/2017

County **BRAZOS** Reg Svcs: BRENHAM Region 07 - AUSTIN

Facility Information: **Facility ID:** 105402

CARRIAGE INN-BRYAN
4235 BOONVILLE ROAD
BRYAN **TX** 77802
Phone (936) 295-0600 **Fax** (936) 295-5822

TOTAL Lic Capacity: 41 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 15 **TITLE19:** 0
PRIVATE Beds: 41 **TITLE 18/19:** 0

Owner Information

BRIDGEWOOD BRYAN LLC
6363 WOODWAY ,SUITE 410
HOUSTON TX 77057
PHONE: (281) 996-0101 **FAX:** (281) 996-1141
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/17/2017

County **BRAZOS** Reg Svcs: BRENHAM Region 07 - AUSTIN

Facility Information: **Facility ID:** 104850

CRESTVIEW RETIREMENT COMMUNITY
2505 E VILLA MARIA RD
BRYAN **TX** 77802
Phone (979) 776-4778 **Fax** (979) 774-7579

TOTAL Lic Capacity: 72 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 18 **TITLE19:** 0
PRIVATE Beds: 72 **TITLE 18/19:** 0

Owner Information

MRC CRESTVIEW
1440 LAKE FRONT CIR ,STE 110
THE WOODLANDS TX 77380
PHONE: (281) 363-2600 **FAX:** (281) 292-6360
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/04/2017

County **BRAZOS** Reg Svcs: BRENHAM Region 07 - AUSTIN

Facility Information: **Facility ID:** 000946

DANSBY HOUSE INC
703 DEAN
BRYAN **TX** 77803
Phone (979) 823-1030 **Fax** (979) 823-1030

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

DANSBY HOUSE INC
PO BOX 1773
BRYAN TX 77806
PHONE: (979) 823-1030 **FAX:** (979) 823-1030
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/14/2017

County **BRAZOS** Reg Svcs: BRENHAM Region 07 - AUSTIN

Facility Information: **Facility ID:** 102654

HUDSON CREEK ALZHEIMER'S SPECIAL CARE CENTER
3850 COPPERCREST DR
BRYAN **TX** 77802
Phone (979) 774-0700 **Fax** (979) 774-7568

TOTAL Lic Capacity: 66 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 66 **TITLE19:** 0
PRIVATE Beds: 66 **TITLE 18/19:** 0

Owner Information

HUDSON CREEK TRS, LLC
189 S ORANGE AVENUE ,SUITE 1700
ORLANDO FL 32801
PHONE: (407) 999-2438 **FAX:** (407) 999-5210
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/28/2016

County **BRAZOS** Reg Svcs: BRENHAM Region 07 - AUSTIN

Facility Information: **Facility ID:** 104683

ISLE AT WATERCREST-BRYAN
4091 EASTCHESTER DRIVE
BRYAN **TX** 77802
Phone (979) 774-3401 **Fax** (979) 774-3021

TOTAL Lic Capacity: 75 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 75 **TITLE 18/19:** 0

Owner Information

CHP ISLE AT WATERCREST-BRYAN TX TENANT CORP
4091 EASTCHESTER DRIVE
BRYAN TX 77802
PHONE: (979) 774-3401 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/30/2018

County **BRAZOS** Reg Svcs: BRENHAM Region 07 - AUSTIN

Facility Information: **Facility ID:** 000903

PARK PLACE
8733 N HWY 6
BRYAN **TX** 77807
Phone (979) 778-3003 **Fax** (979) 778-3096

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

HEALTH ENRICHMENT AND LONGEVITY INSTITUTE INC
8733 N HWY 6
BRYAN TX 77807
PHONE: (979) 778-3003 **FAX:** (979) 778-3096
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/17/2016

County **BRAZOS** Reg Svcs: BRENHAM Region 07 - AUSTIN

Facility Information: **Facility ID:** 030358

ST JOSEPH MANOR
2333 MANOR DR
BRYAN **TX** 77802
Phone (979) 821-7330 **Fax** (979) 821-7301

TOTAL Lic Capacity: 44 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 44 **TITLE 18/19:** 0

Owner Information

ST JOSEPH MANOR
2333 MANOR DR
BRYAN TX 77802
PHONE: (979) 821-7330 **FAX:** (979) 821-7301
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/16/2017

County **BRAZOS** Reg Svcs: BRENHAM Region 07 - AUSTIN

Facility Information: **Facility ID:** 000621

BLUEBONNET PLACE
3601 VICTORIA AVE
COLLEGE STATION **TX** 77845
Phone (979) 693-9699 **Fax** (979) 694-2850

TOTAL Lic Capacity: 48 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 48 **TITLE 18/19:** 0

Owner Information

BLUEBONNET AID OPCO LLC
330 N WABASH ,STE 3700
CHICAGO IL 60611
PHONE: (312) 725-7000 **FAX:** (312) 332-5300
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/11/2017

County **BRAZOS** Reg Svcs: BRENHAM Region 07 - AUSTIN

Facility Information: **Facility ID:** 000727

THE WATERFORD AT COLLEGE STATION
1103 ROCK PRAIRIE RD
COLLEGE STATION **TX** 77845-8343

Phone (979) 694-6496 **Fax** (888) 753-6262

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 27 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

CSL CE COLLEGE STATION, LLC
14160 DALLAS PKWY ,STE 300
DALLAS TX 75254

PHONE: (972) 305-4776 **FAX:** (512) 391-4776

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/30/2018

County **BROWN** Reg Svcs: ABILENE GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 000312

REDSTONE PARK
2410 SONGBIRD CIR
BROWNWOOD **TX** 76801

Phone (325) 643-9056 **Fax** (325) 643-9055

TOTAL Lic Capacity: 70 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 70 **TITLE 18/19:** 0

Owner Information

LIVE OAKS HOLDINGS LLC
1230 ROSECRANS AVE ,STE 405
MANHATTAN BEACH CA 90266

PHONE: (310) 725-0120 **FAX:** (310) 469-0114

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/02/2018

County **BROWN** Reg Svcs: ABILENE GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 104032

THE CHATFIELD ASSISTED LIVING
1605 CALVERT ROAD
BROWNWOOD **TX** 76804

Phone (325) 200-4904 **Fax** (325) 200-4905

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

BROWNWOOD I ENTERPRISES, LLC
1701 RIVER RUN SUITE 304
FORT WORTH TX 76107

PHONE: (817) 348-8841 **FAX:** (817) 348-0466

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/01/2016

County **BROWN** Reg Svcs: ABILENE GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 030226

ALDERSGATE ENRICHMENT CENTER INC
5001 HWY 183/84 E
EARLY **TX** 76802

Phone (325) 646-5608 **Fax** (325) 643-6333

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

ALDERSGATE ENRICHMENT CENTER INC
5001 HIGHWAY 183/84 EAST
EARLY TX 76802

PHONE: (325) 646-5608 **FAX:** (325) 643-6333

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/15/2017

County **BROWN** Reg Svcs: ABILENE GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 102913

ALDERSGATE ENRICHMENT CENTER INC
5001 HWY 183/84 E
EARLY **TX** 76802

Phone (325) 646-5608 **Fax** (325) 643-6333

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

ALDERSGATE ENRICHMENT CENTER INC
5001 HIGHWAY 183/84 EAST
EARLY TX 76802

PHONE: (325) 646-5608 **FAX:** (325) 643-6333

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/18/2018

County **BROWN** Reg Svcs: ABILENE GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 000354

ROLLING OAKS PERSONAL CARE INC
5151 CR 292
EARLY **TX** 76802

Phone (325) 646-4771 **Fax** (325) 646-6971

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

VICKIE E. RICE
13601 FM 1176
SANTA ANNA TX 76878

PHONE: (325) 348-3047 **FAX:** (325) 646-6971

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/01/2017

County **BROWN** Reg Svcs: ABILENE GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 050462

ROLLING OAKS PERSONAL CARE WEST INC
5151 CR 292
EARLY **TX** 76802
Phone (325) 646-1172 **Fax** (325) 646-6971

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

VICKIE E. RICE
13601 FM 1176
SANTA ANNA TX 76878
PHONE: (325) 348-3047 **FAX:** (325) 646-6971
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/01/2017

County **BURLESON** Reg Svcs: BRENHAM Region 07 - AUSTIN

Facility Information: **Facility ID:** 103836

COPPERAS HOLLOW NURSING & REHABILITATION CENTER
343 COUNTRY CLUB DR
CALDWELL **TX** 77836
Phone (979) 567-6400 **Fax** (979) 567-6434

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

COPPERAS AL OPERATOR LLC
6203 TURNER WAY
DALLAS TX 75230
PHONE: (214) 396-3462 **FAX:** (214) 396-3482
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/01/2017

County **BURNET** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 101942

COUNTRY OAKS AT HAMILTON CREEK
407 W JACKSON ST
BURNET **TX** 78611
Phone (512) 756-4724 **Fax** (512) 756-2646

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

COUNTRY OAKS BURNET LLC
407 W JACKSON ST
BURNET TX 78611
PHONE: (512) 756-4724 **FAX:** (512) 756-2646
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/23/2017

County **BURNET** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 100800

PAFFORD PLACE
615 CR 340 A
BURNET **TX** 78611
Phone (512) 756-7854 **Fax** (512) 756-8088

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

DMKF, INC
615 CR 340-A
BURNET TX 78611
PHONE: (512) 756-7854 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/10/2016

County **BURNET** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 100058

800 CLAREMONT
800 CLAREMONT
MARBLE FALLS **TX** 78654
Phone (830) 693-6446 **Fax** (830) 693-8249

TOTAL Lic Capacity: 35 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 35 **TITLE 18/19:** 0

Owner Information

MARBLE FALLS ASSISTED LIVING LLC
800 CLAREMONT
MARBLE FALLS TX 78654
PHONE: (830) 693-6446 **FAX:** (830) 693-8249
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/31/2016

County **BURNET** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 105513

ARBOR HOUSE OF MARBLE FALLS
1801 KING ROAD
MARBLE FALLS **TX** 78654
Phone (830) 613-3260 **Fax**

TOTAL Lic Capacity: 52 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 18 **TITLE19:** 0
PRIVATE Beds: 52 **TITLE 18/19:** 0

Owner Information

MARBLE FALLS TX ARBOR HOUSE LP
1801 KING ROAD
MARBLE FALLS TX 78654
PHONE: (405) 801-2879 **FAX:** (405) 360-3301
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/18/2017

County **BURNET** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 101238

GATEWAY GARDENS
605 GATEWAY CENTRAL
MARBLE FALLS **TX** 78654

Phone (830) 693-1903 **Fax** (830) 693-1990

TOTAL Lic Capacity: 52 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 52 **TITLE 18/19:** 0

Owner Information

SNH SE TENANT TRS INC
TWO NEWTON PLACE ,255 WASHINGTON ST STE 300
NEWTON MA 02458

PHONE: (617) 796-8350 **FAX:** (617) 796-8349

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/19/2016

County **BURNET** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 000875

GATEWAY VILLA
601 STEVE HAWKINS PKWY
MARBLE FALLS **TX** 78654

Phone (830) 693-1800 **Fax** (830) 693-2564

TOTAL Lic Capacity: 32 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 32 **TITLE 18/19:** 0

Owner Information

SNH SE TENANT TRS INC
TWO NEWTON PLACE ,255 WASHINGTON ST STE 300
NEWTON MA 02458

PHONE: (617) 796-8350 **FAX:** (617) 796-8349

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/19/2016

County **CALDWELL** Reg Svcs: TEAM Y Region 07 - AUSTIN

Facility Information: **Facility ID:** 103391

1017 BOIS D'ARC
1017 BOIS D'ARC ST
LOCKHART **TX** 78644

Phone (512) 620-0900 **Fax**

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

1017 BOIS D'ARC, LLC
1017 BOIS D'ARC
LOCKHART TX 78644

PHONE: (512) 620-0900 **FAX:** (210) 826-8548

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/06/2018

County **CALDWELL** Reg Svcs: TEAM Y Region 07 - AUSTIN

Facility Information: **Facility ID:** 000767

GOLDEN AGE HOME PERSONAL CARE
1505 S MAIN ST
LOCKHART **TX** 78644

Phone (512) 398-2421 **Fax** (512) 398-5591

TOTAL Lic Capacity: 44 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 44 **TITLE 18/19:** 0

Owner Information

GOLDEN AGE HOME
1505 S MAIN ST
LOCKHART TX 78644

PHONE: (512) 398-2421 **FAX:** (512) 398-5591

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/19/2018

County **CALDWELL** Reg Svcs: TEAM W Region 07 - AUSTIN

Facility Information: **Facility ID:** 101807

LIVEOAK LIVING COMMUNITY
7343 FM 621
MARTINDALE **TX** 78655

Phone (512) 357-1510 **Fax** (512) 357-0264

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

THERAPEUTIC COMMUNITIES LLC
PO BOX 705
SAN MARCOS TX 78667

PHONE: (512) 567-1704 **FAX:** (512) 357-4025

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 06/30/2016

County **CALDWELL** Reg Svcs: TEAM W Region 07 - AUSTIN

Facility Information: **Facility ID:** 000763

RESCARE PREMIER ROCA VISTA
320 MILL RD
MAXWELL **TX** 78656

Phone (512) 357-6022 **Fax** (512) 357-2523

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

TANGRAM REHABILITATION NETWORK INC
9901 LINN STATION ROAD
LOUISVILLE KY 40223-3808

PHONE: (512) 396-1200 **FAX:** (512) 396-2024

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/15/2017

County **CALDWELL** Reg Svcs: TEAM W Region 07 - AUSTIN

Facility Information: **Facility ID:** 000435

RESCARE PREMIER SIERRA VERDE
2385 FM 1984 AT REEDVILLE
MAXWELL **TX** 78656
Phone (512) 357-6033 **Fax** (512) 357-2902

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

TANGRAM REHABILITATION NETWORK INC
9901 LINN STATION ROAD
LOUISVILLE KY 40223-3808
PHONE: (512) 396-1200 **FAX:** (512) 396-2024
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/15/2017

County **CALHOUN** Reg Svcs: TEAM V Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 102951

TRINITY SHORES OF PORT LAVACA
201 TRINITY SHORES DR
PORT LAVACA **TX** 77979
Phone (361) 552-2333 **Fax** (361) 552-6103

TOTAL Lic Capacity: 100 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 100 **TITLE 18/19:** 0

Owner Information

CHG SENIOR LIVING OF PORT LAVACA, LLC
227 E EDGEWOOD DR
FRIENDSWOOD TX 77546
PHONE: (281) 482-9700 **FAX:** (281) 482-9705
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/27/2018

County **CAMERON** Reg Svcs: CORPUS CHRISTI 12 Region 11 - CORPUS CHRISTI

Facility Information: **Facility ID:** 103703

#1 MEDFORD PLACE
715 N MEDFORD AVE
BROWNSVILLE **TX** 78521
Phone (956) 233-1202 **Fax** (956) 233-1175

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

ELITE PHC CORPORATION
220 E OCEAN BLVD
LOS FRESNOS TX 78566
PHONE: (956) 233-1202 **FAX:** (956) 233-1175
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/20/2016

County **CAMERON** Reg Svcs: CORPUS CHRISTI 12 Region 11 - CORPUS CHRISTI

Facility Information: **Facility ID:** 103704

#2 MEDFORD PLACE
715 N MEDFORD AVE
BROWNSVILLE **TX** 78521
Phone (956) 831-6600 **Fax** (956) 838-6406

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

ELITE PHC CORPORATION
220 E OCEAN BLVD
LOS FRESNOS TX 78566
PHONE: (956) 233-1202 **FAX:** (956) 233-1175
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/20/2017

County **CAMERON** Reg Svcs: CORPUS CHRISTI 12 Region 11 - CORPUS CHRISTI

Facility Information: **Facility ID:** 030317

ROYAL VILLA
1184 BOCA CHICA
BROWNSVILLE **TX** 78520
Phone (956) 541-1282 **Fax** (956) 542-9166

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

ROSALINDA PARRA
1184 BOCA CHICA
BROWNSVILLE TX 78520
PHONE: (956) 541-1282 **FAX:** (956) 542-9166
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/18/2018

County **CAMERON** Reg Svcs: CORPUS CHRISTI 12 Region 11 - CORPUS CHRISTI

Facility Information: **Facility ID:** 000734

SPANISH MEADOWS
440 E RUBEN M TORRES BLVD
BROWNSVILLE **TX** 78520
Phone (956) 546-7378 **Fax** (956) 546-8562

TOTAL Lic Capacity: 94 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 94 **TITLE 18/19:** 0

Owner Information

EMPIRE SPANISH MEADOWS LTD
25009 OAKHURST DR.
SPRING TX 77386
PHONE: (281) 465-0636 **FAX:** (281) 465-0748
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/01/2016

County **CAMERON** Reg Svcs: CORPUS CHRISTI 12 Region 11 - CORPUS CHRISTI

Facility Information: **Facility ID:** 100341

ANGELCARE ACRES
27927 SOUTH PALM BLVD
HARLINGEN **TX** 78552

Phone (956) 357-3317 **Fax** (214) 212-6435

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

ANGELCARE HOMES LLC
27927 SOUTH PALM BLVD
HARLINGEN TX 78552

PHONE: (956) 357-3317 **FAX:** (214) 212-6435

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/01/2018

County **CAMERON** Reg Svcs: CORPUS CHRISTI 12 Region 11 - CORPUS CHRISTI

Facility Information: **Facility ID:** 101249

ANGELCARE HAVEN
2509 CLIFFORD DR
HARLINGEN **TX** 78550

Phone (956) 564-1473 **Fax** (956) 230-3311

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

ANGELCARE HOMES LLC
27927 SOUTH PALM BLVD
HARLINGEN TX 78552

PHONE: (956) 357-3317 **FAX:** (254) 212-6435

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/09/2018

County **CAMERON** Reg Svcs: CORPUS CHRISTI 12 Region 11 - CORPUS CHRISTI

Facility Information: **Facility ID:** 000721

GOLDEN PALMS RETIREMENT & HEALTH CENTER
2101 TREASURE HILLS BLVD
HARLINGEN **TX** 78550

Phone (956) 430-3100 **Fax** (956) 430-3175

TOTAL Lic Capacity: 51 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 51 **TITLE 18/19:** 0

Owner Information

GOLDEN PALMS OPERATING COMPANY LLC
5420 W PLANO PKWY
PLANO TX 75093

PHONE: (972) 931-3800 **FAX:** (972) 931-3801

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/01/2017

County **CAMERON** Reg Svcs: CORPUS CHRISTI 12 Region 11 - CORPUS CHRISTI

Facility Information: **Facility ID:** 000770

THE VILLA OF HARLINGEN
105 AL CONEWAY
HARLINGEN **TX** 78550

Phone (956) 425-7035 **Fax** (956) 425-6970

TOTAL Lic Capacity: 46 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 46 **TITLE 18/19:** 0

Owner Information

HARLINGEN VILLA LLC
105 AL CONEWAY
HARLINGEN TX 78550

PHONE: (956) 425-7035 **FAX:** (505) 797-9003

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/01/2018

County **CAMERON** Reg Svcs: CORPUS CHRISTI 12 Region 11 - CORPUS CHRISTI

Facility Information: **Facility ID:** 030052

VALLEY VIEW SENIOR LIVING
900 CAMELOT DR
HARLINGEN **TX** 78550

Phone (956) 226-0630 **Fax**

TOTAL Lic Capacity: 129 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 34 **TITLE19:** 0
PRIVATE Beds: 129 **TITLE 18/19:** 0

Owner Information

CSL HARLINGEN COURT, LLC
3973 WEST VICKERY BLVD. SUITE 101
FORT WORTH TX 76107

PHONE: (469) 387-3158 **FAX:** (817) 386-8324

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/01/2018

County **CAMERON** Reg Svcs: CORPUS CHRISTI 12 Region 11 - CORPUS CHRISTI

Facility Information: **Facility ID:** 101432

WOOD LIVING CENTER OF HARLINGEN 6
715 N AVE H
HARLINGEN **TX** 78550

Phone (956) 428-7012 **Fax** (956) 440-9242

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

WOOD CARE CENTERS INC
3610 BARNETT RD
WICHITA FALLS TX 76310

PHONE: (940) 767-0463 **FAX:** (940) 767-0466

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/20/2017

County **CAMERON** Reg Svcs: CORPUS CHRISTI 12 Region 11 - CORPUS CHRISTI

Facility Information: **Facility ID:** 102326

ASSISTED LIVING AT LAGUNA VISTA
925 SANTA ISABEL
LAGUNA VISTA **TX** 78578
Phone (956) 943-1779 **Fax** (956) 943-3391

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

ELITE PHC CORPORATION
220 E OCEAN BLVD
LOS FRESNOS TX 78566
PHONE: (956) 233-1202 **FAX:** (956) 233-1175
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 06/20/2017

County **CAMERON** Reg Svcs: CORPUS CHRISTI 12 Region 11 - CORPUS CHRISTI

Facility Information: **Facility ID:** 104513

BELLA VILLA ASSISTED LIVING
7385 OLD MILITARY RD
VILLA NUEVA **TX** 78520
Phone (956) 455-0501 **Fax** (956) 554-0553

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

KJDO HEALTHCARE INC
7385 OLD MILITARY RD
BROWNSVILLE TX 78520
PHONE: (956) 559-0553 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/14/2017

County **CAMP** Reg Svcs: TYLER NW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 102361

SOUTHERN WIND MANOR
618 QUITMAN ST
PITTSBURG **TX** 75686
Phone (903) 855-1555 **Fax** (903) 855-1585

TOTAL Lic Capacity: 50 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 50 **TITLE 18/19:** 0

Owner Information

JAMES WALLACE
PO BOX 970
PITTSBURG TX 75686
PHONE: (903) 856-1111 **FAX:** (903) 855-1585
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/19/2017

County **CASS** Reg Svcs: TYLER SE TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 030365

WESLEY HOUSE
1102 S WILLIAMS
ATLANTA **TX** 75551
Phone (903) 796-6300 **Fax** (903) 796-6325

TOTAL Lic Capacity: 50 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 50 **TITLE 18/19:** 0

Owner Information

WESLEY PARTNERS LTD
PO BOX 612
MOUNT VERNON TX 75457
PHONE: (903) 537-4116 **FAX:** (903) 270-6227
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/04/2016

County **CHEROKEE** Reg Svcs: TYLER SW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 000990

ANGELINA HOUSE
211 PHILIP ST
JACKSONVILLE **TX** 75766
Phone (903) 589-1105 **Fax** (903) 586-4811

TOTAL Lic Capacity: 48 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 48 **TITLE 18/19:** 0

Owner Information

VERITAS INCARE, LLC
6933 CRUMPLER BLVD ,STE A
OLIVE BRANCH MS 38654
PHONE: (662) 895-1801 **FAX:** (662) 895-1804
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/01/2017

County **CHEROKEE** Reg Svcs: TYLER SW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 104948

THE TRINITY ASSISTED LIVING OF JACKSONVILLE
131 ZIMMERMAN ST
JACKSONVILLE **TX** 75766
Phone (903) 284-6135 **Fax** (903) 284-6123

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

JACKSONVILLE I ENTERPRISES LLC
1701 RIVER RUN ,STE 304
FORT WORTH TX 76107
PHONE: (817) 348-8959 **FAX:** (817) 348-0466
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/01/2016

County **CHILDRESS** Reg Svcs: HIGH PLAINS GERI 1 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 000982

COTTAGE VILLAGE
204 FIFTH ST N E
CHILDRESS **TX** 79201
Phone (940) 937-2045 **Fax** (940) 937-2517

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

COTTAGE VILLAGE LIVING LLC
204 FIFTH ST NE
CHILDRESS TX 79201
PHONE: (940) 937-2045 **FAX:** (940) 937-2517
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/01/2018

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000525

AGAPE CARE HOME
19 GRAHAM LN
ALLEN **TX** 75002
Phone (972) 727-0688 **Fax** (817) 281-6717

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

Owner Information

BD ASSISTANT LIVING LLC
2712 HURSTVIEW DR
HURST TX 76054
PHONE: (214) 226-0989 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/01/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106236

BERTHA'S CARE HOME
713 ROLLING HILLS DR
ALLEN **TX** 75002
Phone (972) 521-2014 **Fax** (972) 521-2063

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

Owner Information

SOLAI ENTERPRISES LLC
PO BOX 867682
PLANO TX 75086-7682
PHONE: (972) 521-2014 **FAX:** (972) 521-2063
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/30/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104699

GRACIOUS CARE HOME-ALLEN
1521 YORKSHIRE DR
ALLEN **TX** 75002
Phone (972) 359-6960 **Fax** (972) 359-6970

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

QUISQUEYA ENTERPRISES LLC
1521 YORKSHIRE DRIVE
ALLEN TX 75002
PHONE: (972) 359-6960 **FAX:** (972) 359-6970
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/19/2016

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104406

GROOM SENIOR LIVING INC
304 WILLOW CREEK CIR
ALLEN **TX** 75002
Phone (214) 383-9077 **Fax** (214) 383-7594

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 14 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

GROOM SENIOR LIVING INC
100 ALLENTOWN PKWY ,STE 214
ALLEN TX 75002
PHONE: (214) 383-9077 **FAX:** (214) 383-7594
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/10/2016

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030385

LOVING CARE HOME
999 W FOREST GROVE
ALLEN **TX** 75002
Phone (972) 562-7172 **Fax** (972) 562-7172

TOTAL Lic Capacity: 15 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 15 **TITLE 18/19:** 0

Owner Information

ANIELA RUST
999 W FOREST GROVE RD
ALLEN TX 75002
PHONE: (972) 562-7172 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/12/2018

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103492

MUSTANG CREEK ESTATES (BUILDING 4)
716 CREEK VALLEY COURT
ALLEN **TX** 75002
Phone (972) 359-0200 **Fax** (469) 519-1042

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

Owner Information

CLERMONT AVENUE, LTD
720 CREEK VALLEY COURT
ALLEN TX 75002
PHONE: (469) 519-1042 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/21/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103493

MUSTANG CREEK ESTATES BLDG 3
714 CREEK VALLEY CT
ALLEN **TX** 75002
Phone (972) 359-0200 **Fax**

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

Owner Information

CLERMONT AVENUE, LTD
720 CREEK VALLEY COURT
ALLEN TX 75002
PHONE: (469) 519-1042 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/03/2016

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102185

MUSTANG CREEK ESTATES RESIDENTIAL ASSISTED LIVING - BLDG 1
710 CREEK VALLEY COURT
ALLEN **TX** 75002
Phone (972) 359-0200 **Fax** (469) 519-1042

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

Owner Information

CLERMONT AVENUE, LTD
720 CREEK VALLEY COURT
ALLEN TX 75002
PHONE: (469) 519-1042 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/06/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102182

MUSTANG CREEK ESTATES RESIDENTIAL ASSISTED LIVING - BLDG 6
720 CREEK VALLEY COURT
ALLEN **TX** 75002
Phone (972) 359-0200 **Fax** (469) 519-1042

TOTAL Lic Capacity: 26 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 26 **TITLE 18/19:** 0

Owner Information

CLERMONT AVENUE, LTD
720 CREEK VALLEY COURT
ALLEN TX 75002
PHONE: (469) 519-1042 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/20/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102183

MUSTANG CREEK ESTATES RESIDENTIAL ASSISTED LIVING - BLDG. 2
712 CREEK VALLEY COURT
ALLEN **TX** 75002
Phone (972) 359-0200 **Fax** (214) 383-0661

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

Owner Information

CLERMONT AVENUE, LTD
720 CREEK VALLEY COURT
ALLEN TX 75002
PHONE: (469) 519-1042 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/18/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106350

TEXAS STAR ASSISTED LIVING
650 S GREENVILLE AVENUE
ALLEN **TX** 75002
Phone (469) 552-3333 **Fax**

TOTAL Lic Capacity: 111 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 23 **TITLE19:** 0
PRIVATE Beds: 111 **TITLE 18/19:** 0

Owner Information

TEXAS STAR ASSISTED LIVING LLC
650 S GREENVILLE AVE
ALLEN TX 75022
PHONE: (469) 552-3333 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/01/2018

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106459

THE HERITAGE AT TWIN CREEKS
920 STOCKTON DRIVE
ALLEN **TX** 75013
Phone (214) 509-9005 **Fax**

TOTAL Lic Capacity: 113 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 46 **TITLE19:** 0
PRIVATE Beds: 113 **TITLE 18/19:** 0

Owner Information

TWIN CREEKS AL PARTNERS, LP
6370 LBJ FREEWAY ,SUITE 276
DALLAS TX 75240
PHONE: (469) 619-5418 **FAX:** (972) 385-0029
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/11/2018

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105828

THE MULBERRY HOUSE III
1056 BALMORHEA DR
ALLEN **TX** 75013
Phone (469) 795-6208 **Fax** (469) 795-6208

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

Owner Information

MCKINNEY ASSISTED LIVING INC
1101 RAINTREE CIRCLE ,#180
ALLEN TX 75013
PHONE: (469) 569-1082 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/08/2016

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000717

BRINLEE CREEK RANCH
4817 MIRACLE LANE
ANNA **TX** 75409
Phone (972) 838-2602 **Fax** (972) 837-4105

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

PATE REHABILITATION ENDEAVORS, INC
2655 VILLA CREEK ,STE 140
DALLAS TX 75234
PHONE: (972) 241-9334 **FAX:** (972) 484-4739
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/01/2018

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102515

BRINLEE CREEK RANCH - HILLTOP HOUSE
3410 PATE WAY
ANNA **TX** 75409
Phone (972) 838-2602 **Fax** (972) 837-4105

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

PATE REHABILITATION ENDEAVORS, INC
2655 VILLA CREEK ,STE 140
DALLAS TX 75234
PHONE: (972) 241-9334 **FAX:** (972) 484-4739
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/12/2018

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030281

BRINLEE CREEK RANCH WEST CAMPUS
4736 BRINLEE CREEK RANCH ROAD
ANNA **TX** 75409
Phone (972) 838-2602 **Fax** (972) 837-4105

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

PATE REHABILITATION ENDEAVORS, INC
2655 VILLA CREEK ,STE 140
DALLAS TX 75234
PHONE: (972) 241-9334 **FAX:** (972) 484-4739
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/01/2018

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105439

B & Y CARE HOME
4311 BRETTON BAY LN
DALLAS **TX** 75287
Phone (972) 349-9251 **Fax** (972) 349-9251

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

FERVENT CARE HOMES LLC
4311 BRETTON BAY LN
DALLAS TX 75287
PHONE: (972) 349-9251 **FAX:** (972) 349-9251
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/24/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105429

CONTINUING CARE AT HIGHLAND SPRINGS
7910 FRANKFORD ROAD
DALLAS **TX** 75252
Phone (972) 656-3500 **Fax** (972) 232-8002

TOTAL Lic Capacity: 88 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 36 **TITLE19:** 0
PRIVATE Beds: 88 **TITLE 18/19:** 0

Owner Information

HIGHLAND SPRINGS INC
8000 FRANKFORD ROAD
DALLAS TX 75252
PHONE: (972) 232-8005 **FAX:** (972) 232-8002
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/12/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106341

BEEHIVE HOMES OF FRISCO
2660 TIMBER RIDGE ROAD
FRISCO **TX** 75034
Phone (805) 304-0144 **Fax**

TOTAL Lic Capacity: 25 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 25 **TITLE 18/19:** 0

Owner Information

EVANTAGE ASSISTED LIVING, LLC
5997 CORAL RIDGE COURT
FRISCO TX 75034
PHONE: (805) 304-0144 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/17/2018

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104607

HUNTLEIGH CARE HOMES - WIMBERLEY
13305 WIMBERLEY DRIVE
FRISCO **TX** 75035
Phone (214) 415-8943 **Fax** (214) 618-1028

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

HUNTLEIGH CARE HOMES, LLC
4133 VENETO DR
FRISCO TX 75033
PHONE: (972) 455-8280 **FAX:** (972) 455-8281
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/15/2018

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105384

HUNTLEIGH CARE HOMES, LLC
6974 WAVERLY LANE
FRISCO **TX** 75035
Phone (972) 455-8280 **Fax** (972) 455-8281

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 8 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

HUNTLEIGH CARE HOMES, LLC
4133 VENETO DR
FRISCO TX 75033
PHONE: (972) 455-8280 **FAX:** (972) 455-8281
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/20/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105901

KINGSGATE HOMECARE SERVICES LLC
15620 PALO PINTO DR
FRISCO **TX** 75035
Phone (469) 682-8879 **Fax**

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

Owner Information

KINGSGATE HOMECARE SERVICES LLC
15620 PALO PINTO DR
FRISCO TX 75035
PHONE: (469) 682-8879 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/31/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106466

LA FONTAINE MEMORY CARE
11777 LEBANON ROAD
FRISCO **TX** 75035
Phone (214) 618-9519 **Fax**

TOTAL Lic Capacity: 40 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 40 **TITLE19:** 0
PRIVATE Beds: 40 **TITLE 18/19:** 0

Owner Information

GO OPERATIONS 1, LLC
11777 LEBANON ROAD
FRISCO TX 75035
PHONE: (214) 618-9519 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/16/2018

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103845

RAMBLING OAKS COURTYARD
10588 LEGACY DR
FRISCO **TX** 75034
Phone (469) 213-8280 **Fax** (469) 362-7408

TOTAL Lic Capacity: 100 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 100 **TITLE 18/19:** 0

Owner Information

BSLC FRISCO LLC
15475 GLENEAGLE DR
COLORADO SPRINGS CO 80921
PHONE: (719) 481-0100 **FAX:** (719) 481-5484

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/02/2018

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106148

SADDLE BROOK MEMORY CARE COMMUNITY
9966 LEGACY DRIVE
FRISCO **TX** 75034
Phone (214) 494-4264 **Fax** (214) 494-4265

TOTAL Lic Capacity: 65 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 65 **TITLE19:** 0
PRIVATE Beds: 65 **TITLE 18/19:** 0

Owner Information

FRISCO MEMORY CARE LLC
111 MARKET STREET NE ,SUITE 200
OLYMPIA WA 98501
PHONE: (360) 867-1900 **FAX:** (360) 867-1956

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/21/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104019

SUNRISE OF FRISCO
2680 LEGACY DRIVE
FRISCO **TX** 75034
Phone (469) 362-1313 **Fax** (469) 362-1488

TOTAL Lic Capacity: 61 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 43 **TITLE19:** 0
PRIVATE Beds: 61 **TITLE 18/19:** 0

Owner Information

MS FRISCO SH LLC
10350 ORMSBY PARK PLACE ,STE 300
LOUISVILLE KY 40223
PHONE: (502) 357-9000 **FAX:** (502) 357-9441

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/01/2018

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106486

THE COTTAGES AT CHAPEL CREEK
8111 WADE BOULEVARD
FRISCO **TX** 75034
Phone (214) 526-0021 **Fax** (888) 255-3821

TOTAL Lic Capacity: 90 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 90 **TITLE19:** 0
PRIVATE Beds: 90 **TITLE 18/19:** 0

Owner Information

THE COTTAGES AT CHAPEL CREEK, LLC
4514 TRAVIS STREET ,SUITE #211
DALLAS TX 75205
PHONE: (214) 526-0021 **FAX:** (888) 255-3821

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/07/2018

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 100201

THE LODGE AT QUAIL PARK
5850 OHIO RD
FRISCO **TX** 75035
Phone (972) 668-4100 **Fax** (972) 668-4161

TOTAL Lic Capacity: 100 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 100 **TITLE 18/19:** 0

Owner Information

LIVING CARE FRISCO, LP
146 N CANAL ST ,STE 220
SEATTLE WA 98103
PHONE: (206) 441-1770 **FAX:** (206) 441-1977

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/28/2016

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105884

THE VILLAGE AT STONEBRIDGE ASSISTED LIVING AND MEMORY CARE
3300 S STONEBRIDGE DR
MC KINNEY **TX** 75070
Phone (972) 804-4122 **Fax** (972) 542-9101

TOTAL Lic Capacity: 128 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 32 **TITLE19:** 0
PRIVATE Beds: 128 **TITLE 18/19:** 0

Owner Information

SRP FRONTIER MCKINNEY LP
8343 DOUGLAS AVE ,STE 350
DALLAS TX 75225
PHONE: (241) 635-4750 **FAX:** (214) 835-4768

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/02/2016

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105635

ALPHA & OMEGA RESIDENTIAL CARE HOME
9604 LOG RUN CT
MCKINNEY **TX** 75070
Phone (972) 346-2280 **Fax** (972) 346-2280

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

Owner Information

ALICE LANG LLC
9804 LOG RUN CT
MCKINNEY TX 75070
PHONE: (972) 346-2280 **FAX:** (972) 346-2280
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/03/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103912

AVALON MEMORY CARE -- MC-KINNEY
1801 MEADOW RANCH RD
MCKINNEY **TX** 75071
Phone (214) 752-7050 **Fax** (214) 752-7054

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

AVALON DEMENTIA CARE MANAGEMENT, LLC
1625 N STEMMONS FRWY
DALLAS TX 75207
PHONE: (214) 752-7050 **FAX:** (214) 752-7054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/31/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103016

BRADFORD OAKS SENIOR LIVING LLC
2809 BRADFORD OAKS DR
MCKINNEY **TX** 75071
Phone (927) 542-9098 **Fax**

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

BIG D SENIOR LIVING LLC
2809 BRADFORD OAKS DR
MCKINNEY TX 75071
PHONE: (972) 542-9098 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/26/2018

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030021

BROOKDALE STONEBRIDGE RANCH
1650 S STONEBRIDGE DR
MCKINNEY **TX** 75070
Phone (972) 529-1420 **Fax** (972) 542-9270

TOTAL Lic Capacity: 136 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 40 **TITLE19:** 0
PRIVATE Beds: 136 **TITLE 18/19:** 0

Owner Information

ESC IV LP
111 WESTWOOD PL ,STE 400
BRENTWOOD TN 37027
PHONE: (414) 918-5441 **FAX:** (414) 918-5054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/01/2018

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102733

CORNERSTONE MINISTRIES INC
3933 CR 317
MCKINNEY **TX** 75069
Phone (469) 424-1887 **Fax**

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

CORNERSTONE MINISTRIES, INC
3933 COUNTY ROAD 317
MCKINNEY TX 75069
PHONE: **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/24/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102401

GRAND BROOK MEMORY CARE OF MCKINNEY
175 PLATEAU DR
MCKINNEY **TX** 75069
Phone (972) 542-0606 **Fax** (972) 542-0614

TOTAL Lic Capacity: 48 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 48 **TITLE19:** 0
PRIVATE Beds: 48 **TITLE 18/19:** 0

Owner Information

MCKINNEY OPCO LLC
7708 SAN JACINTO PLACE ,UNIT 100
PLANO TX 75024
PHONE: (469) 331-8200 **FAX:** (469) 519-4151
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/23/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105058

GREENFIELD RESIDENTIAL CARE HOMES LLC
3401 LOS ALAMOS LANE
MCKINNEY **TX** 75070
Phone (972) 540-1274 **Fax** (469) 619-4565

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

Owner Information

GREENFIELD RESIDENTIAL CARE HOMES LLC
3401 LOS ALAMOS LANE
MCKINNEY TX 75070
PHONE: (972) 540-1274 **FAX:** (469) 619-4565
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/16/2018

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000645

NORTH BROOK PLACE
2301 N BROOK
MCKINNEY **TX** 75069
Phone (972) 542-6006 **Fax** (972) 542-8008

TOTAL Lic Capacity: 55 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 55 **TITLE 18/19:** 0

Owner Information

ASSISTED LIVING CONCEPTS LLC
330 N WABASH AVE ,STE 3700
CHICAGO IL 60611
PHONE: (312) 725-7000 **FAX:** (312) 332-5300
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/11/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000659

REDBUD PLACE
101 W WILSON CREEK PKWY
MCKINNEY **TX** 75069
Phone (972) 562-9698 **Fax** (972) 542-5162

TOTAL Lic Capacity: 48 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 48 **TITLE 18/19:** 0

Owner Information

REDBUD AID OPCO LLC
330 N WABASH ,STE 3700
CHICAGO IL 60611
PHONE: (312) 725-7000 **FAX:** (312) 332-5300
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/11/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105339

SEREIN RESIDENTIAL CARE HOME
4401 CITABRIA DRIVE
MCKINNEY **TX** 75070
Phone (214) 592-8454 **Fax** (214) 592-8414

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

Owner Information

SEREIN RESIDENTIAL CARE HOME, LLC
4401 CITABRIA DRIVE
MC KINNEY TX 75070
PHONE: (214) 592-8454 **FAX:** (214) 592-8414
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/04/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104253

STONEFIELD ASSISTED LIVING AND MEMORY CARE COMMUNITY
2701 ALMA ROAD
MCKINNEY **TX** 75070
Phone (214) 491-1710 **Fax** (214) 491-1711

TOTAL Lic Capacity: 90 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 25 **TITLE19:** 0
PRIVATE Beds: 90 **TITLE 18/19:** 0

Owner Information

CSL S MCKINNEY LLC
14160 DALLAS PARKWAY ,STE 300
DALLAS TX 75254
PHONE: (972) 308-8366 **FAX:** (972) 308-8216
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/10/2016

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104759

THE IVY OF MCKINNEY
3352 MEDICAL CENTER DRIVE
MCKINNEY **TX** 75069
Phone (972) 351-8888 **Fax**

TOTAL Lic Capacity: 30 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 30 **TITLE19:** 0
PRIVATE Beds: 30 **TITLE 18/19:** 0

Owner Information

SLH MCKINNEY MANAGER LLC
111 E. WACKER DRIVE ,SUITE 2200
CHICAGO IL 60601
PHONE: (312) 673-4333 **FAX:** (312) 673-4487
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/02/2016

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104787

THE IVY OF MCKINNEY
3392 MEDICAL CENTER DRIVE
MCKINNEY **TX** 75069

Phone (972) 351-8888 **Fax**

TOTAL Lic Capacity: 90 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 90 **TITLE 18/19:** 0

Owner Information

SLH MCKINNEY MANAGER LLC
111 E. WACKER DRIVE ,SUITE 2200
CHICAGO IL 60601

PHONE: (312) 673-4333 **FAX:** (312) 673-4487

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/02/2016

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030148

THE MULBERRY HOUSE #1
2620 SAINT MICHELLE
MCKINNEY **TX** 75070

Phone (214) 592-8205 **Fax** (214) 592-8205

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

Owner Information

MCKINNEY ASSISTED LIVING INC
1101 RAINTREE CIRCLE ,#180
ALLEN TX 75013

PHONE: (469) 569-1082 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/04/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101626

THE MULBERRY HOUSE #2
3216 BRENTWOOD DR
MCKINNEY **TX** 75070

Phone (214) 592-8206 **Fax**

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

Owner Information

MCKINNEY ASSISTED LIVING INC
1101 RAINTREE CIRCLE ,#180
ALLEN TX 75013

PHONE: (469) 569-1082 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/30/2016

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030286

VILLAGIO OF MCKINNEY
1601 W ELDORADO PKWY
MCKINNEY **TX** 75069

Phone (972) 569-8660 **Fax** (972) 569-8663

TOTAL Lic Capacity: 72 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 72 **TITLE19:** 0
PRIVATE Beds: 72 **TITLE 18/19:** 0

Owner Information

SELECT OPERATIONS OF MCKINNEY LLC
2956 VIA EXPERANZA
EDMOND OK 73013

PHONE: (405) 822-7328 **FAX:** (888) 753-6262

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/17/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106089

HERITAGE HOUSE OF MURPHY
612 MAIZE DR
MURPHY **TX** 75094

Phone (469) 250-1430 **Fax**

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

Owner Information

THE HERITAGE HOUSE OF PLANO, LLC
900 17TH ST
PLANO TX 75074

PHONE: (214) 632-2382 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/02/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105295

ORCHARD PARK OF MURPHY
304 W FM 544
MURPHY **TX** 75094

Phone (972) 382-7888 **Fax**

TOTAL Lic Capacity: 90 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 33 **TITLE19:** 0
PRIVATE Beds: 90 **TITLE 18/19:** 0

Owner Information

TCG MURPHY AL LLC
1200 SUMMIT AVE ,STE 444
FORT WORTH TX 76102

PHONE: (817) 446-4792 **FAX:** (817) 446-0923

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/21/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106449

ALLEGRO ASSISTED LIVING SERVICES OF TEXAS LLC
3417 CROSS BEND RD
PLANO **TX** 75023
Phone (214) 542-8527 **Fax** (972) 867-6644

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

ALLEGRO ASSISTED LIVING SERVICES OF TEXAS LLC
3400 REMINGTON DR
PLANO TX 75023
PHONE: (214) 542-8527 **FAX:** (972) 985-6075
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/11/2018

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103444

ALLEGRO ASSISTED LIVING SERVICES OF TEXAS LLC
3400 REMINGTON DR
PLANO **TX** 75023
Phone (972) 985-6075 **Fax** (972) 985-6075

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

Owner Information

ALLEGRO ASSISTED LIVING SERVICES OF TEXAS LLC
3400 REMINGTON DR
PLANO TX 75023
PHONE: (214) 542-8527 **FAX:** (972) 985-6075
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/03/2016

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105204

ALLEGRO ASSISTED LIVING SERVICES OF TEXAS LLC
3200 APPALACHIAN WAY
PLANO **TX** 75075
Phone (972) 985-6075 **Fax** (972) 985-6075

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 5 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

ALLEGRO ASSISTED LIVING SERVICES OF TEXAS LLC
3400 REMINGTON DR
PLANO TX 75023
PHONE: (214) 542-8527 **FAX:** (972) 985-6075
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/24/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105554

ARBOR HILLS MEMORY CARE COMMUNITY
2625 W. PLANO PARKWAY
PLANO **TX** 75075
Phone (972) 509-8905 **Fax** (972) 509-8906

TOTAL Lic Capacity: 69 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 69 **TITLE19:** 0
PRIVATE Beds: 69 **TITLE 18/19:** 0

Owner Information

PLANO ARBOR HILLS, LLC
111 MARKET ST. NE ,SUITE 200
OLYMPIA WA 98501
PHONE: **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/22/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030338

ASSISTED CONCEPTS LLC
7109 FALCON DR
PLANO **TX** 75025
Phone (972) 618-9603 **Fax** (972) 618-9603

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

ASSISTED CONCEPTS LLC
PO BOX 1835
ALLEN TX 75013
PHONE: (972) 727-9966 **FAX:** (972) 727-9966
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 06/28/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030015

AVALON MEMORY CARE - SPARROWS POINT
5013 SPARROWS PT
PLANO **TX** 75023
Phone (214) 752-7050 **Fax** (214) 752-7054

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 8 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

AVALON DEMENTIA CARE MANAGEMENT, LLC
1625 N STEMMONS FRWY
DALLAS TX 75207
PHONE: (214) 752-7050 **FAX:** (214) 752-7054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/15/2018

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000356

BROOKDALE COLLIN OAKS
4045 W 15TH ST
PLANO **TX** 75093
Phone (972) 519-0480 **Fax** (972) 519-9765

TOTAL Lic Capacity: 116 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 27 **TITLE19:** 0
PRIVATE Beds: 116 **TITLE 18/19:** 0

Owner Information

ESC-NGH, LP
111 WESTWOOD PL ,STE 400
BRENTWOOD TN 37027
PHONE: (206) 298-2909 **FAX:** (206) 301-4500
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/01/2016

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030404

BROOKDALE CREEKSIDE
2000 W SPRING CREEK PKWY
PLANO **TX** 75023
Phone (972) 312-9993 **Fax** (972) 312-1984

TOTAL Lic Capacity: 56 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 56 **TITLE19:** 0
PRIVATE Beds: 56 **TITLE 18/19:** 0

Owner Information

ESC IV LP
111 WESTWOOD PL ,STE 400
BRENTWOOD TN 37027
PHONE: (414) 918-5441 **FAX:** (414) 918-5054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/31/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 100148

BROOKDALE PLANO
3000 MIDWAY RD
PLANO **TX** 75093
Phone (972) 473-7400 **Fax** (972) 473-7403

TOTAL Lic Capacity: 88 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 78 **TITLE19:** 0
PRIVATE Beds: 88 **TITLE 18/19:** 0

Owner Information

HBP LEASECO LLC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214
PHONE: (414) 918-5000 **FAX:** (414) 918-5054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/01/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030405

BROOKDALE SPRING CREEK GARDENS
6410 OLD ORCHARD DR
PLANO **TX** 75023
Phone (972) 208-9865 **Fax** (972) 208-9893

TOTAL Lic Capacity: 72 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 31 **TITLE19:** 0
PRIVATE Beds: 72 **TITLE 18/19:** 0

Owner Information

S-H OPCO SPRING CREEK GARDENS, LLC
1920 MAIN ST. ,STE. 1200
IRVING CA 92614
PHONE: (949) 407-0700 **FAX:** (949) 407-8000
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/29/2016

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030165

COLLIN CREEK ASSISTED LIVING CENTER INC
6400 CHEYENNE TR
PLANO **TX** 75023
Phone (972) 769-1109 **Fax** (972) 769-1113

TOTAL Lic Capacity: 70 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 70 **TITLE 18/19:** 0

Owner Information

COLLIN CREEK ASSISTED LIVING CENTER INC
6400 CHEYENNE TR
PLANO TX 75023
PHONE: (972) 769-1109 **FAX:** (972) 769-1113
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/19/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105153

FOUR SEASONS SENIOR LIVING II
9620 BULL CREEK
PLANO **TX** 75023
Phone **Fax** (972) 584-9885

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

FOUR SEASONS SENIOR LIVING II LLC
9620 BULL CREEK
PLANO TX 75023
PHONE: (972) 584-9880 **FAX:** (972) 584-9885
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/18/2016

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103683

GROOM SENIOR CARE HOMES INC AT DIANE
2101 DIANE DR
PLANO **TX** 75074
Phone (214) 383-9077 **Fax** (214) 383-7594

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 9 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

GROOM SENIOR CARE HOMES INC.
100 ALLENTOWN PKWY ,STE 214
ALLEN TX 75002
PHONE: (214) 383-9077 **FAX:** (214) 383-7594
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/08/2015

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103687

GROOM SENIOR CARE HOMES INC.
1525 AYLESBURY
PLANO **TX** 75075
Phone (972) 398-2920 **Fax** (214) 495-8055

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 9 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

GROOM SENIOR CARE HOMES INC.
100 ALLENTOWN PKWY ,STE 214
ALLEN TX 75002
PHONE: (214) 383-9077 **FAX:** (214) 383-7594
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/21/2013

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104572

GROOM SENIOR LIVING AT AMBROSIA
4200 AMBROSIA
PLANO **TX** 75093
Phone (972) 758-9606 **Fax** (972) 758-7842

TOTAL Lic Capacity: 11 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 11 **TITLE19:** 0
PRIVATE Beds: 11 **TITLE 18/19:** 0

Owner Information

GROOM SENIOR LIVING INC
100 ALLENTOWN PKWY ,STE 214
ALLEN TX 75002
PHONE: (214) 383-9077 **FAX:** (214) 383-7594
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/08/2013

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105416

HYGIEIA RCH INC
3814 TIMBERLAKE DR
PLANO **TX** 75023
Phone (972) 781-9271 **Fax** (972) 516-4952

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

HYGIEIA RCH INC
3814 TIMBERLAKE DRIVE
PLANO TX 75023
PHONE: (972) 781-9271 **FAX:** (214) 666-3201
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/09/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106251

LOCARDIA HOME CARE LIVING LLC
2609 WEBSTER DR
PLANO **TX** 75075
Phone (972) 964-8127 **Fax** (972) 747-5194

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

LOCARDIA HOME CARE LIVING LLC
2609 WEBSTER DR
PLANO TX 75075
PHONE: (214) 552-5606 **FAX:** (972) 747-6194
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/21/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030217

LPAL, INC.
2104 MERKSEM CT
PLANO **TX** 75025
Phone (972) 943-5999 **Fax** (214) 272-3338

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

Owner Information

LPAL, INC.
2104 MERKSEM CT
PLANO TX 75025
PHONE: (214) 361-4886 **FAX:** (214) 272-3338
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/16/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103405

MISSION RIDGE RESIDENTIAL CARE
3320 CANONCITA LN
PLANO **TX** 75023
Phone (972) 985-6050 **Fax** (972) 985-4793

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

JIUNY ENTERPRISES, LLC
3320 CANONCITA LN
PLANO TX 75023
PHONE: (214) 674-2227 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/31/2016

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102845

MORE THAN HOME RESIDENTIAL CARE
3109 PHAETON CT
PLANO **TX** 75023
Phone (972) 599-4219 **Fax** (972) 599-4219

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

EUSTINA CHOTO
3109 PHAETON CT
PLANO TX 75023
PHONE: (972) 849-4529 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/18/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103239

NORTH TEXAS PERSONAL CARE HOMES INC
2916 CHALFONT
PLANO **TX** 75023
Phone (469) 360-4493 **Fax** (972) 618-0962

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

NORTH TEXAS PERSONAL CARE HOMES INC
17207 GRAYSTONE DR
DALLAS TX 75248
PHONE: (469) 360-4493 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/30/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103360

NORTH TEXAS PERSONAL CARE HOMES INC
3453 HEARST CASTLE WAY
PLANO **TX** 75025
Phone (469) 360-4493 **Fax** (972) 618-0316

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

NORTH TEXAS PERSONAL CARE HOMES INC
17207 GRAYSTONE DR
DALLAS TX 75248
PHONE: (469) 360-4493 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/10/2015

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102673

PRESTONWOOD COURT
7001 W PLANO PKWY
PLANO **TX** 75093
Phone (972) 306-2200 **Fax** (972) 306-2285

TOTAL Lic Capacity: 132 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 26 **TITLE19:** 0
PRIVATE Beds: 132 **TITLE 18/19:** 0

Owner Information

SHP IV PRESTONWOOD, LLC C/O PRUDENTIAL REAL ESTATE INVESTORS
3348 PEACHTREE ROAD ,STE 1100
ATLANTA GA 30326
PHONE: (404) 704-3778 **FAX:** (404) 704-3812

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/11/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000799

SILVERADO SENIOR LIVING - PLANO
5521 VILLAGE CREEK DR
PLANO **TX** 75093
Phone (972) 447-0038 **Fax** (972) 447-0441

TOTAL Lic Capacity: 56 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 56 **TITLE19:** 0
PRIVATE Beds: 56 **TITLE 18/19:** 0

Owner Information

SUBTENANT 5521 VILLAGE CREEK DRIVE, LLC
4500 DORR STREET
TOLEDO OH 43615
PHONE: (419) 247-2800 **FAX:** (419) 247-2826

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/11/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102620

SUNRISE SENIOR LIVING OF PLANO
4800 W PARKER RD
PLANO **TX** 75093
Phone (972) 985-9181 **Fax** (972) 985-9196

TOTAL Lic Capacity: 123 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 50 **TITLE19:** 0
PRIVATE Beds: 123 **TITLE 18/19:** 0

Owner Information

HCRI SUN III TENANT, LP
7902 WESTPARK DR ,STE T-900
MCLEAN VA 22102
PHONE: (703) 273-7500 **FAX:** (703) 744-1601
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/12/2015

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102496

THE GARDEN VIEW HOME
6500 GENESEO CIR
PLANO **TX** 75023
Phone (972) 208-2859 **Fax** (972) 491-5895

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

THE GARDENS RESIDENTIAL CARE HOMES INC
2672 DAFFODIL DR
RICHARDSON TX 75082
PHONE: (972) 235-5513 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/10/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106269

THE HEALTHCARE RESORT OF PLANO
3325 W PLANO PKWY
PLANO **TX** 75075
Phone (972) 596-1260 **Fax** (972) 596-1395

TOTAL Lic Capacity: 30 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 30 **TITLE 18/19:** 0

Owner Information

OAK POINT HEALTHCARE INC
3325 W PLANO PKWY
PLANO TX 75075
PHONE: (972) 596-1260 **FAX:** (972) 596-1395
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/13/2018

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103432

THE LEGACY AT WILLOW BEND
6101 OHIO DR STE 600
PLANO **TX** 75024
Phone (972) 468-6160 **Fax** (972) 468-6169

TOTAL Lic Capacity: 72 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 20 **TITLE19:** 0
PRIVATE Beds: 72 **TITLE 18/19:** 0

Owner Information

THE LEGACY AT WILLOW BEND RETIREMENT COMMUNITY INC
6101 OHIO
PLANO TX 75024
PHONE: (972) 714-8922 **FAX:** (214) 291-9882
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/24/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106352

THE VILLAGE AT MAPLESHADE
3670 MAPLESHADE LANE
PLANO **TX** 75075
Phone (972) 964-8444 **Fax** (972) 964-8445

TOTAL Lic Capacity: 112 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 112 **TITLE 18/19:** 0

Owner Information

SRP AL PLANO, L.P.
8343 DOUGLAS AVE. ,STE 350
DALLAS TX 75225
PHONE: (214) 635-4750 **FAX:** (214) 635-4766
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/11/2018

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 100348

THE WATERFORD AT PLANO ASSISTED LIVING COMMUNITY
3401 PREMIER DR
PLANO **TX** 75023
Phone (972) 423-7400 **Fax** (972) 423-8898

TOTAL Lic Capacity: 57 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 57 **TITLE 18/19:** 0

Owner Information

TRIAD SENIOR LIVING II LP
14160 DALLAS PRWY ,STE 300
DALLAS TX 75254
PHONE: (972) 770-5600 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/17/2016

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105952

US MEMORY CARE - NORTH DALLAS
3690 MAPLESHADE LANE
PLANO **TX** 75075
Phone (972) 479-5200 **Fax**

TOTAL Lic Capacity: 90 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 90 **TITLE19:** 0
PRIVATE Beds: 90 **TITLE 18/19:** 0

Owner Information

USMC NORTH DALLAS, LLC
14881 QUORUM DRIVE ,SUITE 250
DALLAS TX 75254
PHONE: (214) 782-9994 **FAX:** (214) 782-9569
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/29/2016

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030011

VILLAGE CREEK PLACE
5217 VILLAGE CREEK DR
PLANO **TX** 75093
Phone (972) 735-0306 **Fax** (972) 735-0326

TOTAL Lic Capacity: 66 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 66 **TITLE 18/19:** 0

Owner Information

ASSISTED LIVING CONCEPTS LLC
330 N WABASH AVE ,STE 3700
CHICAGO IL 60611
PHONE: (312) 725-7000 **FAX:** (312) 332-5300
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/11/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 100450

VILLAGIO OF PLANO
2129 BAYHILL DR
PLANO **TX** 75023
Phone (972) 612-9336 **Fax** (972) 612-7927

TOTAL Lic Capacity: 32 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 32 **TITLE19:** 0
PRIVATE Beds: 32 **TITLE 18/19:** 0

Owner Information

SELECT OPERATIONS OF PLANO LLC
2956 VIA ESPERANZA
EDMOND OK 73013
PHONE: (405) 822-7328 **FAX:** (888) 753-6262
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/01/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104286

VILLA ASUNCION INDEPENDENT AND ASSISTED LIVING CENTER
830 E PRINCETON DR
PRINCETON **TX** 75407
Phone (972) 734-8823 **Fax** (972) 734-3828

TOTAL Lic Capacity: 96 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 96 **TITLE 18/19:** 0

Owner Information

VILLA ASUNCION INDEPENDENT LIVING CTR LLC
6521 GENESEO
PLANO TX 75023
PHONE: (972) 618-8172 **FAX:** (972) 734-3828
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/04/2018

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030128

VILLA ASUNCION INDEPENDENT AND ASSISTED LIVING CENTER
830 E PRINCETON BLVD
PRINCETON **TX** 75407
Phone (972) 734-8823 **Fax** (972) 734-3828

TOTAL Lic Capacity: 80 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 20 **TITLE19:** 0
PRIVATE Beds: 80 **TITLE 18/19:** 0

Owner Information

VILLA ASUNCION INDEPENDENT LIVING CTR LLC
6521 GENESEO
PLANO TX 75023
PHONE: (972) 618-8172 **FAX:** (972) 734-3828
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/17/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103322

ECKELBERRY'S ELDERLY CARE INC
500 WILLOWVIEW DR
PROSPER **TX** 75078
Phone (214) 385-6920 **Fax** (866) 278-8020

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

ECKELBERRY'S ELDERLY CARE INC
500 WILLOWVIEW DR
PROSPER TX 75078
PHONE: (972) 347-3069 **FAX:** (866) 278-8020
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/26/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030379

DIGNIFIED LIVING
2206 BLUE CYPRESS DR
RICHARDSON **TX** 75082
Phone (972) 907-1420 **Fax** (972) 691-6530

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

DIGNIFIED LIVING LLC
2713 YAGGI DR
FLOWER MOUND TX 75028
PHONE: (817) 586-9575 **FAX:** (972) 437-7813
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/06/2017

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102969

DIGNIFIED LIVING, LLC
3304 BLUE BELL
RICHARDSON **TX** 75082
Phone (972) 437-7827 **Fax** (972) 434-7813

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

DIGNIFIED LIVING LLC
2713 YAGGI DR
FLOWER MOUND TX 75028
PHONE: (817) 586-9575 **FAX:** (972) 437-7813
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/23/2018

County **COLLIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102886

THE FAMILY'S CHOICE
2212 BLUEBONNET DR
RICHARDSON **TX** 75082
Phone (214) 272-9755 **Fax** (214) 272-9755

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

ZJM ENTERPRISES INCORPORATED
2212 BLUEBONNET DRIVE
RICHARDSON TX 75082
PHONE: (469) 235-8195 **FAX:** (972) 675-0370
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/27/2017

County **COLORADO** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030222

COLUMBUS OAKS HEALTHCARE COMMUNITY
203 CHARTER ST
COLUMBUS **TX** 78934-1558
Phone (979) 732-2347 **Fax** (979) 732-3473

TOTAL Lic Capacity: 40 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 40 **TITLE 18/19:** 0

Owner Information

DHC OPCO-COLUMBUS LLC
203 CHARTER STREET
COLUMBUS TX 78934
PHONE: (979) 732-2347 **FAX:** (979) 732-3473
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/01/2017

County **COLORADO** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 100620

HOMESTEAD ASSISTED LIVING
302 YOUENS DR
WEIMAR **TX** 78962
Phone (979) 725-8669 **Fax** (979) 725-8460

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

WEIMAR ASSISTED LIVING PARTNERS INC
32211 PATTYS LANDING
MAGNOLIA TX 77354
PHONE: (281) 414-5744 **FAX:** (866) 354-8161
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/01/2017

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

Facility Information: **Facility ID:** 101536

GARDEN RIDGE ASSISTED LIVING
9621 MEADOW RUE
GARDEN RIDGE **TX** 78266
Phone (210) 651-3770 **Fax** (210) 651-7400

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

MARIA MAGDALENA LOPEZ
9621 MEADOW RUE
GARDEN RIDGE TX 78266
PHONE: (210) 651-3770 **FAX:** (210) 651-7400
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/19/2016

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

Facility Information: **Facility ID:** 101917

SODALIS ELDER LIVING GRACELAND
19095 FM 2252
GARDEN RIDGE **TX** 78266

Phone (210) 651-6377 **Fax** (210) 651-0957

TOTAL Lic Capacity: 50 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 9 **TITLE19:** 0
PRIVATE Beds: 50 **TITLE 18/19:** 0

Owner Information

SODALIS GRACELAND LLC
195 S ACADEMY
NEW BRAUNFELS TX 78130

PHONE: (830) 624-1044 **FAX:** (830) 629-4884

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/23/2017

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

Facility Information: **Facility ID:** 000380

BROOKDALE NEW BRAUNFELS
2457 LOOP 337
NEW BRAUNFELS **TX** 78130

Phone (830) 606-5300 **Fax** (830) 625-7958

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

BROOKDALE SENIOR LIVING COMMUNITIES INC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214

PHONE: (414) 918-5441 **FAX:** (414) 918-6076

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/01/2016

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

Facility Information: **Facility ID:** 000529

EDEN HOME INC
631 LAKEVIEW BLVD
NEW BRAUNFELS **TX** 78130

Phone (830) 625-6291 **Fax** (830) 620-7786

TOTAL Lic Capacity: 64 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 30 **TITLE19:** 0
PRIVATE Beds: 64 **TITLE 18/19:** 0

Owner Information

EDEN HOME INC
631 LAKEVIEW BLVD
NEW BRAUNFELS TX 78130

PHONE: (830) 625-6291 **FAX:** (830) 620-7786

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/30/2018

County **COMAL** Reg Svcs: UNASSIGNED Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 106312

ELAN WESTPOINTE
2140 INDEPENDENCE DR
NEW BRAUNFELS **TX** 78132

Phone (979) 739-4261 **Fax** (830) 626-8021

TOTAL Lic Capacity: 128 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 38 **TITLE19:** 0
PRIVATE Beds: 128 **TITLE 18/19:** 0

Owner Information

TSL NB OPCO, LLC
2140 INDEPENDENCE DR
NEW BRAUNFELS TX 78132

PHONE: (515) 875-4590 **FAX:** (515) 875-4780

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/15/2017

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

Facility Information: **Facility ID:** 103402

GRUENE SENIOR LIVING LP
1820 E COMMON ST
NEW BRAUNFELS **TX** 78130

Phone (830) 626-2111 **Fax** (830) 626-2115

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 14 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

GRUENE SENIOR LIVING LP
1820 E COMMON ST
NEW BRAUNFELS TX 78130

PHONE: (830) 626-2111 **FAX:** (830) 626-2115

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/29/2017

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

Facility Information: **Facility ID:** 000396

OAKTREE ASSISTED LIVING
1750 HIGHWAY 46 WEST
NEW BRAUNFELS **TX** 78132

Phone (830) 608-9222 **Fax** (830) 608-0995

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

BAYWIND VILLAGE INC
411 ALABAMA AVE
LEAGUE CITY TX 77573

PHONE: (281) 332-4189 **FAX:** (281) 316-2715

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/05/2017

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

Facility Information: **Facility ID:** 030347

SODALIS ELDER LIVING NEW BRAUNFELS I
550 ROCK ST BLDG B
NEW BRAUNFELS **TX** 78130
Phone (830) 624-7702 **Fax** (830) 608-0309

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

ALZ CARE LLC
195 S ACADEMY
NEW BRAUNFELS TX 78130
PHONE: **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/14/2018

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

Facility Information: **Facility ID:** 102276

SODALIS ELDER LIVING NEW BRAUNFELS II
302 CROSS ST
NEW BRAUNFELS **TX** 78130
Phone (830) 609-2233 **Fax** (830) 629-3434

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

ALZ CARE LLC
195 S ACADEMY
NEW BRAUNFELS TX 78130
PHONE: **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/20/2017

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

Facility Information: **Facility ID:** 103037

SODALIS ELDER LIVING NEW BRAUNFELS III
550 ROCK ST BLDG A
NEW BRAUNFELS **TX** 78130
Phone (830) 624-7702 **Fax** (830) 629-4884

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

ALZ CARE LLC
195 S ACADEMY
NEW BRAUNFELS TX 78130
PHONE: **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/11/2017

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

Facility Information: **Facility ID:** 103926

TCG NEW BRAUNFELS CAMPUS LLC
2294 E. COMMON ST
NEW BRAUNFELS **TX** 78130
Phone (830) 221-4800 **Fax** (830) 221-4850

TOTAL Lic Capacity: 75 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 24 **TITLE19:** 0
PRIVATE Beds: 75 **TITLE 18/19:** 0

Owner Information

TCG NEW BRAUNFELS CAMPUS LLC
1200 SUMMIT AVE ,STE 444
FORT WORTH TX 78102
PHONE: (817) 466-4792 **FAX:** (817) 466-0923
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/29/2017

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

Facility Information: **Facility ID:** 106447

THE VILLAGE OF GARDEN RIDGE
9514 FM 1863
SAN ANTONIO **TX** 78266
Phone (210) 787-8555 **Fax** (210) 651-7400

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

THE VILLAGE OF GARDEN REIDGE ASSISTED LIVING, INC.
9514 FM 1863
SAN ANTONIO TX 78266
PHONE: (830) 438-0649 **FAX:** (830) 438-0632
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/22/2018

County **COMANCHE** Reg Svcs: ABILENE GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 101251

THE WHITESTONE
100 ALAMO
COMANCHE **TX** 76442
Phone (325) 356-9303 **Fax** (325) 356-3875

TOTAL Lic Capacity: 36 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 36 **TITLE 18/19:** 0

Owner Information

COMANCHE COUNTY ASSISTED LIVING INC
100 ALAMO
COMANCHE TX 76442
PHONE: (325) 356-9303 **FAX:** (325) 356-3875
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/12/2018

County **COOKE** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000997

WHEELER PLACE
2310 E BROADWAY ST
GAINESVILLE **TX** 76240

Phone (940) 668-8977 **Fax** (940) 668-8262

TOTAL Lic Capacity: 51 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 51 **TITLE 18/19:** 0

Owner Information

WHEELER AID OPCO LLC
330 N WABASH AVE ,STE 3700
CHICAGO IL 60611

PHONE: (312) 725-7000 **FAX:** (312) 332-5300

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/11/2017

County **CORYELL** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 104600

STONEY BROOK OF COPPERAS COVE
1808 MARTIN LUTHER KING JR DRIVE
COPPERAS COVE **TX** 76522

Phone (254) 547-1700 **Fax** (254) 547-1788

TOTAL Lic Capacity: 22 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 20 **TITLE19:** 0
PRIVATE Beds: 22 **TITLE 18/19:** 0

Owner Information

COPPERAS COVE A.L., LLC
1808 MARTIN LUTHER KING JR. DR.
COPPERAS COVE TX 76522

PHONE: (254) 547-1700 **FAX:** (254) 547-1788

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/03/2017

County **CORYELL** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 104601

STONEY BROOK OF COPPERAS COVE
1808 MARTIN LUTHER KING JR DRIVE
COPPERAS COVE **TX** 76522

Phone (254) 547-1700 **Fax** (254) 547-1788

TOTAL Lic Capacity: 52 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 52 **TITLE 18/19:** 0

Owner Information

COPPERAS COVE A.L., LLC
1808 MARTIN LUTHER KING JR. DR.
COPPERAS COVE TX 76522

PHONE: (254) 547-1700 **FAX:** (254) 547-1788

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/03/2017

County **CORYELL** Reg Svcs: WACO Region 07 - AUSTIN

Facility Information: **Facility ID:** 030000

CORYELL COUNTY MEMORIAL HOSPITAL AUTHORITY
1507 W MAIN ST
GATESVILLE **TX** 76528

Phone (254) 248-6330 **Fax** (254) 248-6331

TOTAL Lic Capacity: 70 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 70 **TITLE 18/19:** 0

Owner Information

CORYELL COUNTY MEMORIAL HOSPITAL AUTHORITY
1507 W MAIN ST
GATESVILLE TX 76528

PHONE: (254) 248-6300 **FAX:** (254) 248-6306

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/13/2016

County **CROSBY** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 030150

REEVES RHOADES TERRACE ASSISTED LIVING CENTER
630 S HARRISON ST
CROSBYTON **TX** 79322

Phone (806) 675-0104 **Fax** (806) 675-2645

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

CROSBYTON CLINIC HOSPITAL
710 W MAIN ST
CROSBYTON TX 79322

PHONE: (806) 675-2382 **FAX:** (806) 675-2645

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/25/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105835

A CARING HOME WITH FRIENDS
1501 MCCOY PLACE
CARROLLTON **TX** 75006-1407

Phone (972) 785-7952 **Fax**

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

Owner Information

LIVE LIFE WELL LLC
1501 MCCOY PLACE
CARROLLTON TX 75006-1407

PHONE: (972) 785-7951 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/03/2016

County **DALLAS** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106316

OXFORD GLEN AT CARROLLTON
2221 MARSH LANE
CARROLLTON **TX** 75006

Phone (972) 820-5975 **Fax**

TOTAL Lic Capacity: 70 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 70 **TITLE19:** 0
PRIVATE Beds: 70 **TITLE 18/19:** 0

Owner Information

OXFORD CARROLLTON MEMORY CARE LTD
125 N MARKET ,STE 1230
WICHITA KS 67202

PHONE: (316) 201-3210 **FAX:** (316) 201-3219

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/21/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000300

BROOKDALE CEDAR HILL
602 E BELTLINE RD
CEDAR HILL **TX** 75104

Phone (972) 291-5000 **Fax** (972) 291-5046

TOTAL Lic Capacity: 50 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 50 **TITLE 18/19:** 0

Owner Information

BROOKDALE SENIOR LIVING COMMUNITIES INC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214

PHONE: (414) 918-5441 **FAX:** (414) 918-6076

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/01/2016

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102594

CRESCENT PLACE ASSISTED LIVING & MEMORY CARE
225 W PLEASANT RUN RD
CEDAR HILL **TX** 75104

Phone (972) 291-4955 **Fax** (972) 293-0531

TOTAL Lic Capacity: 85 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 20 **TITLE19:** 0
PRIVATE Beds: 85 **TITLE 18/19:** 0

Owner Information

CSL LEASECO INC
14160 DALLAS PKWY ,STE 300
DALLAS TX 75254

PHONE: (972) 770-5600 **FAX:** (972) 770-5666

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/11/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103024

ELSHADAI CARE HOME
1225 NUTTING STREET
CEDAR HILL **TX** 75104

Phone (972) 291-7445 **Fax** (972) 293-2777

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

Owner Information

ELIZABETH AYORINDE
1225 NUTTING ST
CEDAR HILL TX 75104

PHONE: (214) 715-5725 **FAX:** (927) 293-2777

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/26/2016

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 010228

MOJICARE RESIDENTIAL CARE CENTER
338 HASTINGS DR
CEDAR HILL **TX** 75104

Phone (972) 299-6257 **Fax** (972) 293-2431

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

Owner Information

MARGARET M ADEYEMI
PO BOX 1471
CEDAR HILL TX 75106

PHONE: (972) 299-6257 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/09/2016

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104206

PASSIONATE LIVING INC
489 KENYA ST
CEDAR HILL **TX** 75104

Phone (214) 886-0094 **Fax** (972) 230-1975

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

PASSIONATE LIVING INC
489 KENYA ST
CEDAR HILL TX 75104

PHONE: (972) 291-1384 **FAX:** (972) 230-1975

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 06/09/2018

County **DALLAS** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101774

CHRISTUS ST JOSEPH VILLAGE
1201 E SANDY LAKE RD
COPPELL **TX** 75019

Phone (972) 304-0300 **Fax** (972) 462-1099

TOTAL Lic Capacity: 54 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 54 **TITLE 18/19:** 0

Owner Information

CHRISTUS HEALTH
2707 NORTH LOOP WEST
HOUSTON TX 77008

PHONE: (214) 492-8500 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/01/2017

County **DALLAS** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105609

FOUR SEASONS SENIOR LIVING V , LLC
205 PLANTATION DR
COPPELL **TX** 75019

Phone (972) 584-9880 **Fax** (972) 584-9885

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

Owner Information

FOUR SEASONS SENIOR LIVING V LLC
205 PLANTATION DRIVE
COPPELL TX 75244

PHONE: (972) 584-9880 **FAX:** (972) 584-9885

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/15/2018

County **DALLAS** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105575

RIVER OAKS ASSISTED LIVING AND MEMORY CARE
1530 E. SANDY LAKE RD
COPPELL **TX** 75019

Phone (214) 390-2450 **Fax** (214) 390-5025

TOTAL Lic Capacity: 86 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 24 **TITLE19:** 0
PRIVATE Beds: 86 **TITLE 18/19:** 0

Owner Information

COPPELL ALF LLC
8415 E 21ST STREET NORTH ,STE 100
WICHITA KS 67206

PHONE: (316) 616-6288 **FAX:** (316) 616-6255

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/15/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102051

3 ANGELS CAREGIVERS
9754 AMBERLEY DR
DALLAS **TX** 75243

Phone (214) 575-3585 **Fax**

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

NATIVIDAD CHIPANA
9754 AMBERLEY DR
DALLAS TX 75243

PHONE: (214) 575-3585 **FAX:** (214) 575-3585

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/18/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105125

ABBEY RESIDENTIAL CARE HOMES INC
6906 NORWAY PLACE
DALLAS **TX** 75230

Phone (214) 500-8548 **Fax** (214) 954-7499

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

ABBEY RESIDENTIAL CARE HOMES INC
6906 NORWAY PLACE
DALLAS TX 75230

PHONE: (214) 500-8548 **FAX:** (214) 954-7499

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/03/2016

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030401

ACADIA ASSISTED LIVING
3344 FOREST LN
DALLAS **TX** 75234

Phone (469) 619-0687 **Fax** (972) 620-0514

TOTAL Lic Capacity: 108 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 108 **TITLE 18/19:** 0

Owner Information

SLH 2014 MANAGER LLC
303 EAST WACKER DR ,STE 2400
CHICAGO IL 60601

PHONE: (312) 673-4387 **FAX:** (312) 673-4487

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/31/2016

County **DALLAS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 001275

ADA M KING ADULT FOSTER HOME
1320 BAR HARBOR DR
DALLAS **TX** 75232
Phone (214) 375-5254 **Fax**

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

ADA M KING
1320 BAR HARBER DR
DALLAS TX 75232
PHONE: (214) 375-5254 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE C
License Exp Dt: 03/12/2018

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 050024

AGAPE PLACE I I
631 W 10TH ST
DALLAS **TX** 75208
Phone (214) 941-9925 **Fax** (214) 941-3822

TOTAL Lic Capacity: 24 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 24 **TITLE 18/19:** 0

Owner Information

AGAPE PLACE PERSONAL CARE HOMES INC
738 W 10TH ST
DALLAS TX 75208
PHONE: (214) 941-9925 **FAX:** (214) 941-3822
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/03/2017

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000871

AGAPE PLACE PERSONAL CARE HOME
801 W 10TH ST
DALLAS **TX** 75208
Phone (214) 941-9925 **Fax** (214) 941-3822

TOTAL Lic Capacity: 28 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 28 **TITLE 18/19:** 0

Owner Information

AGAPE PLACE PERSONAL CARE HOMES INC
738 W 10TH ST
DALLAS TX 75208
PHONE: (214) 941-9925 **FAX:** (214) 941-3822
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/03/2016

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104962

AIMEE'S HOUSE, INC.
7508 CHATTINGTON DRIVE
DALLAS **TX** 75248
Phone (972) 788-1820 **Fax** (982) 788-1969

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

AIMEE'S HOUSE INCORPORATED
1119 DULA CIRCLE
DUNCANVILLE TX 75116
PHONE: (972) 709-7346 **FAX:** (972) 283-8127
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/19/2016

County **DALLAS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105680

ALBERT ASSISTED LIVING FACILITY
4666 LA RUE ST
DALLAS **TX** 75211
Phone (214) 566-7094 **Fax** (972) 442-8014

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

IMAOBONG UDOH AND AUGUSTINE UDOH
4666 LA RUE ST
DALLAS TX 75211
PHONE: (214) 566-7094 **FAX:** (972) 442-8014
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/02/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103315

ANGEL HANDS
3337 GLADIOLUS LN
DALLAS **TX** 75233
Phone (214) 337-9409 **Fax**

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

Owner Information

JANICE L AUSTIN-DOUGLAS
3337 GLADIOLUS LN
DALLAS TX 75233
PHONE: (214) 337-9409 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/31/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103029

ASSISTED LIVING AT SILVER GARDENS
3980 DEEP VALLEY DR
DALLAS **TX** 75244
Phone (214) 277-2413 **Fax** (972) 620-2259

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 8 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

ASSISTED LIVING AT SILVER GARDENS LLC
11869 ROSSER ROAD
DALLAS TX 75244
PHONE: (214) 529-3820 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/15/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104329

AT HOME ELDERLY LIVING, LLC
7541 ROYAL PLACE
DALLAS **TX** 75230
Phone (214) 403-0445 **Fax**

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

AT HOME ELDERLY LIVING, LLC
7541 ROYAL PLACE
DALLAS TX 75230
PHONE: (214) 264-1826 **FAX:** (214) 613-1036
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/23/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105690

AT HOME LUXURY ASSISTED LIVING II, LLC
6946 FOREST LANE
DALLAS **TX** 75230
Phone (214) 361-8791 **Fax** (214) 613-1036

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

AT HOME LUXURY ASSISTED LIVING II LLC
6946 FOREST LANE
DALLAS TX 75230
PHONE: **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/25/2018

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000651

AUTUMN LEAVES PERSONAL CARE UNIT
1010 EMERALD ISLE DR
DALLAS **TX** 75218
Phone (214) 328-4161 **Fax** (214) 319-9184

TOTAL Lic Capacity: 58 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 58 **TITLE 18/19:** 0

Owner Information

LCS-AL LLC
CAPITAL SQUARE ,800 LOCUST ST, STE 820
DES MOINES IA 50309
PHONE: (515) 875-4651 **FAX:** (515) 875-4780
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/30/2018

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 010380

AVALON MEMORY CARE - ALLENCREST
4330 ALLENCREST
DALLAS **TX** 75244
Phone (214) 752-7050 **Fax** (214) 752-7054

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

AVALON DEMENTIA CARE MANAGEMENT, LLC
1625 N STEMMONS FRWY
DALLAS TX 75207
PHONE: (214) 752-7050 **FAX:** (214) 752-7054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/30/2018

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030202

AVALON MEMORY CARE - HUGHES CIRCLE
13215 HUGHES CIR
DALLAS **TX** 75240
Phone (214) 752-7050 **Fax** (214) 752-7054

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 10 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

AVALON DEMENTIA CARE MANAGEMENT, LLC
1625 N STEMMONS FRWY
DALLAS TX 75207
PHONE: (214) 752-7050 **FAX:** (214) 752-7054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/30/2018

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030224

AVALON RESIDENTIAL CARE HOMES INC
6908 QUARTERWAY
DALLAS **TX** 75248

Phone (972) 503-8361 **Fax** (972) 503-8361

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 10 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

AVALON RESIDENTIAL CARE HOMES INC
1625 N STEMMONS FRWY
DALLAS TX 75207

PHONE: (214) 752-7050 **FAX:** (214) 752-7054

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/12/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030106

AVALON RESIDENTIAL CARE HOMES INC
7355 ROYAL CIRCLE
DALLAS **TX** 75230

Phone (214) 691-6457 **Fax** (214) 752-7054

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 10 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

AVALON RESIDENTIAL CARE HOMES INC
1625 N STEMMONS FRWY
DALLAS TX 75207

PHONE: (214) 752-7050 **FAX:** (214) 752-7054

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/30/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030065

AVALON RESIDENTIAL CARE HOMES INC
7315 GLENDORA AVE
DALLAS **TX** 75230

Phone (214) 373-8617 **Fax** (214) 373-8617

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 10 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

AVALON RESIDENTIAL CARE HOMES INC
1625 N STEMMONS FRWY
DALLAS TX 75207

PHONE: (214) 752-7050 **FAX:** (214) 752-7054

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/10/2016

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030058

AVALON RESIDENTIAL CARE HOMES INC
6217 CRESTMERE DR
DALLAS **TX** 75240

Phone (972) 866-8859 **Fax** (214) 752-7054

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 12 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

AVALON RESIDENTIAL CARE HOMES INC
1625 N STEMMONS FRWY
DALLAS TX 75207

PHONE: (214) 752-7050 **FAX:** (214) 752-7054

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/06/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030116

AVALON RESIDENTIAL CARE HOMES, INC
7212 CANONGATE DR
DALLAS **TX** 75248

Phone (972) 250-1596 **Fax** (972) 250-1596

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 8 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

AVALON RESIDENTIAL CARE HOMES INC
1625 N STEMMONS FRWY
DALLAS TX 75207

PHONE: (214) 752-7050 **FAX:** (214) 752-7054

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/29/2017

County **DALLAS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 100846

BAKERS HOME
6125 SINGING HILLS
DALLAS **TX** 75241

Phone (214) 372-8490 **Fax** (972) 228-1628

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

REGINA A JOHNSON
6125 SINGING HILLS DR
DALLAS TX 75241

PHONE: (214) 372-8490 **FAX:** (972) 228-1628

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE C
License Exp Dt: 11/01/2016

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105593

BELMONT VILLAGE TURTLE CREEK TENANT, LLC
3535 N. HALL STREET
DALLAS **TX** 75219
Phone (214) 559-7015 **Fax** (214) 559-2663

TOTAL Lic Capacity: 225 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 31 **TITLE19:** 0
PRIVATE Beds: 225 **TITLE 18/19:** 0

Owner Information

BELMONT VILLAGE TURTLE CREEK TENANT LLC
4500 DORR ST
TOLEDO OH 73615
PHONE: (419) 247-2800 **FAX:** (419) 247-2826
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/01/2017

County **DALLAS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103592

BLUFFMAN HOUSE
5557 BLUFFMAN DRIVE
DALLAS **TX** 75241
Phone (214) 484-4981 **Fax**

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

Owner Information

VANESSA ALVAREZ DBA BLUFFMAN HOUSE
PO BOX 17828
FORT WORTH TX 76102
PHONE: (214) 693-9089 **FAX:** (817) 886-6425
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/11/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103242

BRANCHCREST ASSISTED LIVING
15541 BRANCHCREST CIR
DALLAS **TX** 75248
Phone (972) 677-7891 **Fax** (972) 240-5468

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

MARILYN H JACKSON
3018 WEATHER VANE LN
DALLAS TX 75228
PHONE: (214) 930-6346 **FAX:** (972) 240-5468
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/13/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000371

BROOKDALE LAKE HIGHLANDS
9715 PLANO RD
DALLAS **TX** 75238
Phone (214) 343-7445 **Fax** (214) 343-9193

TOTAL Lic Capacity: 116 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 26 **TITLE19:** 0
PRIVATE Beds: 116 **TITLE 18/19:** 0

Owner Information

ESC-NGH, LP
111 WESTWOOD PL ,STE 400
BRENTWOOD TN 37027
PHONE: (206) 298-2909 **FAX:** (206) 301-4500
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/01/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000978

BROOKDALE PRESTON
12400 PRESTON RD
DALLAS **TX** 75230
Phone (972) 661-3111 **Fax** (972) 661-9551

TOTAL Lic Capacity: 107 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 28 **TITLE19:** 0
PRIVATE Beds: 107 **TITLE 18/19:** 0

Owner Information

S-H OPCO PRESTON LLC
1920 MAIN ST ,STE 1200
IRVINE CA 92614
PHONE: (949) 407-0700 **FAX:** (949) 407-8000
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/29/2018

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 010356

BROOKDALE WHITE ROCK
9271 WHITE ROCK TRL
DALLAS **TX** 75238
Phone (214) 691-7400 **Fax** (214) 340-3044

TOTAL Lic Capacity: 56 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 56 **TITLE19:** 0
PRIVATE Beds: 56 **TITLE 18/19:** 0

Owner Information

ESC IV LP
111 WESTWOOD PL ,STE 400
BRENTWOOD TN 37027
PHONE: (414) 918-5441 **FAX:** (414) 918-5054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/31/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000532

C C YOUNG MEMORIAL HOME
4829 W LAWTHER DR
DALLAS **TX** 75214
Phone (214) 827-8080 **Fax** (214) 841-2890

TOTAL Lic Capacity: 55 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 55 **TITLE19:** 0
PRIVATE Beds: 55 **TITLE 18/19:** 0

Owner Information

C C YOUNG MEMORIAL HOME
4847 W LAWTHER DR ,STE 100
DALLAS TX 75214
PHONE: (214) 827-8080 **FAX:** (214) 841-2890
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/09/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 100042

C C YOUNG MEMORIAL HOME
4847 WEST LAWTHER DR STE 100
DALLAS **TX** 75214
Phone (214) 827-8080 **Fax** (214) 841-2890

TOTAL Lic Capacity: 88 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 88 **TITLE 18/19:** 0

Owner Information

C C YOUNG MEMORIAL HOME
4847 W LAWTHER DR ,STE 100
DALLAS TX 75214
PHONE: (214) 827-8080 **FAX:** (214) 841-2890
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/26/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030302

CARUTH HAVEN COURT
5585 CARUTH HAVEN LN
DALLAS **TX** 75225
Phone (214) 871-2155 **Fax** (214) 368-7344

TOTAL Lic Capacity: 95 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 95 **TITLE19:** 0
PRIVATE Beds: 95 **TITLE 18/19:** 0

Owner Information

CARUTH HAVEN TRS LLC
189 S ORANGE AVE ,STE 1700
ORLANDO FL 32801
PHONE: (407) 999-7679 **FAX:** (407) 999-5210
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/22/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104112

CHANDLER WAY ASSISTED LIVING
9606 MOSS FARM
DALLAS **TX** 75243
Phone (214) 755-7019 **Fax** (214) 503-3465

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 9 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

CHANDLER WAY ASSISTED LIVING LLC
9606 MOSS FARM LANE
DALLAS TX 75243
PHONE: (214) 755-7019 **FAX:** (214) 503-3465
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/28/2017

County **DALLAS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101308

COLES RESIDENTIAL HOME
1364 GILLETTE ST
DALLAS **TX** 75217
Phone (214) 391-8097 **Fax**

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

Owner Information

BARBARA J COLE
1364 GILLETTE ST
DALLAS TX 75217
PHONE: (214) 391-8097 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 06/02/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030151

COMMUNITY HOMES FOR ADULTS INC
15606 MOONDUST DR
DALLAS **TX** 75248
Phone (214) 373-8600 **Fax** (214) 373-8601

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

Owner Information

COMMUNITY HOMES FOR ADULTS INCORPORATED
13101 PRESTON RD ,STE 312
DALLAS TX 75240
PHONE: (214) 373-8600 **FAX:** (214) 373-8601
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/28/2015

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000687

COMMUNITY HOMES FOR ADULTS INC
7628 VILLAGE TRAIL DR
DALLAS **TX** 75254-8024
Phone (972) 239-7206 **Fax** (972) 239-6147

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

Owner Information

COMMUNITY HOMES FOR ADULTS INCORPORATED
13101 PRESTON RD ,STE 312
DALLAS TX 75240
PHONE: (214) 373-8600 **FAX:** (214) 373-8601
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/25/2016

County **DALLAS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101446

DARNELL RESIDENTIAL CARE
7532 GAYGLEN DR
DALLAS **TX** 75217
Phone (214) 398-8642 **Fax** (214) 398-8642

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

JACQUELINE DARNELL
7532 GAYGLEN DR
DALLAS TX 75217
PHONE: (214) 398-8642 **FAX:** (214) 398-8642
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/19/2017

County **DALLAS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103736

DELLA'S RESIDENTIAL CARE
1363 OWEGA AVE
DALLAS **TX** 75216
Phone (214) 374-1636 **Fax**

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

DELLA A WASHINGTON
1363 OWEGA AVE
DALLAS TX 75216
PHONE: (214) 374-1636 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/06/2017

County **DALLAS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103393

DESOTO TX ARBOR HOUSE LP
8027 W VIRGINIA
DALLAS **TX** 75237
Phone (972) 298-1331 **Fax**

TOTAL Lic Capacity: 52 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 52 **TITLE19:** 0
PRIVATE Beds: 52 **TITLE 18/19:** 0

Owner Information

DESOTO TX ARBOR HOUSE, LP
8027 WEST VIRGINIA
DALLAS TX 75237
PHONE: (405) 801-2879 **FAX:** (405) 360-3301
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/13/2016

County **DALLAS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105061

DESTINY ROSE RESIDENTIAL CARE FACILITY
1620 GLEN AVE
DALLAS **TX** 75216
Phone (214) 778-7228 **Fax** (214) 377-5009

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

Owner Information

TONI MARTIN-MOORE
1620 GLEN AVE
DALLAS TX 75216
PHONE: (214) 778-7228 **FAX:** (214) 377-5009
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 06/27/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000383

EVERGREEN ASSISTED LIVING LLC
6521 CLEARHAVEN CIR
DALLAS **TX** 75248
Phone (972) 661-3480 **Fax** (972) 661-3480

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

Owner Information

EVERGREEN ASSISTED LIVING LLC
16401 AMBERWOOD RD
DALLAS TX 75248
PHONE: (972) 733-2988 **FAX:** (972) 930-7966
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/30/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103088

EVERGREEN ASSISTED LIVING LLC
16401 AMBERWOOD RD
DALLAS **TX** 75248
Phone (972) 735-9604 **Fax**

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 8 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

EVERGREEN ASSISTED LIVING LLC
16401 AMBERWOOD RD
DALLAS TX 75248
PHONE: (972) 733-2988 **FAX:** (972) 930-7966
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/28/2016

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101550

EVERGREEN ASSISTED LIVING LLC
6322 PINEVIEW RD
DALLAS **TX** 75248
Phone (972) 233-2470 **Fax** (972) 575-5303

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

EVERGREEN ASSISTED LIVING LLC
16401 AMBERWOOD RD
DALLAS TX 75248
PHONE: (972) 733-2988 **FAX:** (972) 930-7966
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/20/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104581

EVERGREEN ASSISTED LIVING, LLC
16830 HUNTERS POINT DR
DALLAS **TX** 75248
Phone (214) 575-5300 **Fax** (214) 575-5303

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

EVERGREEN ASSISTED LIVING LLC
16401 AMBERWOOD RD
DALLAS TX 75248
PHONE: (972) 733-2988 **FAX:** (972) 930-7966
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/11/2017

County **DALLAS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103092

FAITH HOME ASSISTED LIVING
2155 GAYLORD
DALLAS **TX** 75227
Phone (214) 275-5791 **Fax** (972) 496-8432

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

Owner Information

FAITH ASSISTED LIVING LLC
2155 GAYLORD
DALLAS TX 75227
PHONE: (469) 733-3261 **FAX:** (214) 275-5791
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/01/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105845

FAITH MINISTRIES OF TEXAS
1537 GILLETTE ST.
DALLAS **TX** 75217
Phone (469) 774-3053 **Fax**

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

FAITH MINISTRIES OF TEXAS
1229 E. PLEASANT RUN RD. ,STE. 124
DESOTO TX 75115
PHONE: (469) 774-3053 **FAX:** (800) 381-2143
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/31/2017

County **DALLAS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103063

FIVE STAR QUARTERS INC
4023 MEHALIA DRIVE
DALLAS **TX** 75241
Phone (972) 225-8872 **Fax**

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

FIVE STAR QUARTERS INC
4023 MEHALIA DR
DALLAS TX 75241
PHONE: **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/26/2016

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101878

FOWLER CHRISTIAN APARTMENTS INC
105 JULIETTE FOWLER ST
DALLAS **TX** 75214
Phone (214) 821-4061 **Fax** (214) 818-0345

TOTAL Lic Capacity: 25 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 25 **TITLE 18/19:** 0

Owner Information

FOWLER CHRISTIAN APARTMENTS INC
105 JULIETTE FOWLER ST
DALLAS TX 75214
PHONE: (214) 821-4061 **FAX:** (214) 818-0345
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/17/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000541

GRACE PRESBYTERIAN VILLAGE
550 E ANN ARBOR AVE
DALLAS **TX** 75216
Phone (214) 376-1701 **Fax** (214) 376-4350

TOTAL Lic Capacity: 71 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 28 **TITLE19:** 0
PRIVATE Beds: 71 **TITLE 18/19:** 0

Owner Information

GRACE PRESBYTERIAN MINISTRIES INC
550 E ANN ARBOR AVE
DALLAS TX 75216
PHONE: (214) 376-1701 **FAX:** (214) 376-8694
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/25/2018

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 050166

GRACEFIELD RESIDENTIAL CAREHOME
7412 GRACEFIELD LN
DALLAS **TX** 75248
Phone (214) 207-6605 **Fax**

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

DELINDA RICHARDSON
10455 N CENTRAL EXP# 109 ,BOX 294
DALLAS TX 75231
PHONE: (214) 207-6605 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/30/2017

County **DALLAS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102136

GRIFFINS HOMECARE HAVEN
1208 WHISPERING CIR
DALLAS **TX** 75241
Phone (214) 372-6831 **Fax** (214) 372-1743

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

DARRENCE E GRIFFIN
1208 WHISPERING CIR
DALLAS TX 75241
PHONE: (214) 372-6831 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/09/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101573

HAZELS HOME CARE LLC
533 HIGHFALL DRIVE
DALLAS **TX** 75232
Phone (972) 224-8070 **Fax** (972) 224-8747

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

HAZEL'S HOME CARE LLC
820 E WINTERGREEN RD
DESOTO TX 75115
PHONE: (214) 372-2054 **FAX:** (214) 374-7721
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/30/2016

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101648

HAZEL'S HOME CARE LLC
4149 FORTUNE
DALLAS **TX** 75216
Phone (214) 372-2054 **Fax** (214) 374-7721

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

Owner Information

HAZEL'S HOME CARE LLC
820 E WINTERGREEN RD
DESOTO TX 75115
PHONE: (214) 372-2054 **FAX:** (214) 374-7721
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/30/2016

County **DALLAS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 050499

HELEN'S CARE
2318 MORRELL AVE
DALLAS **TX** 75203
Phone (214) 946-8697 **Fax**

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

HELENS CARE INC
2318 MORRELL AVE
DALLAS TX 75203
PHONE: (817) 360-3201 **FAX:** (214) 946-8697
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 06/09/2018

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 050617

HELPING HANDS CARE INC
2923 GLADIOLUS LN
DALLAS **TX** 75233
Phone (214) 467-8781 **Fax**

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

HELPING HANDS CARE INC
2923 GLADIOULS LN
DALLAS TX 75233
PHONE: (214) 467-8781 **FAX:** (972) 559-2090
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/24/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101130

HILLCREST HOUSE
11240 HILLCREST RD
DALLAS **TX** 75230
Phone (214) 696-1643 **Fax**

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 9 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

GOLD CREST RESIDENTIAL CARE LLC
11240 HILLCREST
DALLAS TX 75359
PHONE: (214) 827-1878 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/26/2017

County **DALLAS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103595

HOME OF HOPE
2539 KIRKLEY ST
DALLAS **TX** 75241
Phone (214) 372-1492 **Fax** (214) 372-1492

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

ANGELA PROX
2539 KIRKLEY ST
DALLAS TX 75241
PHONE: (469) 939-0124 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/30/2017

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105825

HOUSE OF VICTORY
2819 AINWICK CT
DALLAS **TX** 75227
Phone (214) 275-4676 **Fax** (469) 223-0036

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

VALERIA BROWN
2819 AINWICK CT
DALLAS TX 75227
PHONE: (469) 569-0288 **FAX:** (469) 223-0036
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/17/2016

County **DALLAS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102212

HURD SENIOR CARE HOME
1530 RUSSELL GLEN LN
DALLAS **TX** 75232
Phone (214) 371-3539 **Fax** (214) 376-4510

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

BELINDA J HURD
1530 RUSSELL GLEN LN
DALLAS TX 75232
PHONE: (214) 371-3539 **FAX:** (214) 376-4510
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/08/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 050738

INSPIRATIONAL CARE
707 HOKE SMITH
DALLAS **TX** 75224
Phone (214) 948-6534 **Fax** (972) 274-0698

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

LILLIAN RENA GLOVER
707 HOKE SMITH DR
DALLAS TX 75224
PHONE: (214) 948-6534 **FAX:** (972) 274-0698
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/04/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 050139

JACKSONS PLACE
7615 MEADOW RD
DALLAS **TX** 75230
Phone (214) 295-4632 **Fax** (972) 248-8995

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

EGANZA INCORPORATED
101 SOUTH COIT ,STE 36-282
RICHARDSON TX 75080
PHONE: (469) 235-8195 **FAX:** (972) 733-1863
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/01/2016

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103659

JACKSONS PLACE
7210 DUFFIELD DR
DALLAS **TX** 75248
Phone (972) 248-9795 **Fax** (972) 733-1863

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

EGANZA INCORPORATED
101 SOUTH COIT ,STE 36-282
RICHARDSON TX 75080
PHONE: (469) 235-8195 **FAX:** (972) 733-1863
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/15/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105873

JACKSONS PLACE
9010 WOODHURST DR
DALLAS **TX** 75243
Phone (214) 242-9882 **Fax** (972) 733-1863

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

EGANZA INCORPORATED
101 SOUTH COIT ,STE 36-282
RICHARDSON TX 75080
PHONE: (469) 235-8195 **FAX:** (972) 733-1863
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/25/2016

County **DALLAS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102657

JENNYS RESIDENT GROUP CARE #3
7306 HARDWOOD TRL
DALLAS **TX** 75249
Phone (214) 356-7334 **Fax** (214) 376-0309

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

JENNIFER ELLIS
808 W RED BIRD LN
DALLAS TX 75232
PHONE: (214) 356-7334 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/04/2017

County **DALLAS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 100028

JONES BOARD AND CARE
612 MISTY GLEN LN
DALLAS **TX** 75232
Phone (214) 372-6313 **Fax** (972) 230-4321

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

WYOMIA JONES
1012 SOUTHLAKE DR
DESOTO TX 75115
PHONE: (972) 230-2448 **FAX:** (972) 230-4321
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/31/2016

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102479

JOY ASSISTED LIVING INC
3208 PLUMSTEAD DR
DALLAS **TX** 75228
Phone (214) 367-8944 **Fax** (214) 367-8944

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

JOY ASSISTED LIVING II INC
2128 GREEN POINT ST
DALLAS TX 75228
PHONE: (214) 484-9943 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/16/2018

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105940

JULIETTE FOWLER ASSISTED LIVING
1260 ABRAMS
DALLAS **TX** 75214
Phone (214) 827-0813 **Fax**

TOTAL Lic Capacity: 55 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 25 **TITLE19:** 0
PRIVATE Beds: 55 **TITLE 18/19:** 0

Owner Information

JULIETTE FOWLER HOMES INC
1234 ABRAMS RD
DALLAS TX 75214
PHONE: (214) 827-0813 **FAX:** (214) 827-7021
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/26/2018

County **DALLAS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102840

KINGS HELPING HAND INC
421 GLEN OAKS BLVD
DALLAS **TX** 75232
Phone (214) 374-1880 **Fax** (214) 374-0209

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

KINGS HELPING HAND INC
421 GLEN OAKS
DALLAS TX 75232
PHONE: (214) 374-1880 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/14/2017

County **DALLAS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105062

KIYA'S & KETHAN'S HAVEN ASSISTED LIVING
1611 WINDCHIME DR
DALLAS **TX** 75224
Phone (214) 467-4933 **Fax** (214) 774-9443

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

DEIDRA WHYETE-BABERS
1611 WINDCHIME DR
DALLAS TX 75224
PHONE: (214) 467-4933 **FAX:** (214) 774-9443
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/16/2016

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106161

LAKEWEST ASSITED LIVING
3494 KINGBRIDGE STREET
DALLAS **TX** 75212
Phone (469) 206-0640 **Fax**

TOTAL Lic Capacity: 128 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 128 **TITLE 18/19:** 0

Owner Information

LW ALF OPS CO, LLC
1500 WATERS RIDGE DR
LEWISVILLE TX 75057
PHONE: (214) 392-9991 **FAX:** (972) 899-4806
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/09/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 100715

LEGACY AT PRESTON HOLLOW
11409 N CENTRAL EXPWY
DALLAS **TX** 75243
Phone (214) 363-5100 **Fax** (214) 363-5133

TOTAL Lic Capacity: 54 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 54 **TITLE 18/19:** 0

Owner Information

CHG SENIOR LIVING PRESTON HOLLOW, LLC
227 E. EDGEWOOD DRIVE
FRIENDSWOOD TX 77546
PHONE: (281) 482-9700 **FAX:** (281) 482-9705
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/04/2018

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102140

LEXINGTON PLACE ASSISTED LIVING HOMES
7205 LAVENDALE CIR
DALLAS **TX** 75230
Phone (214) 361-4886 **Fax** (214) 272-3338

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 10 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

LEXINGTON PLACE ASSISTED LIVING HOMES INC
3925 ROYAL LN
DALLAS TX 75229
PHONE: (214) 361-4886 **FAX:** (214) 272-3338
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/31/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101218

LEXINGTON PLACE ASSISTED LIVING HOMES INC
7125 MERRIMAN PKWY
DALLAS **TX** 75231
Phone (214) 361-4886 **Fax** (214) 272-3338

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 10 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

LEXINGTON PLACE ASSISTED LIVING HOMES INC
3925 ROYAL LN
DALLAS TX 75229
PHONE: (214) 361-4886 **FAX:** (214) 272-3338
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/08/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000391

LEXINGTON PLACE ASSISTED LIVING HOMES MEADOW
7123 MEADOW RD
DALLAS **TX** 75230
Phone (214) 361-4886 **Fax** (214) 272-3338

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 10 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

LEXINGTON PLACE ASSISTED LIVING HOMES INC
3925 ROYAL LN
DALLAS TX 75229
PHONE: (214) 361-4886 **FAX:** (214) 272-3338
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/17/2018

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030211

LEXINGTON PLACE ASSISTED LIVING HOMES ROYAL
3925 ROYAL LN
DALLAS **TX** 75229
Phone (214) 654-0483 **Fax** (214) 272-3338

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 10 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

LEXINGTON PLACE ASSISTED LIVING HOMES INC
3925 ROYAL LN
DALLAS TX 75229
PHONE: (214) 361-4886 **FAX:** (214) 272-3338
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/17/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030208

LEXINGTON PLACE ASSISTED LIVING HOMES SPANKY BRANCH
6906 SPANKY BRANCH
DALLAS **TX** 75248
Phone (972) 380-0418 **Fax** (972) 380-0418

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 10 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

LEXINGTON PLACE ASSISTED LIVING HOMES INC
3925 ROYAL LN
DALLAS TX 75229
PHONE: (214) 361-4886 **FAX:** (214) 272-3338
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/17/2017

County **DALLAS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104547

LINDA'S HOME HEALTH CARE
10208 HILLHOUSE
DALLAS **TX** 75227
Phone (214) 484-2968 **Fax**

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

LINDA WILLIAMS-WHITE
10204 HILLHOUSE
DALLAS TX 75227
PHONE: (214) 484-2968 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 06/27/2017

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105993

LOYDS OF DALLAS II ENTERPRISES LLC
7260 E. MOCKINGBIRD LANE
DALLAS **TX** 75214
Phone (214) 924-5446 **Fax**

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 8 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

LOYDS OF DALLAS II ENTERPRISES LLC
7214 RUTGERS DR
DALLAS TX 75214
PHONE: (214) 208-4445 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/29/2016

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105045

MANCHESTER PLACE LLC
1438 TRANQUILLA
DALLAS **TX** 75218
Phone (972) 423-3600 **Fax** (972) 423-5889

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

MANCHESTER PLACE LLC
7109 SPRING VALLEY RD.
DALLAS TX 75254
PHONE: (972) 423-3600 **FAX:** (972) 423-5889
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/27/2016

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103885

MANCHESTER PLACE LLC
7109 SPRING VALLEY
DALLAS **TX** 75240
Phone (972) 247-2228 **Fax** (972) 241-5889

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

MANCHESTER PLACE LLC
7109 SPRING VALLEY RD.
DALLAS TX 75254
PHONE: (972) 423-3600 **FAX:** (972) 423-5889
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/29/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105262

MANCHESTER PLACE LLC
7701 QUEENSFERRY DRIVE
DALLAS **TX** 75248
Phone (972) 423-3600 **Fax** (972) 423-5889

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

MANCHESTER QUEENS FERRY LLC
5720 LBJ FREEWAY ,SUITE 630
DALLAS TX 75240
PHONE: (972) 423-3600 **FAX:** (972) 423-5889
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/01/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103915

MANCHESTER ST. MICHAELS, LLC
10754 ST MICHAELS
DALLAS **TX** 75230
Phone (214) 987-2710 **Fax** (972) 432-3600

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

MANCHESTER ST. MICHAELS, LLC
5720 LBJ FRWY ,STE 630
DALLAS TX 75240
PHONE: (972) 423-3600 **FAX:** (972) 423-5889
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/09/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000539

MONTICELLO WEST
5114 MCKINNEY AVE
DALLAS **TX** 75205
Phone (214) 528-0660 **Fax** (214) 520-2511

TOTAL Lic Capacity: 159 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 49 **TITLE19:** 0
PRIVATE Beds: 159 **TITLE 18/19:** 0

Owner Information

LCS-MW LLC
CAPITAL SQUARE, 800 LOCUST ST ,STE 820
DES MOINES IA 50309
PHONE: (515) 875-4671 **FAX:** (515) 875-4780
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/30/2018

County **DALLAS** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105579

MORNING STARR NEW BEGINNINGS
3935 OAK ARBOR DR
DALLAS **TX** 75233
Phone (469) 236-4913 **Fax** (972) 224-0088

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

MORNING STARR NEW BEGINNINGS
3935 OAK ARBOR
DALLAS TX 75233
PHONE: (469) 236-4913 **FAX:** (972) 218-9246
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/11/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103515

MORNING STARR NEW BEGINNINGS
814 AMAROSA RD
DALLAS **TX** 75217
Phone (469) 236-4913 **Fax** (972) 224-0088

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

MORNING STARR NEW BEGINNINGS
9016 TAMPAS LN
DALLAS TX 75227
PHONE: (469) 236-4913 **FAX:** (972) 224-0088
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/25/2016

County **DALLAS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106244

MORNING STARR NEW BEGINNINGS
9016 TAMPAS LN
DALLAS **TX** 75227
Phone (469) 236-4913 **Fax** (972) 224-0088

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

MORNING STARR NEW BEGINNINGS
9016 TAMPAS LN
DALLAS TX 75227
PHONE: (469) 236-4913 **FAX:** (972) 224-0088
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/13/2018

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104808

NEW HORIZON HOMES LLC,
6806 ROCKY TOP CIRCLE
DALLAS **TX** 75252
Phone (972) 248-6316 **Fax**

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

NEW HORIZON HOMES LLC,
9826 BENT BRANCH LANE
DALLAS TX 75243
PHONE: (214) 469-4169 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/01/2018

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 100888

NORTH TEXAS PERSONAL CARE HOMES INC GRAYSTONE
17207 GRAYSTONE
DALLAS **TX** 75248
Phone (972) 732-1164 **Fax** (972) 732-6186

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

NORTH TEXAS PERSONAL CARE HOMES INC
17207 GRAYSTONE DR
DALLAS TX 75248
PHONE: (469) 360-4493 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/17/2017

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103114

OAKS ASSISTED LIVING
3327 SPRINGWOOD LN OAK ASSISTED LIVING
DALLAS **TX** 75233
Phone (214) 325-8628 **Fax**

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

OAKS RESIDENTIAL LIVING CORPORATION
3327 SPRINGWOOD LN
DALLAS TX 75233
PHONE: (214) 325-8628 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/13/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101259

ONLY THE STRONG SURVIVE ASSISTED LIVING
3018 WEATHER VANE LN
DALLAS **TX** 75228
Phone (214) 930-6346 **Fax** (972) 240-5468

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

MARILYN H JACKSON
3018 WEATHER VANE LN
DALLAS TX 75228
PHONE: (214) 930-6346 **FAX:** (972) 240-5468
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/02/2016

County **DALLAS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101927

ORA LEE'S GROUP HOME
5822 LAKE PLACID DR
DALLAS **TX** 75232
Phone (214) 374-3998 **Fax** (214) 374-3998

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

ORA L TURNER
5822 LAKE PLACID DR
DALLAS TX 75232
PHONE: (214) 374-3998 **FAX:** (214) 272-8772
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/28/2016

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030155

PARSONS HOUSE PRESTON HOLLOW LP
4205 W NW HWY
DALLAS **TX** 75220
Phone (214) 357-7900 **Fax** (214) 357-8677

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

PARSONS HOUSE PRESTON HOLLOW LP
1 NORTH CALLE CESAR CHAVEZ ,STE 200
SANTA BARBARA CA 93103
PHONE: (805) 564-3341 **FAX:** (805) 966-2009
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/06/2017

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030156

PARSONS HOUSE PRESTON HOLLOW LP
4205 W NW HWY
DALLAS **TX** 75220
Phone (214) 357-7900 **Fax** (214) 357-8677

TOTAL Lic Capacity: 51 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 51 **TITLE 18/19:** 0

Owner Information

PARSONS HOUSE PRESTON HOLLOW LP
1 NORTH CALLE CESAR CHAVEZ ,STE 200
SANTA BARBARA CA 93103
PHONE: (805) 564-3341 **FAX:** (805) 966-2009
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/06/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104690

PATHWAYS SENIOR LIVING LLC
4408 FOREST BEND ROAD
DALLAS **TX** 75244
Phone (214) 668-3758 **Fax** (972) 239-8696

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 8 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

PATHWAYS SENIOR LIVING LLC
2215 CEDAR SPRING RD
DALLAS TX 75201
PHONE: (214) 668-3758 **FAX:** (972) 863-8478
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/12/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105712

PEARL'S PLACE
1657 S. CORINTH ST RD.
DALLAS **TX** 75203
Phone (214) 374-7535 **Fax**

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

MY SECOND CHANCE INC
1657 S CORINTH STREET ROAD
DALLAS TX 75203
PHONE: (214) 374-1104 **FAX:** (214) 942-1167
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/16/2016

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000540

PRESBYTERIAN VILLAGE NORTH ASSISTED LIVING FACILITY
8750 WESTMINSTER TERRACE
DALLAS **TX** 75243
Phone (214) 355-9201 **Fax** (214) 355-9100

TOTAL Lic Capacity: 85 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 85 **TITLE 18/19:** 0

Owner Information

PRESBYTERIAN VILLAGE NORTH
8600 SKYLINE DR
DALLAS TX 75243
PHONE: (214) 355-9001 **FAX:** (214) 355-9050
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/01/2017

County **DALLAS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101775

RENAISSANCE ASSISTED LIVING LLC
7315 OAKSTONE DR
DALLAS **TX** 75249
Phone (972) 298-0507 **Fax** (817) 887-2359

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

Owner Information

RENAISSANCE ASSISTED LIVING LLC
7710 KITTERY LN
ARLINGTON TX 76002
PHONE: (817) 419-8909 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/18/2016

County **DALLAS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105715

RENEE'S HOUSE
5748 PLUM DALE ROAD
DALLAS **TX** 75241
Phone (469) 563-8884 **Fax** (469) 442-0121

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

Owner Information

MARQIESE SIMS
5748 PLUM DALE ROAD
DALLAS TX 75241
PHONE: (469) 563-8884 **FAX:** (469) 442-0121
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/17/2016

County **DALLAS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104943

SAGE OAK ASSISTED LIVING
5105 CREIGTHON DRIVE
DALLAS **TX** 75214
Phone (972) 807-2331 **Fax** (972) 807-2179

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 8 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

SAGE OAK HOLDINGS II, LLC
3824 CEDAR SPRINGS ,#512
DALLAS TX 75219
PHONE: (972) 807-2331 **FAX:** (972) 807-2179
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/30/2018

County **DALLAS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104427

SHIELD OF FAITH ASSISTED LIVING
1206 DEERWOOD STREET
DALLAS **TX** 75232
Phone (972) 224-7407 **Fax**

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

DENETTA SMITH
6611 GREENSPAN AVENUE
DALLAS TX 75232
PHONE: (972) 333-6282 **FAX:** (214) 371-3505
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/08/2016

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030103

SIGNATURE POINTE
14655 PRESTON RD
DALLAS **TX** 75254
Phone (972) 726-7575 **Fax** (972) 726-9742

TOTAL Lic Capacity: 76 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 28 **TITLE19:** 0
PRIVATE Beds: 76 **TITLE 18/19:** 0

Owner Information

LCS-SP LLC
CAPITAL SQUARE 400 LOCUST ST ,STE 820
DES MOINES IA 50309
PHONE: (515) 875-4671 **FAX:** (515) 875-4780
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/30/2018

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000942

SILVERADO SENIOR LIVING-TURTLE CREEK
3611 DICKASON AVE
DALLAS **TX** 75219
Phone (214) 559-0140 **Fax** (214) 559-0171

TOTAL Lic Capacity: 54 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 54 **TITLE19:** 0
PRIVATE Beds: 54 **TITLE 18/19:** 0

Owner Information

SUBTENANT 3611 DICKASON AVENUE LLC
4500 DORR ST
TOLEDO OH 43615
PHONE: (419) 247-2800 **FAX:** (419) 247-2826

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/11/2017

County **DALLAS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105219

SPEARS HOUSE OF CARE
734 SEABEACH ROAD
DALLAS **TX** 75232
Phone (972) 224-8704 **Fax** (972) 224-5747

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

SPEARS HOUSE OF CARE
734 SEABEACH ROAD
DALLAS TX 75232
PHONE: (972) 224-8704 **FAX:** (972) 224-5747

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/07/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104195

ST BERNARD ASSISTED LIVING FACILITY
6005 BLACKBERRY CIRCLE
DALLAS **TX** 75248
Phone (214) 930-6346 **Fax** (972) 240-5468

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

MARILYN H JACKSON
3018 WEATHER VANE LN
DALLAS TX 75228
PHONE: (214) 930-6346 **FAX:** (972) 240-5468

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 06/24/2018

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000406

ST JOSEPH'S RESIDENCE INC
330 W PEMBROKE AVE
DALLAS **TX** 75208-6532
Phone (214) 948-3597 **Fax** (214) 948-0358

TOTAL Lic Capacity: 89 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 89 **TITLE 18/19:** 0

Owner Information

ST JOSEPH'S RESIDENCE INC
330 W PEMBROKE AVE
DALLAS TX 75208-6532
PHONE: (214) 948-3597 **FAX:** (214) 948-0358

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/24/2018

County **DALLAS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102967

STELLA RD ASSISTED LIVING
1840 STELLA AVE
DALLAS **TX** 75203
Phone (214) 942-3215 **Fax** (214) 948-0204

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

Owner Information

AVIS L YOUNG SR
317 CARISSA CT
MESQUITE TX 75150
PHONE: (972) 226-1938 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/26/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102658

SUNRISE SENIOR LIVING OF HILLCREST
13001 HILLCREST RD
DALLAS **TX** 75240
Phone (972) 385-5267 **Fax** (972) 385-5268

TOTAL Lic Capacity: 115 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 43 **TITLE19:** 0
PRIVATE Beds: 115 **TITLE 18/19:** 0

Owner Information

SZR HILLCREST SENIOR LIVING LLC
10350 ORMSBY PARK PL ,STE 300
LOUISVILLE KY 40223
PHONE: (502) 357-9000 **FAX:** (503) 357-9441

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/26/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101142

T L C
7116 TOPHILL CIR
DALLAS **TX** 75248
Phone (214) 557-2183 **Fax** (972) 386-7927

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

T & JJ'S LOVING HANDS INC
7116 TOPHILL CR
DALLAS TX 75248
PHONE: (214) 557-2183 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/07/2017

County **DALLAS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102742

TALCO HOUSE INC
2328 TALCO DR
DALLAS **TX** 75241
Phone (214) 375-7075 **Fax** (214) 372-7149

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

Owner Information

TALCO HOUSE INC
2328 TALCO DR
DALLAS TX 75241
PHONE: (214) 375-7075 **FAX:** (214) 372-7149
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/17/2018

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105604

TEXSEN GROUP HOMES, LLC
3755 CROWN SHORE DR
DALLAS **TX** 75244
Phone (972) 241-6035 **Fax**

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

TEXSEN GROUP HOME LLC
4304 WILLIAMSON LANE
CARROLTON TX 75010
PHONE: (469) 892-5332 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/30/2016

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 050274

THE FAMILYS CHOICE
17217 GRAYSTONE DR
DALLAS **TX** 75248
Phone (972) 248-1075 **Fax** (972) 248-1075

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

ZJM ENTERPRISES INCORPORATED
2212 BLUEBONNET DRIVE
RICHARDSON TX 75082
PHONE: (469) 235-8195 **FAX:** (972) 675-0370
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/08/2016

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103967

THE FAMILY'S CHOICE
7405 HILLWOOD LANE
DALLAS **TX** 75248
Phone (972) 788-0874 **Fax** (972) 788-0872

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

ZJM ENTERPRISES INCORPORATED
2212 BLUEBONNET DRIVE
RICHARDSON TX 75082
PHONE: (469) 235-8195 **FAX:** (972) 675-0370
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/11/2018

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 050387

THE FAMILY'S CHOICE
7048 HILLWOOD LN
DALLAS **TX** 75248
Phone (972) 233-3228 **Fax** (972) 233-3228

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

ZJM ENTERPRISES INCORPORATED
2212 BLUEBONNET DRIVE
RICHARDSON TX 75082
PHONE: (469) 235-8195 **FAX:** (972) 675-0370
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/01/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000772

THE FORUM AT PARK LANE
7827 PARK LN
DALLAS **TX** 75225
Phone (214) 369-9905 **Fax** (214) 368-1760

TOTAL Lic Capacity: 38 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 38 **TITLE 18/19:** 0

Owner Information

FS TENANT POOL III TRUST
400 CENTRE ST
NEWTON MA 02458
PHONE: (617) 796-8387 **FAX:** (617) 658-1435
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/30/2016

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 001021

THE HOUSE OF HEARTS (HART) MISSION
700 CEDAR HILL AVE
DALLAS **TX** 75208
Phone (214) 943-7662 **Fax** (214) 943-7662

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

LORETTA HARLEN
700 CEDAR HILL AVE
DALLAS TX 75208
PHONE: (214) 943-7662 **FAX:** (214) 943-7662
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE C
License Exp Dt: 10/26/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101023

THE PLAZA AT EDGEMERE ASSISTED LIVING
8502 EDGEMERE
DALLAS **TX** 75225
Phone (214) 615-7045 **Fax** (214) 615-7046

TOTAL Lic Capacity: 101 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 31 **TITLE19:** 0
PRIVATE Beds: 101 **TITLE 18/19:** 0

Owner Information

NORTHWEST SENIOR HOUSING CORPORATION
8502 EDGEMERE RD
DALLAS TX 75225
PHONE: (469) 576-1345 **FAX:** (214) 623-6115
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/08/2018

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103556

THE RESERVE AT NORTH DALLAS
12271 COIT RD
DALLAS **TX** 75251
Phone (972) 866-7575 **Fax** (972) 702-9881

TOTAL Lic Capacity: 33 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 33 **TITLE 18/19:** 0

Owner Information

COIT SENIOR CARE, LLC
1000 LEGION PLACE ,STE 1750
ORLANDO FL 32801
PHONE: (407) 999-2400 **FAX:** (407) 999-7759
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/14/2018

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106147

THE TRADITION-LOVERS LANE ASSISTED LIVING AND MEMORY CARE
5855 MILTON AVENUE
DALLAS **TX** 75206
Phone (214) 361-2219 **Fax** (314) 361-2283

TOTAL Lic Capacity: 130 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 30 **TITLE19:** 0
PRIVATE Beds: 130 **TITLE 18/19:** 0

Owner Information

LOVERS TRADITION II, LP
5850 EAST LOVERS LANE
DALLAS TX 75206
PHONE: (214) 221-8200 **FAX:** (214) 221-8222
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/10/2017

County **DALLAS** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106306

THE TRADITION-PRESTONWOOD ASSISTED LIVING AND MEMORY CARE
5555 ARAPAHO ROAD
DALLAS **TX** 75248
Phone (972) 661-1880 **Fax** (972) 661-1881

TOTAL Lic Capacity: 130 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 46 **TITLE19:** 0
PRIVATE Beds: 130 **TITLE 18/19:** 0

Owner Information

PRESTONWOOD TRADITION AL LP
5555 ARAPAHO ROAD
DALLAS TX 75248
PHONE: (214) 221-8200 **FAX:** (214) 221-8222
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/17/2017

County **DALLAS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105832

TOTAL JOY LIVING
5015 MENEFEE
DALLAS **TX** 75227
Phone (214) 837-9646 **Fax**

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

TIFFANI ALLEN
1614 SUMMIT RIDGE DR
GARLAND TX 75043
PHONE: (214) 837-9646 **FAX:** (214) 381-9875
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/24/2017

County **DALLAS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102921

TRINITY RESIDENTIAL CARE
1427 CARAVAN TRAIL
DALLAS **TX** 75241
Phone (214) 374-7458 **Fax** (214) 242-4598

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

TRINITY RESIDENTIAL CARE
1427 CARAVAN TRAIL
DALLAS TX 75241
PHONE: (972) 217-0598 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/13/2018

County **DALLAS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104125

TRINITY-FAITH'S PLACE II
2205 INCA
DALLAS **TX** 75216
Phone (972) 814-3573 **Fax** (866) 582-6837

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

TRINITY-FAITH'S PLACE INC
PO BOX 1718
DESOTO TX 75123
PHONE: (214) 814-3573 **FAX:** (214) 374-5683
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/26/2018

County **DALLAS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103245

TRINITY-FAITH'S PLACE INC
2209 INCA
DALLAS **TX** 75216
Phone (972) 814-3573 **Fax** (866) 582-6837

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

Owner Information

TRINITY-FAITH'S PLACE INC
PO BOX 1718
DESOTO TX 75123
PHONE: (214) 814-3573 **FAX:** (214) 374-5683
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/04/2018

County **DALLAS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000430

V S MORALES PERSONAL CARE HOME FOR THE AGING
9508 CIRCLEWOOD DR @ ST ROSALIE
DALLAS **TX** 75217
Phone (972) 557-0279 **Fax** (214) 350-8760

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

ELIZABETH I PEREZ & ASSOCIATES INC
3120 W NORTHWEST HWY ,BLDG B
DALLAS TX 75220
PHONE: (214) 351-1212 **FAX:** (214) 350-8760
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/24/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104469

VILLAGES OF LAKE HIGHLANDS ASSISTED LIVING
8615 LULLWATER DR
DALLAS **TX** 75238
Phone (214) 221-0444 **Fax** (214) 221-1568

TOTAL Lic Capacity: 58 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 39 **TITLE19:** 0
PRIVATE Beds: 58 **TITLE 18/19:** 0

Owner Information

JSC LAKE HIGHLANDS OPERATIONS LP
1500 WATERS RIDGE DR
LEWISVILLE TX 75057
PHONE: (972) 899-4401 **FAX:** (972) 899-4806
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/04/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000542

WALNUT PLACE PC UNIT
5515 GLEN LAKES DR
DALLAS **TX** 75231
Phone (214) 361-8923 **Fax** (214) 361-4782

TOTAL Lic Capacity: 100 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 100 **TITLE 18/19:** 0

Owner Information

LCS-WP LLC
CAPITAL SQUARE ,800 LOCUST ST STE 820
DES MOINES IA 50309
PHONE: (515) 875-4671 **FAX:** (515) 875-4780
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/30/2018

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101109

WEISMER HOUSE
7038 LATTIMORE DRIVE
DALLAS **TX** 75252
Phone (972) 342-9783 **Fax**

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

SAFE PLACES 2003 LLC
PO BOX 795545
DALLAS TX 75379
PHONE: (972) 342-9783 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/06/2018

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 100851

WELLINGTON RESIDENTIAL CARE LLC
7304 CAMPBELL RD
DALLAS **TX** 75248
Phone (972) 490-6541 **Fax** (972) 490-6541

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

WELLINGTON RESIDENTIAL CARE LLC
10434 ROSSER CIRCLE
DALLAS TX 75229
PHONE: (214) 662-3639 **FAX:** (214) 352-8620
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/14/2016

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105843

WILSON ASSISTANT LIVING
1537 SUTTER
DALLAS **TX** 75216
Phone (469) 387-9761 **Fax** (214) 371-1433

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

Owner Information

SOMOVA WILSON
1537 SUTTER ST
DALLAS TX 75216
PHONE: **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/19/2016

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104038

WINDSOR SENIOR LIVING
7750 LBJ FRWY
DALLAS **TX** 75251
Phone (972) 661-9990 **Fax** (972) 661-9991

TOTAL Lic Capacity: 270 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 85 **TITLE19:** 0
PRIVATE Beds: 270 **TITLE 18/19:** 0

Owner Information

NIC 17 WINDSOR LEASING LLC
1345 AVENUE OF THE AMERICAS ,46TH FLOOR
NEW YORK NV 10105
PHONE: (469) 304-5033 **FAX:** (972) 608-9716
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/12/2016

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105996

A DAUGHTERS CARE
521 SHENANDOAH DR
DESOTO **TX** 75115
Phone (214) 400-8687 **Fax**

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

Owner Information

A DAUGHTERS CARE LLC
1237 CEDARBROOK TRAIL
LANCASTER TX 75146
PHONE: (214) 400-8687 **FAX:** (972) 748-2604
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/17/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104033

A-VICTORIAN'S PLACE
1003 WEST LAKE DR
DESOTO **TX** 75115
Phone (972) 224-9449 **Fax** (973) 224-9449

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

DOREEN V. GUILLORY
PO BOX 170082
DALLAS TX 75217
PHONE: (214) 560-8660 **FAX:** (469) 855-9138
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/11/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000814

BROOKDALE DESOTO
747 WEST PLEASANT RUN
DESOTO **TX** 75115-3838
Phone (972) 274-1700 **Fax** (972) 274-1488

TOTAL Lic Capacity: 58 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 58 **TITLE 18/19:** 0

Owner Information

BROOKDALE SENIOR LIVING COMMUNITIES INC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214
PHONE: (414) 918-5441 **FAX:** (414) 918-6076
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/01/2016

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105365

FREEMANS ASSISTED LIVING
500 CREEKTREE DRIVE
DESOTO **TX** 75115
Phone (972) 310-8741 **Fax** (888) 817-8064

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

Owner Information

NOLAN FREEMAN
500 CREEKTREE DRIVE
DESOTO TX 75115
PHONE: (972) 310-8741 **FAX:** (888) 817-8064
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/01/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 100513

GOD IS LOVE PERSONAL CARE HOME INC
231 CHARLES ST
DESOTO **TX** 75115
Phone (972) 228-4321 **Fax** (972) 228-4321

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

GOD IS LOVE PERSONAL CARE HOME INC
231 CHARLES ST
DESOTO TX 75115
PHONE: (972) 228-4321 **FAX:** (972) 228-4321
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/26/2018

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102991

HAZELS HOME CARE LLC
820 E WINTERGREEN RD
DESOTO **TX** 75115
Phone (214) 372-2054 **Fax** (214) 374-7721

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

HAZEL'S HOME CARE LLC
820 E WINTERGREEN RD
DESOTO TX 75115
PHONE: (214) 372-2054 **FAX:** (214) 374-7721
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/30/2016

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104194

PINNACLE ASSISTED LIVING
341 SQUIREBROOK DRIVE
DESOTO **TX** 75115
Phone (972) 223-3856 **Fax** (888) 847-8217

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

PINNACLE ASSISTED LIVING, INC
341 SQUIREBROOK DR
DESOTO TX 75115
PHONE: (972) 697-5461 **FAX:** (888) 847-8217
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/29/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103317

PROFESSIONAL CARE FACILITY 3
1008 SPRINGBROOK DR
DESOTO **TX** 75115
Phone (972) 224-0606 **Fax** (469) 913-8187

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

PROFESSIONAL CARE FACILITY INC
870 MAGNOLIA LN
LANCASTER TX 75146
PHONE: (972) 218-5534 **FAX:** (469) 913-8187
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/28/2018

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103650

RISING SUN RESIDENTIAL CARE FACILITY INC #2
325 SQUIREBROOK DR
DESOTO **TX** 75115
Phone (469) 245-4990 **Fax**

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

RISING SUN RESIDENTIAL CARE FACILITY INC
325 SQUIREBROOK DR
DESOTO TX 75115
PHONE: (469) 245-4990 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/10/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105752

THE HAVEN HOME
1216 HOLT AVE
DESOTO **TX** 75115
Phone (469) 734-7674 **Fax**

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

THE HAVEN HOME
1216 HOLT AVE
DESOTO TX 75115
PHONE: (972) 803-5605 **FAX:** (972) 803-5605
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/19/2016

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 100216

AIMEE'S HOUSE
1119 DULA CIR
DUNCANVILLE **TX** 75116
Phone (972) 709-7346 **Fax** (972) 283-8127

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

AIMEE'S HOUSE INCORPORATED
1119 DULA CIRCLE
DUNCANVILLE TX 75116
PHONE: (972) 709-7346 **FAX:** (972) 283-8127
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/28/2017

County **DALLAS** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030289

BROOKDALE FARMERS BRANCH
13505 WEBB CHAPEL RD
FARMERS BRANCH **TX** 75234
Phone (972) 241-3955 **Fax** (972) 241-4090

TOTAL Lic Capacity: 105 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 22 **TITLE19:** 0
PRIVATE Beds: 105 **TITLE 18/19:** 0

Owner Information

ESC-NGH, LP
111 WESTWOOD PL ,STE 400
BRENTWOOD TN 37027
PHONE: (206) 298-2909 **FAX:** (206) 301-4500
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/01/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101493

ABBA CARE ASSISTED LIVING-A
1207 HIGH GROVE DR
GARLAND **TX** 75041
Phone (972) 840-9292 **Fax** (972) 840-1511

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

ABBA CARE INC
1201 HIGH GROVE DR
GARLAND TX 75041
PHONE: (972) 840-9292 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/22/2018

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101492

ABBA CARE ASSISTED LIVING-B
1201 HIGH GROVE DR
GARLAND **TX** 75041

Phone (972) 840-9292 **Fax** (972) 840-9291

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

ABBA CARE INC
1201 HIGH GROVE DR
GARLAND TX 75041

PHONE: (972) 840-9292 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/22/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105839

AVALON MEMORY CARE - GARLAND
1150 COLONEL DRIVE
GARLAND **TX** 75043

Phone (214) 752-7050 **Fax** (214) 752-7054

TOTAL Lic Capacity: 24 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 24 **TITLE19:** 0
PRIVATE Beds: 24 **TITLE 18/19:** 0

Owner Information

AVALON DEMENTIA CARE MANAGEMENT, LLC
1625 N STEMMONS FRWY
DALLAS TX 75207

PHONE: (214) 752-7050 **FAX:** (214) 752-7054

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/30/2017

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104883

BETHEL SENIOR CARE AT WEST SHORE
2013 WEST SHORE DRIVE
GARLAND **TX** 75043

Phone (972) 278-7267 **Fax** (972) 278-7267

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

BETHEL SENIOR CARE LLC
3005 CLUB HILL DRIVE
GARLAND TX 75043

PHONE: (214) 566-9527 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/01/2018

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103900

BETHEL SENIOR CARE LLC
3005 CLUB HILL DR
GARLAND **TX** 75043

Phone (214) 566-9527 **Fax** (972) 926-4794

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

BETHEL SENIOR CARE LLC
3005 CLUB HILL DRIVE
GARLAND TX 75043

PHONE: (214) 566-9527 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/13/2017

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000696

BROOKDALE CLUB HILL
1321 COLONEL DR
GARLAND **TX** 75043

Phone (972) 278-8500 **Fax** (972) 271-9931

TOTAL Lic Capacity: 134 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 134 **TITLE 18/19:** 0

Owner Information

BLC-CLUB HILL LLC
111 WESTWOOD PLACE ,STE 400
BRENTWOOD TN 37027

PHONE: (615) 221-2250 **FAX:** (615) 221-8204

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/05/2017

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102820

GRAND BROOK MEMORY CARE OF GARLAND
5600 NORTH SHILOH RD
GARLAND **TX** 75044

Phone (972) 530-7700 **Fax** (972) 530-7707

TOTAL Lic Capacity: 46 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 46 **TITLE19:** 0
PRIVATE Beds: 46 **TITLE 18/19:** 0

Owner Information

GARLAND OPCO LLC
7708 SAN JACINTO PLACE ,UNIT 100
PLANO TX 75024

PHONE: (469) 331-8200 **FAX:** (469) 519-4151

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/23/2017

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104590

JOY ASSISTED LIVING INC
1614 JAMES GOOD LANE
GARLAND **TX** 75043

Phone (972) 278-7848 **Fax**

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 8 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

JOY ASSISTED LIVING INC
1614 JAMES GOOD LN
GARLAND TX 75043

PHONE: (972) 278-7848 **FAX:** (972) 278-5457

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/10/2017

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106028

MAYBERRY GARDENS
3260 N GARLAND AVE
GARLAND **TX** 75040

Phone (972) 675-3603 **Fax** (972) 675-3603

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 12 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

MAYBERRY GARDENS INC
3272 N GARLAND AVE
GARLAND TX 75040

PHONE: (972) 675-3603 **FAX:** (972) 675-3603

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/22/2017

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105352

MAYBERRY GARDENS ASSISTED LIVING
3258 N GARLAND AVE
GARLAND **TX** 75040

Phone (972) 675-3603 **Fax** (972) 675-3603

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

Owner Information

MAYBERRY GARDENS INC
3272 N GARLAND AVE
GARLAND TX 75040

PHONE: (972) 675-3603 **FAX:** (972) 675-3603

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/18/2016

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030413

MAYBERRY GARDENS ASSISTED LIVING 2
3252 N GARLAND AVE
GARLAND **TX** 75040

Phone (972) 675-0915 **Fax** (972) 675-3504

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

MAYBERRY GARDENS INC
3272 N GARLAND AVE
GARLAND TX 75040

PHONE: (972) 675-3603 **FAX:** (972) 675-3603

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/07/2017

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 010268

MAYBERRY GARDENS ASSISTED LIVING 3
3256 3260 3262 3264 3266 3268 3270 N GARLAND AVE
GARLAND **TX** 75040

Phone (972) 675-8572 **Fax** (972) 675-3504

TOTAL Lic Capacity: 79 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 79 **TITLE 18/19:** 0

Owner Information

MAYBERRY GARDENS INC
3272 N GARLAND AVE
GARLAND TX 75040

PHONE: (972) 675-3603 **FAX:** (972) 675-3603

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/08/2016

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105351

MAYBERRY GARDENS ASSISTED LIVING FACILITY
3254 N GARLAND AVE
GARLAND **TX** 75040

Phone (972) 675-3603 **Fax** (972) 675-3603

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

Owner Information

MAYBERRY GARDENS INC
3272 N GARLAND AVE
GARLAND TX 75040

PHONE: (972) 675-3603 **FAX:** (972) 675-3603

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/21/2016

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030292

MAYBERRY GARDENS INC
3250 N GARLAND AVE
GARLAND **TX** 75040
Phone (972) 414-6394 **Fax** (972) 675-3504

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

MAYBERRY GARDENS INC
3272 N GARLAND AVE
GARLAND TX 75040
PHONE: (972) 675-3603 **FAX:** (972) 675-3603
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/02/2017

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030394

SILVER CREEK ASSISTED LIVING GARLAND
1246 COLONEL DR
GARLAND **TX** 75043
Phone (469) 814-0412 **Fax**

TOTAL Lic Capacity: 118 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 118 **TITLE 18/19:** 0

Owner Information

SCAL GARLAND, LLC
2501 E HEBRON PKWY ,STE 100C
CARROLTON TX 75010
PHONE: (469) 814-0412 **FAX:** (469) 814-0292
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/02/2017

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104041

SPRINGFIELD SENIOR LIVING
1817 ROYAL CREST DR SPRINGFIELD SENIOR LIVING
GARLAND **TX** 75043
Phone (214) 501-2025 **Fax** (214) 501-2025

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

SPRINGFIELD SENIOR LIVING
1817 ROYAL CREST DR
GARLAND TX 75043
PHONE: (214) 501-2025 **FAX:** (214) 501-2025
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/26/2018

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 100067

TLC FOR SENIORS INC
1201 CARDIGAN ST
GARLAND **TX** 75040
Phone (972) 530-1671 **Fax** (972) 530-1671

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

TLC FOR SENIORS INC
PO BOX 452736
GARLAND TX 75045
PHONE: (972) 675-0480 **FAX:** (972) 530-1671
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/06/2018

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103872

WINTERS PARK ASSISTED LIVING AND MEMORY CARE
3450 WAGON WHEEL ROAD
GARLAND **TX** 75044
Phone (972) 530-4107 **Fax** (972) 530-8431

TOTAL Lic Capacity: 134 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 53 **TITLE19:** 0
PRIVATE Beds: 134 **TITLE 18/19:** 0

Owner Information

PM MANGAGEMENT - GARLAND AL LLC
1717 W 6TH ST ,STE 450
AUSTIN TX 78703
PHONE: (512) 340-7829 **FAX:** (877) 639-9530
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/01/2018

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103200

A HOUSE OF HOPE
2010 BURROWS TR
GRAND PRAIRIE **TX** 75052
Phone (972) 641-4505 **Fax** (972) 641-4505

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

SHIRLEY DABBS
2010 BURROWS TR
GRAND PRAIRIE TX 75052
PHONE: (972) 641-4505 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/24/2017

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 001020

FAMILY TIES SENIOR CITIZEN HOME INC
2109 BUTTERFIELD TRL
GRAND PRAIRIE **TX** 75052
Phone (972) 647-4096 **Fax** (972) 602-0666

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

FAMILY TIES SENIOR CITIZEN HOME INC
2109 BUTTERFIELD TRL
GRAND PRAIRIE TX 75052
PHONE: (972) 647-4096 **FAX:** (972) 602-0666
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/11/2017

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105270

PBH RESIDENTIAL CARE HOMES L P
921 NW 9TH ST
GRAND PRAIRIE **TX** 75050
Phone (214) 443-8180 **Fax** (972) 660-2204

TOTAL Lic Capacity: 11 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 11 **TITLE 18/19:** 0

Owner Information

PBH RESIDENTIAL CARE HOMES LP
604 DONNA LANE
BEDFORD TX 76022
PHONE: (469) 682-6670 **FAX:** (972) 660-2204
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/16/2017

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104792

PBH RESIDENTIAL CARE HOMES LP
902 N.W. 8TH ST
GRAND PRAIRIE **TX** 75050
Phone (972) 863-1000 **Fax** (972) 660-2204

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

Owner Information

PBH RESIDENTIAL CARE HOMES LP
604 DONNA LANE
BEDFORD TX 76022
PHONE: (469) 682-6670 **FAX:** (972) 660-2204
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/13/2017

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104869

RENON ASSISTED LIVING LLC
119 MATAMOROS STREET
GRAND PRAIRIE **TX** 75051
Phone (469) 441-3619 **Fax** (214) 412-2246

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

RENON ASSISTED LIVING LLC
119 MATAMOROA ST
GRAND PRAIRIE TX 75051
PHONE: (214) 412-2246 **FAX:** (214) 412-2246
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/02/2017

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030399

THE ESTATES AT GRAND PRAIRIE
1005 SW 3RD ST
GRAND PRAIRIE **TX** 75051
Phone (972) 237-1943 **Fax** (972) 237-5964

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

THE ESTATES AT GRAND PRAIRIE, INC
1005 SW 3RD ST
GRAND PRAIRIE TX 75051
PHONE: (972) 237-1905 **FAX:** (972) 237-5964
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/14/2017

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030313

VIBRANT RETIREMENT LIVING
355 W WESTCHESTER PKWY
GRAND PRAIRIE **TX** 75052
Phone (972) 263-3663 **Fax** (972) 266-9745

TOTAL Lic Capacity: 114 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 114 **TITLE 18/19:** 0

Owner Information

CSH GRAND PRAIRIE LLC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214
PHONE: (414) 918-5000 **FAX:** (414) 918-5054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/30/2018

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105773

PREMIER HOME LIVING
8014 INWOOD RD
HIGHLAND PARK **TX** 75209
Phone (214) 351-1900 **Fax** (214) 351-1900

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

PREMIER HOME LIVING LLC
8014 INWOOD RD
DALLAS TX 75209
PHONE: (214) 437-7726 **FAX:** (214) 351-1900
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/02/2016

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030237

AVALON MEMORY CARE-IRVING
3400 N COUNTRY CLUB RD
IRVING **TX** 75062
Phone (214) 752-7050 **Fax** (214) 752-7054

TOTAL Lic Capacity: 48 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 48 **TITLE19:** 0
PRIVATE Beds: 48 **TITLE 18/19:** 0

Owner Information

AVALON DEMENTIA CARE MANAGEMENT, LLC
1625 N STEMMONS FRWY
DALLAS TX 75207
PHONE: (214) 752-7050 **FAX:** (214) 752-7054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/31/2018

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000561

BROOKDALE IRVING
720 N BRITAIN RD
IRVING **TX** 75061
Phone (972) 721-1500 **Fax** (972) 438-4074

TOTAL Lic Capacity: 70 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 70 **TITLE 18/19:** 0

Owner Information

SUMMERVILLE AT IRVING ASSOCIATES LP
3131 ELLIOTT AVE ,STE 500
SEATTLE WA 98121
PHONE: (206) 298-2909 **FAX:** (206) 204-1485
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/31/2016

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105190

CENTRE FOR NEURO SKILLS
3841-3847 PORTLAND STREET 3841, 3843, 3845, 3847
IRVING **TX** 75038
Phone (972) 580-8500 **Fax** (972) 255-3162

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

CENTRE FOR NEURO SKILLS INC TEXAS
5215 ASHE RD
BAKERSFIELD CA 93313
PHONE: (661) 872-3408 **FAX:** (661) 872-5150
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/16/2016

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104301

CENTRE FOR NEURO SKILLS
3849-3855 PORTLAND ST
IRVING **TX** 75038
Phone (972) 580-8500 **Fax** (972) 255-3162

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

CENTRE FOR NEURO SKILLS INC TEXAS
5215 ASHE RD
BAKERSFIELD CA 93313
PHONE: (661) 872-3408 **FAX:** (661) 872-5150
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/02/2016

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101050

CENTRE FOR NEURO SKILLS
3951-57 PORTLAND
IRVING **TX** 75038
Phone (972) 594-0549 **Fax** (972) 255-3162

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

CENTRE FOR NEURO SKILLS INC TEXAS
5215 ASHE RD
BAKERSFIELD CA 93313
PHONE: (661) 872-3408 **FAX:** (661) 872-5150
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/20/2017

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101049

CENTRE FOR NEURO SKILLS
3941-47 PORTLAND
IRVING **TX** 75038
Phone (972) 580-8500 **Fax** (972) 255-3162

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information
CENTRE FOR NEURO SKILLS INC TEXAS
5215 ASHE RD
BAKERSFIELD CA 93313
PHONE: (661) 872-3408 **FAX:** (661) 872-5150
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/20/2018

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000684

CENTRE FOR NEURO SKILLS UNIT 1
3901-3907 PORTLAND
IRVING **TX** 75038
Phone (972) 580-8500 **Fax** (972) 255-3162

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information
CENTRE FOR NEURO SKILLS INC TEXAS
5215 ASHE RD
BAKERSFIELD CA 93313
PHONE: (661) 872-3408 **FAX:** (661) 872-5150
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/03/2017

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000949

CENTRE FOR NEURO SKILLS UNIT 2
3911 PORTLAND
IRVING **TX** 75038
Phone (972) 580-8500 **Fax** (972) 255-3162

TOTAL Lic Capacity: 1 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 1 **TITLE 18/19:** 0

Owner Information
CENTRE FOR NEURO SKILLS INC TEXAS
5215 ASHE RD
BAKERSFIELD CA 93313
PHONE: (661) 872-3408 **FAX:** (661) 872-5150
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/03/2016

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000685

CENTRE FOR NEURO SKILLS UNIT 3
3921-3927 PORTLAND
IRVING **TX** 75038
Phone (972) 580-8500 **Fax** (972) 255-3162

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

Owner Information
CENTRE FOR NEURO SKILLS INC TEXAS
5215 ASHE RD
BAKERSFIELD CA 93313
PHONE: (661) 872-3408 **FAX:** (661) 872-5150
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/03/2018

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000686

CENTRE FOR NEURO SKILLS UNIT 4
3931-3937 PORTLAND
IRVING **TX** 75038
Phone (972) 580-8500 **Fax** (972) 255-3162

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information
CENTRE FOR NEURO SKILLS INC TEXAS
5215 ASHE RD
BAKERSFIELD CA 93313
PHONE: (661) 872-3408 **FAX:** (661) 872-5150
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/03/2017

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 010313

ELMCROFT OF IRVING
2425 TEXAS DR
IRVING **TX** 75062
Phone (972) 659-6800 **Fax** (972) 659-6904

TOTAL Lic Capacity: 113 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 113 **TITLE 18/19:** 0

Owner Information
IRVING OPERATIONS LLC
9510 ORMSBY STATION RD ,STE 101
LOUISVILLE KY 40223
PHONE: (502) 753-6004 **FAX:** (502) 753-6104
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/01/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105957

MACARTHUR HILLS
1295 KINWEST PARKWAY
IRVING **TX** 75063
Phone (469) 521-1123 **Fax**

TOTAL Lic Capacity: 130 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 50 **TITLE19:** 0
PRIVATE Beds: 130 **TITLE 18/19:** 0

Owner Information

SHP IV MACARTHUR HILLS LLC
5310 HARVEST HILL RD ,STE 280
DALLAS TX 75230
PHONE: (214) 871-2155 **FAX:** (214) 368-7341
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/21/2017

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104691

MATURE HANDS II ASSISTED LIVING HOME
1028 S GLOUCESTER ST
IRVING **TX** 75062
Phone (972) 841-3293 **Fax**

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

RUBIE HARRIS
1028 GLOUCESTER ST S
IRVING TX 75062
PHONE: (972) 841-3293 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/13/2018

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101605

SILVERADO SENIOR LIVING - VALLEY RANCH
8855 W VALLEY RANCH PARKWAY
IRVING **TX** 75063
Phone (972) 831-8200 **Fax** (972) 831-1515

TOTAL Lic Capacity: 68 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 68 **TITLE19:** 0
PRIVATE Beds: 68 **TITLE 18/19:** 0

Owner Information

SUBTENANT 8855 WEST VALLEY RANCH PARKWAY LLC
4500 DORR STREET
TOLEDO OH 43615
PHONE: (419) 247-2800 **FAX:** (419) 247-2826
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/11/2017

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 100037

TOWNE LAKE COURT
200 ESTERS RD
IRVING **TX** 75061
Phone (972) 514-6032 **Fax** (972) 514-6054

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

Owner Information

PATE REHABILITATION ENDEAVORS, INC
2655 VILLA CREEK ,STE 140
DALLAS TX 75234
PHONE: (972) 241-9334 **FAX:** (972) 484-4739
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/11/2018

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101521

VIP LIVING CENTER IRVING
3219 VINSON CT
IRVING **TX** 75060
Phone (972) 513-0224 **Fax** (972) 254-2629

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

VIP LIVING CENTERS LLC
121 N MACARTHUR BLVD
IRVING TX 75061
PHONE: (972) 254-4477 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/22/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106354

A DAUGHTERS CARE
1237 CEDARBROOK TRAIL
LANCASTER **TX** 75146
Phone (214) 400-8687 **Fax** (972) 748-2604

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

Owner Information

A DAUGHTERS CARE LLC
1237 CEDARBROOK TRAIL
LANCASTER TX 75146
PHONE: (214) 400-8687 **FAX:** (972) 748-2604
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/11/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103109

ANGELS OF HANDS ASSISTANT LIVING
2401 N HOUSTON SCHOOL RD
LANCASTER **TX** 75134
Phone (972) 572-1873 **Fax** (972) 572-1890

TOTAL Lic Capacity: 24 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 24 **TITLE 18/19:** 0

Owner Information

ANGELS OF HANDS HOME HEALTH AGENCY CORP
2401 N HOUSTON SCHOOL RD
LANCASTER TX 75134
PHONE: (972) 572-1873 **FAX:** (972) 572-1890
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/10/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103018

ANTHONY'S COMMUNITY HOME
1334 MEADOW GLEN
LANCASTER **TX** 75146
Phone (972) 230-8441 **Fax**

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

Owner Information

FELICIA CHARMAINE EVANS
1334 MEADOW GLEN
LANCASTER TX 75146
PHONE: (972) 230-8441 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/12/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103420

BRIXTON VILLAGE ASSISTED LIVING
107 N STEWART AVENUE
LANCASTER **TX** 75146
Phone (972) 224-8367 **Fax** (972) 224-8317

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

Owner Information

BRIXTON VILLAGE FOR THE ELDERLY INC
2727 HENRY RD
LANCASTER TX 75104
PHONE: **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/21/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000695

BROOKDALE LANCASTER
2400 WEST PLEASANT RUN RD
LANCASTER **TX** 75146
Phone (972) 274-5000 **Fax** (972) 274-1850

TOTAL Lic Capacity: 50 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 50 **TITLE 18/19:** 0

Owner Information

BROOKDALE SENIOR LIVING COMMUNITIES INC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214
PHONE: (414) 918-5441 **FAX:** (414) 918-6076
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/01/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 100424

HACKBERRY HOUSE
111 HACKBERRY ST
LANCASTER **TX** 75146
Phone (972) 227-5839 **Fax** (972) 227-1212

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

ASSOCIATION FOR IMPROVING MEDICAL SERVICES CORPORATION
PO BOX 217
LANCASTER TX 75146
PHONE: (972) 227-5839 **FAX:** (972) 227-1212
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/06/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105086

HOUSE OF ELEGANCE ASSISTANT LIVING
909 PEPPERIDGE CT
LANCASTER **TX** 75134
Phone (972) 275-0175 **Fax** (972) 275-0175

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

BARBARA G. SMITH
909 PEPPERIDGE CT
LANCASTER TX 75134
PHONE: (972) 275-0175 **FAX:** (972) 224-0088
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 06/24/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103501

MORNING STARR NEW BEGINNINGS
1242 APRIL SHOWERS LANE
LANCASTER **TX** 75134
Phone (469) 236-4913 **Fax** (972) 218-9246

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

MORNING STARR NEW BEGINNINGS
3935 OAK ARBOR
DALLAS TX 75233
PHONE: (469) 236-4913 **FAX:** (972) 218-9246
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/05/2017

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104968

MORNING STARR NEW BEGINNINGS
1855 WINDSOR DR
LANCASTER **TX** 75134
Phone (972) 218-9246 **Fax**

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

Owner Information

MORNING STARR NEW BEGINNINGS
3935 OAK ARBOR
DALLAS TX 75233
PHONE: (469) 236-4913 **FAX:** (972) 218-9246
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/24/2018

County **DALLAS** Reg Svcs: TEAM 4 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 050536

PROFESSIONAL CARE FACILITY I I
870 MAGNOLIA LN
LANCASTER **TX** 75146
Phone (972) 218-5534 **Fax** (972) 224-5589

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

PROFESSIONAL CARE FACILITY INC
870 MAGNOLIA LN
LANCASTER TX 75146
PHONE: (972) 218-5534 **FAX:** (469) 913-8187
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/06/2017

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000485

BRADFIELD PLACE
3700 OATES DR
MESQUITE **TX** 75150
Phone (972) 613-8632 **Fax** (972) 613-0905

TOTAL Lic Capacity: 58 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 58 **TITLE 18/19:** 0

Owner Information

BRADFIELD AID OPCO LLC
301 COMMERCE ST ,STE 330
FORT WORTH TX 78102
PHONE: (312) 725-7000 **FAX:** (312) 332-5300
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/11/2017

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 050648

CAMBRIDGE COURT ASSISTED LIVING & MEMORY CARE COMMUNITY
711 MATADOR LN
MESQUITE **TX** 75149
Phone (972) 285-9800 **Fax** (972) 285-9134

TOTAL Lic Capacity: 135 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 30 **TITLE19:** 0
PRIVATE Beds: 135 **TITLE 18/19:** 0

Owner Information

CCAL RE 2013, LLC
3801 HULEN STREET ,SUITE 202
FORT WORTH TX 76107
PHONE: (817) 386-8888 **FAX:** (817) 386-8324
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/19/2017

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000700

CHRISTIAN CARE CENTER INC BENTLEY PERSONAL CARE UNIT
1010 WIGGINS PKWY
MESQUITE **TX** 75150
Phone (972) 686-3000 **Fax** (866) 529-3836

TOTAL Lic Capacity: 69 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 69 **TITLE 18/19:** 0

Owner Information

CHRISTIAN CARE CENTERS INC
900 WIGGINS PKWY
MESQUITE TX 75150
PHONE: (972) 686-2400 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/16/2017

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101506

DIANN'S PLACE INC
1106 SEASHELL DR
MESQUITE **TX** 75149

Phone (972) 329-6069 **Fax** (972) 329-5175

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

Owner Information

DIANN'S PLACE INC
1106 SEA SHELL DR
MESQUITE TX 75149

PHONE: (972) 329-6069 **FAX:** (972) 329-5175

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/31/2016

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105435

FREDISOLO ANNOINTED HOMES
1400 PARKWOOD TRAIL
MESQUITE **TX** 75149

Phone (214) 753-9396 **Fax** (972) 222-9039

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

FREDISOLO ANNOINTED HOMES
1400 PARKWOOD TRAIL
MESQUITE TX 75149

PHONE: (214) 753-9396 **FAX:** (972) 222-9039

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/22/2016

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102752

MASONS PERSONAL CARE HOMES
1819 ARAPAHO TRL
MESQUITE **TX** 75149

Phone (972) 222-0414 **Fax** (972) 222-0417

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

Owner Information

BORIS E MASON
1819 ARAPAHO TRL
MESQUITE TX 75149

PHONE: (214) 235-3076 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/05/2016

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104008

NOTICE CARE HOMES
2724 DANIEL CREEK
MESQUITE **TX** 75181

Phone (972) 222-7388 **Fax** (972) 222-2398

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

Owner Information

NATALIE J MILAS
2724 DANIEL CREEK
MESQUITE TX 75181

PHONE: (214) 282-0009 **FAX:** (972) 222-2398

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/24/2017

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105774

NOTICE CARE HOMES
926 LAKESHORE DRIVE
MESQUITE **TX** 75149

Phone (214) 282-0009 **Fax** (972) 222-2398

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

Owner Information

NOTICE CARE HOMES LLC
2618 CROSSCREEK LN
MESQUITE TX 75181

PHONE: (214) 282-0009 **FAX:** (972) 222-2398

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/23/2018

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104471

NOTICE RESIDENTIAL CARE HOME
2618 CROSSCREEK LN
MESQUITE **TX** 75181

Phone (214) 282-0009 **Fax** (972) 222-2398

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

Owner Information

NOTICE CARE HOMES LLC
2618 CROSSCREEK LN
MESQUITE TX 75181

PHONE: (214) 282-0009 **FAX:** (972) 222-2398

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/09/2016

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101440

SOPHYAS ASSISTED LIVING
2621 BEEMAN DR
MESQUITE **TX** 75181

Phone (972) 333-0943 **Fax** (972) 288-0183

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

SOPHYA MILAS
207 CLARY DR
MESQUITE TX 75149

PHONE: (972) 333-0943 **FAX:** (972) 288-0183

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/21/2017

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 100885

THE COURTYARD AT CHRISTIAN CARE CENTER
950 WIGGINS PARKWAY
MESQUITE **TX** 75150

Phone (972) 698-2626 **Fax** (972) 698-2630

TOTAL Lic Capacity: 44 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 44 **TITLE19:** 0
PRIVATE Beds: 44 **TITLE 18/19:** 0

Owner Information

CHRISTIAN CARE CENTERS INC
900 WIGGINS PKWY
MESQUITE TX 75150

PHONE: (972) 686-2400 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/22/2018

County **DALLAS** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 010312

APPLETREE COURT ASSISTED LIVING
870 W ARAPAHO RD
RICHARDSON **TX** 75080

Phone (972) 889-2300 **Fax** (972) 889-8863

TOTAL Lic Capacity: 126 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 126 **TITLE 18/19:** 0

Owner Information

LEONARD HEALTHCARE CORP.
870 W ARAPAHO RD
RICHARDSON TX 75080

PHONE: (972) 889-2300 **FAX:** (972) 889-8863

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/02/2017

County **DALLAS** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030337

ARDEN COURTS OF RICHARDSON
410 BUCKINGHAM RD
RICHARDSON **TX** 75081

Phone (972) 235-1200 **Fax** (972) 235-1267

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 60 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

ARDEN COURTS OF RICHARDSON TX LLC
333 NORTH SUMMIT ST
TOLEDO OH 43604

PHONE: (419) 252-5500 **FAX:** (877) 385-9446

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/07/2017

County **DALLAS** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 010273

ATRIA RICHARDSON
1493 RICHARDSON DR
RICHARDSON **TX** 75080

Phone (972) 231-3313 **Fax** (972) 231-2923

TOTAL Lic Capacity: 114 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 28 **TITLE19:** 0
PRIVATE Beds: 114 **TITLE 18/19:** 0

Owner Information

WG RICHARDSON SH LLC
10350 ORMSBY PARK PLACE ,STE 300
LOUISVILLE KY 40223

PHONE: (502) 779-4700 **FAX:** (502) 779-4749

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/12/2017

County **DALLAS** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000704

COTTONWOOD CREEK HEALTHCARE COMMUNITY
1111 W SHORE DR
RICHARDSON **TX** 75080

Phone (972) 783-8000 **Fax** (972) 783-4267

TOTAL Lic Capacity: 124 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 20 **TITLE19:** 0
PRIVATE Beds: 124 **TITLE 18/19:** 0

Owner Information

DHC OPCO-RICHARDSON LLC
1111 WEST SHORE DRIVE
RICHARDSON TX 75080

PHONE: (972) 783-8000 **FAX:** (972) 783-4267

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/01/2017

County **DALLAS** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103842

FAITH COMFORT CARE HOME LLC
525 BIRCH LN
RICHARDSON **TX** 75081

Phone (972) 664-0740 **Fax** (972) 664-0720

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

FAITH COMFORT CARE HOME LLC
525 BIRCH LANE
RICHARDSON TX 75081

PHONE: (214) 607-8763 **FAX:** (972) 664-0720

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/12/2017

County **DALLAS** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 001506

FIELDWOOD
406 FIELDWOOD
RICHARDSON **TX** 75081

Phone (972) 690-4011 **Fax** (972) 644-5650

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

AUTISTIC TREATMENT CENTER INC
16111 NACOGDOCHES
SAN ANTONIO TX 78247

PHONE: (210) 590-2107 **FAX:** (210) 590-3143

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/21/2017

County **DALLAS** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105765

GUARDIAN ANGELS GROUP HOME LLC
426 BIRCH LANE
RICHARDSON **TX** 75081

Phone (972) 234-4041 **Fax** (972) 234-4041

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 8 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

GUARDIAN ANGELS LOVE AND CARE LLC
426 BIRCH LANE
RICHARDSON TX 75081

PHONE: (972) 234-4041 **FAX:** (972) 234-4041

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/26/2016

County **DALLAS** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030278

PARK BEND
410 PARK BEND
RICHARDSON **TX** 75080

Phone (972) 234-5348 **Fax** (972) 644-5650

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

Owner Information

AUTISTIC TREATMENT CENTER INC
16111 NACOGDOCHES
SAN ANTONIO TX 78247

PHONE: (210) 590-2107 **FAX:** (210) 590-3143

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/26/2017

County **DALLAS** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101007

THE WELLINGTON AT ARAPAHO ASSISTED LIVING COMMUNITY
600 W ARAPAHO RD
RICHARDSON **TX** 75080

Phone (469) 330-2800 **Fax** (469) 330-2299

TOTAL Lic Capacity: 57 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 57 **TITLE 18/19:** 0

Owner Information

TRIAD SENIOR LIVING IV LP
14160 DALLAS PKWY ,STE 300
DALLAS TX 75254

PHONE: (972) 770-5600 **FAX:** (972) 770-5666

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/17/2017

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000830

MERCER PLACE
5701 DEXHAM RD
ROWLETT **TX** 75088

Phone (972) 463-1646 **Fax** (972) 475-7311

TOTAL Lic Capacity: 42 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 42 **TITLE 18/19:** 0

Owner Information

MERCER AID OPCO LLC
330 N WABASH AVE ,STE 3700
CHICAGO IL 60611

PHONE: (312) 725-7000 **FAX:** (312) 332-5300

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/11/2017

County **DALLAS** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105791

OXFORD GLEN AT SACHSE
4546 BUNKER HILL RD
SACHSE **TX** 75048
Phone (214) 449-1884 **Fax**

TOTAL Lic Capacity: 42 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 42 **TITLE19:** 0
PRIVATE Beds: 42 **TITLE 18/19:** 0

Owner Information

OXFORD SACHSE MEMORY CARE LTD
125 N MARKET ,STE 1416
WICHITA KS 67202
PHONE: (316) 201-3210 **FAX:** (316) 201-3219
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/05/2018

County **DAWSON** Reg Svcs: MIDLAND GERIATRIC Region 09 - ABILENE

Facility Information: **Facility ID:** 103079

BEEHIVE HOMES OF LAMESA
101 NE 27TH ST
LAMESA **TX** 79331
Phone (806) 872-0629 **Fax** (806) 872-0651

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

RATHMANN CARE LLC
101 NE 27TH ST
LAMESA TX 79331
PHONE: (505) 480-1445 **FAX:** (505) 508-2837
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/16/2017

County **DAWSON** Reg Svcs: MIDLAND GERIATRIC Region 09 - ABILENE

Facility Information: **Facility ID:** 104153

BEEHIVE HOMES OF LAMESA 2
109 NE 27TH STREET
LAMESA **TX** 79331
Phone (806) 872-0629 **Fax** (806) 872-0651

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

LAMESA CARE LLC
4709 GOLDEN BARREL NW
ALBUQUERQUE NM 87114
PHONE: (505) 480-1445 **FAX:** (505) 821-1834
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/29/2018

County **DAWSON** Reg Svcs: MIDLAND GERIATRIC Region 09 - ABILENE

Facility Information: **Facility ID:** 100198

YOUNGBLOOD ELDER CARE
308 N 20TH ST
LAMESA **TX** 79331
Phone (806) 872-2030 **Fax** (806) 872-0023

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

SHARLAN INC
308 NORTH 20TH ST
LAMESA TX 79331
PHONE: (806) 759-9811 **FAX:** (806) 872-0023
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/15/2017

County **DEAF SMITH** Reg Svcs: HIGH PLAINS GERI 1 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 000453

KINGS MANOR PERSONAL CARE HOME
400 RANGER DR
HEREFORD **TX** 79045
Phone (806) 364-0661 **Fax** (806) 364-0675

TOTAL Lic Capacity: 31 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 31 **TITLE 18/19:** 0

Owner Information

KINGS MANOR METHODIST RETIREMENT SYSTEM INC
PO BOX 1999
HEREFORD TX 79045
PHONE: (806) 364-0661 **FAX:** (806) 364-0675
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/20/2016

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030359

ATRIA CARROLLTON
1825 ARBOR CREEK DR
CARROLLTON **TX** 75010
Phone (972) 862-8700 **Fax** (972) 307-5865

TOTAL Lic Capacity: 125 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 24 **TITLE19:** 0
PRIVATE Beds: 125 **TITLE 18/19:** 0

Owner Information

WG CARROLLTON SH, LLC
10350 ORMSBY PARK PLACE ,STE 300
LOUISVILLE KY 40223
PHONE: (502) 779-4700 **FAX:** (502) 779-4749
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/12/2017

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101033

AUTUMN LEAVES OF NORTH CARROLLTON AT CASTLE HILLS
1800 KING ARTHUR BLVD
CARROLLTON **TX** 75010
Phone (972) 492-7700 **Fax** (972) 492-7704

TOTAL Lic Capacity: 46 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 46 **TITLE19:** 0
PRIVATE Beds: 46 **TITLE 18/19:** 0

Owner Information

CARROLLTON AUTUMN LEAVES, LP
545 E JOHN CARPENTER FRWY ,STE 500
IRVING TX 75062
PHONE: (214) 845-4500 **FAX:** (214) 845-4501
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/09/2016

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105959

AVALON AT WILLOW BEND
4229 MARSH LANE
CARROLLTON **TX** 75007
Phone (214) 752-7050 **Fax** (214) 752-7054

TOTAL Lic Capacity: 32 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 32 **TITLE19:** 0
PRIVATE Beds: 32 **TITLE 18/19:** 0

Owner Information

WISMISS MANAGEMENT, LLC
1625 NORTH STEMMONS FREEWAY
DALLAS TX 75207
PHONE: (214) 752-7050 **FAX:** (214) 752-7054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/24/2016

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106406

AVALON AT WILLOW BEND II
4233 MARSH LANE
CARROLLTON **TX** 75007
Phone (214) 752-7050 **Fax** (214) 752-7054

TOTAL Lic Capacity: 24 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 24 **TITLE19:** 0
PRIVATE Beds: 24 **TITLE 18/19:** 0

Owner Information

WISMISS MANAGEMENT, LLC
1625 NORTH STEMMONS FREEWAY
DALLAS TX 75207
PHONE: (214) 752-7050 **FAX:** (214) 752-7054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/18/2018

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105078

FOUR SEASONS SENIOR LIVING III
3805 GILLESPIE DR
CARROLLTON **TX** 75010
Phone (214) 492-2452 **Fax** (214) 295-0827

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

FOUR SEASONS SENIOR LIVING III LLC
3805 GILLESPIE
CARROLLTON TX 75010
PHONE: (972) 584-9880 **FAX:** (972) 584-9885
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/21/2018

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105700

SONOMA HOUSE ASSISTED LIVING LLC
2056 E. HEBRON PARKWAY
CARROLLTON **TX** 75007
Phone (972) 385-0500 **Fax**

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

SONOMA HOUSE ASSISTED LIVING LLC
5949 SHERRY LN ,STE 600
DALLAS TX 75225
PHONE: (214) 463-2604 **FAX:** (972) 769-6136
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/19/2018

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105849

SONOMA HOUSE ASSISTED LIVING LLC
2040 E HEBRON PRWY
CARROLLTON **TX** 75007
Phone (972) 385-0500 **Fax**

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

SONOMA HOUSE ASSISTED LIVING LLC
5949 SHERRY LN ,STE 600
DALLAS TX 75225
PHONE: (214) 463-2604 **FAX:** (972) 769-6136
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/01/2018

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105766

SONOMA HOUSE ASSISTED LIVING LLC
2048 E. HEBRON PARKWAY
CARROLLTON **TX** 75007
Phone (972) 385-0500 **Fax**

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

SONOMA HOUSE ASSISTED LIVING LLC
5949 SHERRY LN ,STE 600
DALLAS TX 75225
PHONE: (214) 463-2604 **FAX:** (972) 769-6136
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/08/2018

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105701

SONOMA HOUSE ASSISTED LIVING LLC
2052 E. HEBRON PARKWAY
CARROLLTON **TX** 75007
Phone (972) 385-0500 **Fax**

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

SONOMA HOUSE ASSISTED LIVING LLC
5949 SHERRY LN ,STE 600
DALLAS TX 75225
PHONE: (214) 463-2604 **FAX:** (972) 769-6136
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/08/2018

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105852

SONOMA HOUSE ASSISTED LIVING, LLC
2044 E. HEBRON PARKWAY
CARROLLTON **TX** 75007
Phone (972) 385-0500 **Fax**

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

SONOMA HOUSE ASSISTED LIVING LLC
5949 SHERRY LN ,STE 600
DALLAS TX 75225
PHONE: (214) 463-2604 **FAX:** (972) 769-6136
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/10/2017

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105850

SONOMA HOUSE ASSISTED LIVING, LLC
2036 E. HEBRON PARKWAY
CARROLLTON **TX** 75007
Phone (972) 385-0500 **Fax**

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

SONOMA HOUSE ASSISTED LIVING LLC
5949 SHERRY LN ,STE 600
DALLAS TX 75225
PHONE: (214) 463-2604 **FAX:** (972) 769-6136
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/20/2017

County **DENTON** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105851

SONOMA HOUSE ASSISTED LIVING, LLC
2032 E. HEBRON PARKWAY
CARROLLTON **TX** 75007
Phone (972) 385-0500 **Fax**

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

SONOMA HOUSE ASSISTED LIVING LLC
5949 SHERRY LN ,STE 600
DALLAS TX 75225
PHONE: (214) 463-2604 **FAX:** (972) 769-6136
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/11/2018

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104248

TEXSEN GROUP HOMES LLC
4304 WILLIAMSON LN
CARROLLTON **TX** 75010
Phone (469) 892-5332 **Fax**

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

Owner Information

TEXSEN GROUP HOME LLC
4304 WILLIAMSON LANE
CARROLTON TX 75010
PHONE: (469) 892-5332 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/23/2017

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000305

VILLAGE OF CARROLLTON
1029 W SEMINOLE TRL
CARROLLTON **TX** 75007
Phone (972) 395-3553 **Fax** (888) 753-6262

TOTAL Lic Capacity: 70 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 27 **TITLE19:** 0
PRIVATE Beds: 70 **TITLE 18/19:** 0

Owner Information

SELECT OPERATIONS OF CARROLLTON LLC
102 W SEMINOLE TR
CARROLLTON TX 75007
PHONE: (888) 753-6262 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/01/2017

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101899

AUTUMN OAKS OF CORINTH - ASSISTED LIVING
3440 CORINTH PKWY
CORINTH **TX** 76208
Phone (940) 321-9933 **Fax** (940) 497-9200

TOTAL Lic Capacity: 42 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 42 **TITLE 18/19:** 0

Owner Information

CORINTH ASSISTED CARE LP
545 E JOHN CARPENTER FREEWAY ,STE 500
IRVING TX 75062
PHONE: (214) 845-4500 **FAX:** (214) 845-4501
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/02/2016

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103403

A JOYFUL JOURNEY ASSISTED LIVING LLC
804 ABBOTS LN
DENTON **TX** 76205
Phone (940) 393-2273 **Fax**

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

Owner Information

A JOYFUL JOURNEY ASSISTED LIVING LLC
1540 NEELY TRAIL
VALLEY VIEW TX 76272
PHONE: (940) 668-9008 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/15/2017

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000498

BROOKDALE DENTON NORTH
2525 N HINKLE DR
DENTON **TX** 76201
Phone (940) 566-7054 **Fax** (940) 382-9906

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

BROOKDALE SENIOR LIVING COMMUNITIES INC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214
PHONE: (414) 918-5441 **FAX:** (414) 918-6076
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/01/2016

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030309

BROOKDALE DENTON SOUTH
2525 LILLIAN MILLER PKWY
DENTON **TX** 76210
Phone (940) 320-1926 **Fax** (940) 566-1360

TOTAL Lic Capacity: 64 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 64 **TITLE 18/19:** 0

Owner Information

KGC OPERATOR INC
6737 WEST WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214
PHONE: (414) 918-5000 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/21/2017

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030109

CARRIAGE HOUSE
1357 BERNARD ST
DENTON **TX** 76201
Phone (940) 484-1066 **Fax** (940) 380-9606

TOTAL Lic Capacity: 65 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 65 **TITLE 18/19:** 0

Owner Information

DENTON ASSISTED LIVING LP
1615 W ABRAM ST ,STE 201
ARLINGTON TX 76013-1788
PHONE: (817) 861-8442 **FAX:** (817) 274-8679
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/13/2016

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102659

DENTON GOLDEN MEADOWS 2
1805 WESTRIDGE STREET
DENTON **TX** 76210
Phone (940) 565-1249 **Fax** (940) 566-1975

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

Owner Information

DENTON GOLDEN MEADOWS CARE INC
3674 SERENDIPITY HILLS
CORINTH TX 76210
PHONE: (214) 334-5764 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/11/2017

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101459

DENTON GOLDEN MEADOWS CARE INC
3200 DONNA ROAD
DENTON **TX** 76207
Phone (214) 334-5764 **Fax** (940) 566-1975

TOTAL Lic Capacity: 11 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 11 **TITLE 18/19:** 0

Owner Information

DENTON GOLDEN MEADOWS CARE INC
3674 SERENDIPITY HILLS
CORINTH TX 76210
PHONE: (214) 334-5764 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/15/2017

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104303

DENTON GOLDEN MEADOWS CARE INC
2303 FOXCROFT
DENTON **TX** 76209
Phone (214) 334-5764 **Fax** (940) 566-1975

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

Owner Information

DENTON GOLDEN MEADOWS CARE INC
3674 SERENDIPITY HILLS
CORINTH TX 76210
PHONE: (214) 334-5764 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/13/2017

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 100868

LAKE FOREST GOOD SAMARITAN VILLAGE ASSISTED LIVING
3901 MONTECITO DR
DENTON **TX** 76210
Phone (940) 891-0856 **Fax** (940) 891-0866

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

THE EVANGELICAL LUTHERAN GOOD SAMARITAN SOCIETY
4800 W 57TH ST
SIOUX FALLS SD 57108
PHONE: (605) 362-3100 **FAX:** (605) 362-3897
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/11/2017

County **DENTON** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106310

MAYBERRY GARDENS ASSISTED LIVING & MEMORY CARE HOMES, DENTON
3636 TEASLEY LAND
DENTON **TX** 76210
Phone (940) 600-4178 **Fax**

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

MG AL DENTON, LLC
3636 TEASLEY LN.
DENTON TX 76210
PHONE: (940) 600-4178 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/03/2018

County **DENTON** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106327

MAYBERRY GARDENS ASSISTED LIVING & MEMORY CARE HOMES, DENTON HOUSE 2
3636 TEASLEY LANE #2
DENTON **TX** 76210
Phone (940) 600-4178 **Fax** (940) 600-4178

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

MG AL DENTON, LLC
3636 TEASLEY LN.
DENTON TX 76210
PHONE: (940) 600-4178 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/02/2018

County **DENTON** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106328

MAYBERRY GARDENS ASSISTED LIVING & MEMORY CARE HOMES, DENTON HOUSE 3
3636 TEASLEY LANE, #3
DENTON **TX** 76210
Phone (940) 600-4178 **Fax**

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

MG AL DENTON, LLC
3636 TEASLEY LN.
DENTON TX 76210
PHONE: (940) 600-4178 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/06/2018

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101950

MORRISON RESIDENCE
2500 HINKLE DR
DENTON **TX** 76201
Phone (940) 383-2651 **Fax** (940) 382-9306

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

THE EVANGELICAL LUTHERAN GOOD SAMARITAN SOCIETY
4800 W 57TH ST
SIOUX FALLS SD 57108
PHONE: (605) 362-3100 **FAX:** (605) 362-3897

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/01/2016

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000544

VINTAGE HEALTH CARE CENTER
205 N BONNIE BRAE
DENTON **TX** 76201
Phone (940) 384-1500 **Fax** (940) 387-7139

TOTAL Lic Capacity: 88 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 88 **TITLE 18/19:** 0

Owner Information

VINTAGE SCC LLC
1717 W 6TH STREET ,SUITE 450
AUSTIN TX 78703
PHONE: (512) 340-7829 **FAX:** (877) 634-9530

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/01/2017

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104946

WILLOW BEND ASSISTED LIVING AND MEMORY CARE
2125 BRINKER ROAD
DENTON **TX** 76208
Phone (940) 381-3000 **Fax** (940) 381-0600

TOTAL Lic Capacity: 86 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 24 **TITLE19:** 0
PRIVATE Beds: 86 **TITLE 18/19:** 0

Owner Information

DENTON ALF, LLC
8415 EAST 21ST STREET NORTH SUITE 1
WICHITA KS 67206
PHONE: (316) 616-6288 **FAX:** (316) 616-6255

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/16/2017

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103044

AUTUMN LEAVES OF FLOWER MOUND
3201 KARNES RD
FLOWER MOUND **TX** 75022
Phone (972) 355-5432 **Fax** (972) 355-0396

TOTAL Lic Capacity: 50 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 50 **TITLE19:** 0
PRIVATE Beds: 50 **TITLE 18/19:** 0

Owner Information

FLOWER MOUND AUTUMN LEAVES LP
545 E JOHN CARPENTER FRWY ,STE 500
IRVING TX 75062
PHONE: (214) 845-4500 **FAX:** (214) 845-4501

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/03/2017

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102844

AVALON MEMORY CARE-RAINTREE
6601 RAINTREE PLACE
FLOWER MOUND **TX** 75022
Phone (214) 752-7050 **Fax** (214) 752-7054

TOTAL Lic Capacity: 15 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 15 **TITLE19:** 0
PRIVATE Beds: 15 **TITLE 18/19:** 0

Owner Information

AVALON DEMENTIA CARE MANAGEMENT, LLC
1625 N STEMMONS FRWY
DALLAS TX 75207
PHONE: (214) 752-7050 **FAX:** (214) 752-7054

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/30/2018

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000398

FLOWER MOUND ASSISTED LIVING COMMUNITY
6051 MORRISS RD
FLOWER MOUND **TX** 75028-3710
Phone (972) 539-9444 **Fax** (972) 691-1914

TOTAL Lic Capacity: 50 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 50 **TITLE 18/19:** 0

Owner Information

FLOWER MOUND ASSISTED LIVING LLC
59 E 11TH AVE ,STE 200
EUGENE OR 97401
PHONE: (971) 717-2483 **FAX:** (971) 252-4548
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/09/2016

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105287

ROSEWOOD ASSISTED LIVING AND MEMORY CARE
4141 LONG PRIARIE RD
FLOWER MOUND **TX** 75028
Phone (972) 829-2050 **Fax**

TOTAL Lic Capacity: 86 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 24 **TITLE19:** 0
PRIVATE Beds: 86 **TITLE 18/19:** 0

Owner Information

FLOWER MOUND ALF, LLC
8415 EAST 21ST ST N ,STE 100
WICHITA KS 67206
PHONE: (316) 616-6288 **FAX:** (316) 615-6255
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/15/2017

County **DENTON** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106343

THE OAKS AT FLOWER MOUND
3281 LONG PRAIRIE
FLOWER MOUND **TX** 75022
Phone (469) 630-0800 **Fax**

TOTAL Lic Capacity: 103 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 41 **TITLE19:** 0
PRIVATE Beds: 103 **TITLE 18/19:** 0

Owner Information

FM SENIOR LIVING OPERATIONS, LP
5700 W PLANO PARKWAY ,STE 300
PLANO TX 75093
PHONE: (214) 893-4202 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/12/2017

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105024

HUNTLEIGH CARE HOMES, LLC - CEDAR CREEK
3259 CEDAR CREEK TRAIL
FRISCO **TX** 75034
Phone (214) 415-8943 **Fax** (214) 618-1028

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 6 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

HUNTLEIGH CARE HOMES, LLC
4133 VENETO DR
FRISCO TX 75033
PHONE: (972) 455-8280 **FAX:** (972) 455-8281
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/15/2018

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105813

MUSTANG CREEK ESTATES FRISCO HOUSE A
1200 W MAIN STREET
FRISCO **TX** 75033
Phone (214) 683-5111 **Fax**

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

MUSTANG CREEK MANAGEMENT LLC
1200 W MAIN ST
FRISCO TX 75033
PHONE: (214) 683-5111 **FAX:** (972) 623-2275
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/19/2016

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105809

MUSTANG CREEK ESTATES FRISCO HOUSE B
1200 W MAIN ST
FRISCO **TX** 75033
Phone (214) 683-5111 **Fax** (972) 623-2275

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

MUSTANG CREEK MANAGEMENT LLC
1200 W MAIN ST
FRISCO TX 75033
PHONE: (214) 683-5111 **FAX:** (972) 623-2275
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/15/2017

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105811

MUSTANG CREEK ESTATES FRISCO HOUSE C AND D
1200 MAIN STREET
FRISCO **TX** 75033
Phone (214) 683-5111 **Fax** (972) 623-2275

TOTAL Lic Capacity: 30 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 30 **TITLE 18/19:** 0

Owner Information

MUSTANG CREEK MANAGEMENT LLC
1200 W MAIN ST
FRISCO TX 75033
PHONE: (214) 683-5111 **FAX:** (972) 623-2275
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/14/2016

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105812

MUSTANG CREEK ESTATES FRISCO HOUSE E
1200 MAIN STREET
FRISCO **TX** 75033
Phone (214) 683-5111 **Fax** (972) 623-2275

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

MUSTANG CREEK MANAGEMENT LLC
1200 W MAIN ST
FRISCO TX 75033
PHONE: (214) 683-5111 **FAX:** (972) 623-2275
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/04/2017

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105814

MUSTANG CREEK ESTATES FRISCO HOUSE F
1200 MAIN STREET
FRISCO **TX** 75033
Phone (214) 683-5111 **Fax**

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

MUSTANG CREEK MANAGEMENT LLC
1200 W MAIN ST
FRISCO TX 75033
PHONE: (214) 683-5111 **FAX:** (972) 623-2275
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/14/2016

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102151

RAMBLING OAKS COURTYARD ASSISTED LIVING RESIDENCE
110 BARNETT BLVD
HIGHLAND VILLAGE **TX** 75077
Phone (972) 317-7733 **Fax** (972) 317-7734

TOTAL Lic Capacity: 79 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 79 **TITLE 18/19:** 0

Owner Information

RAMBLING OAKS COURTYARD ALR HIGHLAND VILLAGE LLC
1126 RAMBLING OAKS DR
NORMAN OK 73072
PHONE: (405) 364-4370 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/27/2017

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030067

4 SEASONS SENIOR LIVING IX
1724 MILESTONE RIDGE
LEWISVILLE **TX** 75067
Phone (972) 584-9880 **Fax** (972) 584-9885

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

FOUR SEASONS SENIOR LIVING IX LLC
1724 MILESTONE RIDGE
LEWISVILLE TX 75067
PHONE: (972) 584-9880 **FAX:** (972) 584-9885
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/11/2017

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102938

4 SEASONS SENIOR LIVING VI
2200 PEACHTREE LN
LEWISVILLE **TX** 75067
Phone (972) 584-9880 **Fax** (972) 584-9885

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

FOUR SEASONS SENIOR LIVING VI, LLC
2200 PEACHTREE LN
LEWISVILLE TX 75067
PHONE: (972) 584-9880 **FAX:** (972) 584-9885
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/10/2016

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 100998

4 SEASONS SENIOR LIVING VII
2204 PEACHTREE LN
LEWISVILLE **TX** 75067
Phone (972) 584-9880 **Fax** (972) 584-9885
TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

FOUR SEASONS SENIOR LIVING VII LLC
2204 PEACHTREE LANE
LEWISVILLE TX 75067
PHONE: (972) 584-9880 **FAX:** (972) 584-9885
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/10/2016

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102343

4 SEASONS SENIOR LIVING VIII
2208 PEACHTREE LN
LEWISVILLE **TX** 75067
Phone (972) 584-9880 **Fax** (972) 584-9885
TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

FOUR SEASONS SENIOR LIVING VIII LLC
2208 PEACHTREE LN
LJEWISVILLE TX 75067
PHONE: (972) 584-9880 **FAX:** (972) 584-9885
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/10/2016

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000315

BROOKDALE LEWISVILLE
965 GARDENRIDGE RD
LEWISVILLE **TX** 75067
Phone (972) 420-9600 **Fax** (972) 420-7698
TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

BROOKDALE SENIOR LIVING COMMUNITIES INC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214
PHONE: (414) 918-5441 **FAX:** (414) 918-6076
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/01/2017

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030138

ELMCROFT OF VISTA RIDGE
400 HIGHLAND DR
LEWISVILLE **TX** 75067
Phone (972) 315-1532 **Fax** (972) 315-7284
TOTAL Lic Capacity: 117 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 117 **TITLE 18/19:** 0

Owner Information

VISTA RIDGE OPERATIONS LLC
700 N. HURSTBOURNE PARKWAY ,SUITE 200
LOUISVILLE KY 40222
PHONE: (502) 753-6004 **FAX:** (502) 753-6104
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/01/2017

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103043

FRANKIE LANE INC.
429 FRANKIE LANE
LEWISVILLE **TX** 75057
Phone (972) 420-4293 **Fax** (972) 436-0547
TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

FRANKIE LANE INC
429 FRANKIE LANE
LEWISVILLE TX 75057
PHONE: (214) 415-0424 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/29/2018

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 010063

LEWISVILLE ESTATES
800 COLLEGE PKWY
LEWISVILLE **TX** 75067
Phone (972) 434-1727 **Fax** (972) 434-1728
TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

TARANTINO SENIOR LIVING COMMUNITIES, LLC
7887 SAN FELIPE ,SUITE 237
HOUSTON TX 77063
PHONE: (713) 974-4292 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/19/2016

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103138

LEWISVILLE TX ARBOR HOUSE LP
2215 ROCKBROOK DR
LEWISVILLE **TX** 75067
Phone (972) 459-0600 **Fax**

TOTAL Lic Capacity: 52 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 52 **TITLE19:** 0
PRIVATE Beds: 52 **TITLE 18/19:** 0

Owner Information

LEWISVILLE TX ARBOR HOUSE LP
2401 TEE CIRCLE ,STE 103
NORMAN OK 73069
PHONE: (405) 801-2879 **FAX:** (405) 360-3301
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/16/2016

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030395

PROVIDENCIA AT ASPEN
2024 ASPEN DR
LEWISVILLE **TX** 75077
Phone (972) 966-8199 **Fax** (214) 513-0296

TOTAL Lic Capacity: 11 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 11 **TITLE 18/19:** 0

Owner Information

PROVIDENCIA AT ASPEN INC
2041 MALLARD DR
LEWISVILLE TX 75077
PHONE: (972) 816-1426 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/20/2016

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101358

PROVIDENCIA AT LEWISVILLE INC
1101 BREEZEWOOD DR
LEWISVILLE **TX** 75067
Phone (972) 420-7909 **Fax** (972) 420-4651

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

PROVIDENCIA AT LEWISVILLE INC
1101 BREEZEWOOD DRIVE
LEWISVILLE TX 75077
PHONE: (972) 420-7909 **FAX:** (972) 420-4651
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/15/2015

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105187

REDBIRD MANOR
1906 W CHAPMAN DR
SANGER **TX** 76266
Phone (940) 458-0645 **Fax** (940) 458-4402

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

OUTSTRETCHED ARM LLC
1906 W CHAPMAN DR
SANGER TX 76266
PHONE: (940) 458-0645 **FAX:** (940) 458-4402
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/23/2016

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000873

THE SANGER HOUSE
804 N 3RD ST
SANGER **TX** 76266
Phone (940) 458-4425 **Fax** (940) 458-4402

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 8 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

CALEB MERCER
804 N 3RD ST
SANGER TX 76266
PHONE: (940) 458-4425 **FAX:** (940) 458-4402
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/14/2018

County **DENTON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104333

AUTUMN LEAVES OF DENTON
2505 BRINKER ROAD
SHADY SHORES **TX** 76208
Phone (940) 323-1710 **Fax** (940) 323-1712

TOTAL Lic Capacity: 50 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 50 **TITLE19:** 0
PRIVATE Beds: 50 **TITLE 18/19:** 0

Owner Information

HSRE-LSGI V TRS LLC
545 E JOHN CARPENTER FREEWAY ,STE 500
IRVING TX 75062
PHONE: (214) 845-4500 **FAX:** (214) 845-4501
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/09/2016

County **DEWITT** Reg Svcs: TEAM V Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 104852

ALZCARE OF DEWITT COUNTY -- ASSISTED LIVING
131 INDUSTRIAL BLVD
CUERO **TX** 77954
Phone (361) 275-8448 **Fax** (361) 275-9150

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

ALZCARE DEWITT COUNTY LLC
131 INDUSTRIAL BLVD
CUERO TX 77954
PHONE: (361) 275-8448 **FAX:** (361) 275-9150
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/22/2017

County **DEWITT** Reg Svcs: TEAM V Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 104682

ALZCARE OF DEWITT COUNTY - MEMORY CARE
131 INDUSTRIAL BLVD
CUERO **TX** 77954
Phone (361) 275-8448 **Fax** (361) 275-9150

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 1 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

ALZCARE DEWITT COUNTY LLC
131 INDUSTRIAL BLVD
CUERO TX 77954
PHONE: (361) 275-8448 **FAX:** (361) 275-9150
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/29/2017

County **DONLEY** Reg Svcs: HIGH PLAINS GERI 1 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 001006

RHINEHART FAMILY ELDERCARE
216 EAST 4TH
CLARENDON **TX** 79226
Phone (806) 874-5000 **Fax** (806) 874-5010

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

SUZIE D RHINEHART
216 E 4TH
CLARENDON TX 79226
PHONE: (806) 874-5000 **FAX:** (806) 874-5010
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE C
License Exp Dt: 11/06/2016

County **DONLEY** Reg Svcs: HIGH PLAINS GERI 1 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 105154

SAINTS ROOST ASSISTED LIVING
502 E 4TH
CLARENDON **TX** 79226
Phone (806) 874-1417 **Fax** (806) 874-5064

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

SAINTS ROOST ASSISTED LIVING INC
502 E 4TH
CLARENDON TX 79226
PHONE: (806) 874-5202 **FAX:** (806) 874-5204
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/13/2018

County **EASTLAND** Reg Svcs: ABILENE GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 103376

THE WOODLANDS
125 INSPIRATION BLVD
EASTLAND **TX** 76448
Phone (254) 629-1001 **Fax** (254) 629-1025

TOTAL Lic Capacity: 64 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 64 **TITLE 18/19:** 0

Owner Information

EASTLAND ASSISTED LIVING CORPORATION
125 INSPIRATION BLVD
EASTLAND TX 76448
PHONE: (254) 629-1001 **FAX:** (254) 629-3559
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/30/2017

County **ECTOR** Reg Svcs: MIDLAND GERIATRIC Region 09 - ABILENE

Facility Information: **Facility ID:** 000747

BROOKDALE SHERWOOD
3939 E 52ND ST
ODESSA **TX** 79762
Phone (432) 362-5006 **Fax** (432) 366-6456

TOTAL Lic Capacity: 96 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 96 **TITLE 18/19:** 0

Owner Information

EMERITUS CORPORATION
6737 W. WASHINGTON STREET ,SUITE 2300
MILWAUKEE WI 53214
PHONE: (414) 918-5000 **FAX:** (414) 918-5054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/31/2018

County **ECTOR** Reg Svcs: MIDLAND GERIATRIC Region 09 - ABILENE

Facility Information: **Facility ID:** 105510

ORCHARD PARK OF PERMIAN BASIN
8050 DR EMMET HEADLEE ST
ODESSA **TX** 79765

Phone (432) 847-4700 **Fax** (432) 362-2525

TOTAL Lic Capacity: 125 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 68 **TITLE19:** 0
PRIVATE Beds: 125 **TITLE 18/19:** 0

Owner Information

HEADLEE SENIOR CARE, LLC
1000 LEGION PL ,STE 1750
ORLANDO FL 32801

PHONE: (407) 999-2400 **FAX:** (407) 999-7759

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/02/2017

County **ECTOR** Reg Svcs: MIDLAND GERIATRIC Region 09 - ABILENE

Facility Information: **Facility ID:** 010227

PARKS ASSISTED LIVING CENTER
111 PARKS VILLAGE DR
ODESSA **TX** 79765

Phone (432) 563-5707 **Fax** (432) 563-0430

TOTAL Lic Capacity: 30 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 30 **TITLE 18/19:** 0

Owner Information

ER OPCO PARKS LLC
PO BOX 2017
BRENTWOOD TN 37024

PHONE: (615) 915-2932 **FAX:** (615) 915-2938

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/28/2017

County **ECTOR** Reg Svcs: MIDLAND GERIATRIC Region 09 - ABILENE

Facility Information: **Facility ID:** 105528

THE COURTYARDS ASSISTED LIVING COMMUNITY
201 PARKS VILLAGE DRIVE
ODESSA **TX** 79765

Phone (432) 339-1048 **Fax** (432) 339-1051

TOTAL Lic Capacity: 90 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 30 **TITLE19:** 0
PRIVATE Beds: 90 **TITLE 18/19:** 0

Owner Information

PREVARIAN AL ODESSA OPERATIONS LLC
8214 WESTCHESTER DRIVE ,SUITE 600
DALLAS TX 75225

PHONE: (214) 736-7000 **FAX:** (214) 736-7020

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/25/2017

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 104658

ADAM MC CARE LLC
801 RUSTY BUCKET CT
EL PASO **TX** 79932

Phone (915) 877-2414 **Fax** (915) 877-2314

TOTAL Lic Capacity: 11 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 11 **TITLE 18/19:** 0

Owner Information

ADAM MC CARE LLC
801 RUSTY BUCKET CT
EL PASO TX 79932

PHONE: (915) 877-2414 **FAX:** (915) 877-2315

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/22/2017

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 101960

BIENVIVIR ALL-INCLUSIVE SENIOR HEALTH
2300 MCKINLEY
EL PASO **TX** 79930

Phone (915) 562-3444 **Fax** (915) 875-8841

TOTAL Lic Capacity: 44 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 44 **TITLE19:** 0
PRIVATE Beds: 44 **TITLE 18/19:** 0

Owner Information

BIENVIVIR SENIOR HEALTH SERVICES
2300 MCKINLEY
EL PASO TX 79930

PHONE: (915) 562-3444 **FAX:** (915) 875-8841

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/04/2017

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 106138

CASA DE BELLAMIE ASSISTED LIVING FACILITY
7235 NORTH LOOP DRIVE
EL PASO **TX** 79915

Phone (915) 775-1965 **Fax** (915) 772-7798

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

CASA DE BELLAMIE LLC
7235 NORTH LOOP DR
EL PASO TX 79915

PHONE: (915) 775-1965 **FAX:** (915) 772-7798

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/04/2017

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 105105

CASA EVERAY #3
10548 JANWAY DR
EL PASO **TX** 79925
Phone (915) 588-1727 **Fax** (915) 594-4992

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

RAYMUNDO E SPENCER
10548 JANWAY DR
EL PASO TX 79925
PHONE: (915) 474-9265 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/27/2018

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 000936

DREAM HAVEN INC
1609 BESSEMER
EL PASO **TX** 79936
Phone (915) 593-0431 **Fax**

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

DREAM HAVEN INC
1609 BESSEMER
EL PASO TX 79936
PHONE: (915) 593-0431 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/01/2016

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 000778

EDEN NORTH ASSISTED LIVING CENTER
8961 ANKERSON
EL PASO **TX** 79904
Phone (915) 755-8543 **Fax** (915) 500-5345

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

MODESTO A GOMEZ INC
8961 ANKERSON
EL PASO TX 79904
PHONE: (915) 755-8543 **FAX:** (915) 755-7191
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/30/2017

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 103203

GENESIS HOME CARE
3607 E YANDELL
EL PASO **TX** 79903
Phone (915) 346-8174 **Fax** (915) 564-0604

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

Owner Information

MARIA P AGUIRRE
3607 E YANDELL DR
EL PASO TX 79903
PHONE: (915) 564-0604 **FAX:** (770) 210-8882
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/21/2016

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 106225

GOOD LIFE SENIOR LIVING AND MEMORY CARE A
10400 RAILROAD DRIVE
EL PASO **TX** 79924
Phone (915) 309-5822 **Fax**

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

WESTWOOD DRIVE ENTERPRISES LLC
21211 FM 179
WOLFFORTH TX 79382
PHONE: (806) 855-6464 **FAX:** (806) 855-4092
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/30/2017

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 050642

GOOD SAMARITAN SOCIETY - WHITE ACRES
7304 GOOD SAMARITAN CT BLDG 300
EL PASO **TX** 79912
Phone (915) 581-4683 **Fax** (915) 581-5198

TOTAL Lic Capacity: 36 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 36 **TITLE 18/19:** 0

Owner Information

THE EVANGELICAL LUTHERAN GOOD SAMARITAN SOCIETY
4800 W 57TH ST
SIOUX FALLS SD 57108
PHONE: (605) 362-3100 **FAX:** (605) 362-3897
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/27/2017

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 100898

LA FAMILIA ASSISTING LIVING
9115 MT OLYMPUS DR
EL PASO **TX** 79924
Phone (915) 755-5980 **Fax** (915) 757-6758

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

BERTHA ALICIA ORTIZ
9115 MT OLYMPUS DR
EL PASO TX 79924
PHONE: (915) 755-5980 **FAX:** (915) 759-6758
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/04/2017

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 001113

LETICIA BASURTO
5709 LEXINGTON
EL PASO **TX** 79924
Phone (915) 751-4983 **Fax**

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

LETICIA BASURTO
5709 LEXINGTON
EL PASO TX 79924
PHONE: (915) 751-4983 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE C
License Exp Dt: 11/20/2017

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 100200

LOS ABUELOS ASSISTED LIVING
8230 MT LATONA
EL PASO **TX** 79904
Phone (915) 755-1613 **Fax** (915) 772-2291

TOTAL Lic Capacity: 15 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 15 **TITLE 18/19:** 0

Owner Information

WILLIAN J BURKETT AND ELIZABETH L BURKETT GP
8230 MT LATONA
EL PASO TX 79904
PHONE: (915) 755-1613 **FAX:** (915) 755-1613
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/13/2016

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 010280

LOVING AGE
2029 ANISE DR
EL PASO **TX** 79935
Phone (915) 591-2017 **Fax** (915) 996-9309

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

PABLO E BUSTAMANTE
2029 ANISE DR
EL PASO TX 79935
PHONE: (915) 591-2017 **FAX:** (915) 996-9309
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE C
License Exp Dt: 10/17/2016

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 101674

LOVING CARE ASSISTED LIVING COMMUNITY, INC.
180 C.R. CROOM RD
EL PASO **TX** 79915
Phone (915) 778-1112 **Fax** (915) 772-2291

TOTAL Lic Capacity: 37 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 37 **TITLE 18/19:** 0

Owner Information

LOVING CARE ASSISTED LIVING COMMUNITY INC
180 CR CROOM RD
EL PASO TX 79915
PHONE: (915) 778-1112 **FAX:** (915) 772-2291
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/31/2016

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 101720

M & L LOVING HANDS FOSTER HOME
7308 DESIERTO AZUL DR
EL PASO **TX** 79912
Phone (915) 581-4285 **Fax** (915) 581-0714

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

LILIA HERNANDEZ
7308 DESIERTO AZUL DR
EL PASO TX 79912
PHONE: (915) 581-4285 **FAX:** (915) 585-7672
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/24/2016

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 050647

MAILLAND FOSTER CARE
10541 KINROSS
EL PASO **TX** 79925

Phone (915) 227-3410 **Fax** (915) 595-5905

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

MAILLAND HEALTH CARE SERVICES INC
10541 KINROSS
EL PASO TX 79925

PHONE: (915) 227-3410 **FAX:** (915) 595-5905

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/22/2016

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 001140

MARIA C RUVALCABA
11217 QUINTANA DR
EL PASO **TX** 79936

Phone (915) 592-2304 **Fax**

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

MARIA C RUVALCABA
11217 QUINTANA DR
EL PASO TX 79936

PHONE: (915) 592-2304 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE C
License Exp Dt: 02/19/2017

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 100891

MCKINLEY HOUSE
3600 MCKINLEY AVE
EL PASO **TX** 79930

Phone (915) 566-8841 **Fax** (915) 565-3755

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

ARAMIS (MITCH) E. AYALA
3045 FILLMORE AVE
EL PASO TX 79930

PHONE: (915) 274-2021 **FAX:** (915) 565-3755

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/21/2016

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 106227

MENTIS NEURO EL PASO, LLC
4360 DONIPHAN DR
EL PASO **TX** 79922

Phone (915) 351-4441 **Fax** (915) 351-3646

TOTAL Lic Capacity: 24 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 24 **TITLE 18/19:** 0

Owner Information

MENTIS NEURO EL PASO, LLC
1831 MURCHISON DR ,STE C
EL PASO TX 79902

PHONE: (915) 351-4441 **FAX:** (915) 351-3646

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/21/2017

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 103124

MENTIS NEURO EL PASO, LLC
1831 MURCHISON DR STE C
EL PASO **TX** 79902

Phone (915) 351-4441 **Fax** (915) 351-3646

TOTAL Lic Capacity: 22 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 22 **TITLE 18/19:** 0

Owner Information

MENTIS NEURO EL PASO, LLC
1831 MURCHISON DR ,STE C
EL PASO TX 79902

PHONE: (915) 351-4441 **FAX:** (915) 351-3646

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/15/2017

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 100626

NUNEZ FOSTER HOME
10763 LIMAS
EL PASO **TX** 79935

Phone (915) 594-9418 **Fax**

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

ELSA ELENA NUNEZ
10763 LIMAS
EL PASO TX 79935

PHONE: (915) 594-9418 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE C
License Exp Dt: 06/29/2017

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 101738

PINO REAL ADULT FOSTER HOME
6724 PINO REAL DR
EL PASO **TX** 79912
Phone (915) 584-1247 **Fax** (915) 832-0083

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

LUZ MARIA COUTTOLENC
6724 PINO REAL DR
EL PASO TX 79912
PHONE: (915) 584-1247 **FAX:** (915) 832-0083
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE C
License Exp Dt: 12/22/2016

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 001284

RICCI'S FOSTER HOME
6621 SOUTHWIND
EL PASO **TX** 79912
Phone (915) 584-2048 **Fax** (915) 584-2048

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

MARTHA RICCI
6621 SOUTHWIND
EL PASO TX 79912
PHONE: (915) 584-2273 **FAX:** (915) 584-2273
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE C
License Exp Dt: 05/24/2017

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 100351

RODRIGUEZ FOSTER HOME
10165 BERMUDA
EL PASO **TX** 79925
Phone (915) 598-1727 **Fax** (915) 592-6707

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

ELVIA RODRIGUEZ
10165 BERMUDA
EL PASO TX 79925
PHONE: (915) 598-1727 **FAX:** (915) 592-6707
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/16/2016

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 106042

ROSEDALE ADULT FOSTER HOME
3111 EDGEROCK
EL PASO **TX** 79935
Phone (915) 633-6794 **Fax** (915) 591-1031

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

FRANCISCO NAVARRO
3111 EDGEROCK
EL PASO TX 79935
PHONE: (915) 633-6794 **FAX:** (915) 591-1031
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/06/2018

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 010336

ROSEMARY WILLIAMS MELENDEZ CASA FELICITAS
3330 E YANDELL
EL PASO **TX** 79903
Phone (915) 565-9330 **Fax** (915) 565-9366

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

ROSEMARY WILLIAMS MELENDEZ
3330 E YANDELL
EL PASO TX 79903
PHONE: (915) 565-9330 **FAX:** (915) 565-9366
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/24/2016

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 030084

ROYAL ESTATES OF EL PASO
435 S MESA HILLS DR
EL PASO **TX** 79912
Phone (915) 833-3332 **Fax** (915) 833-3346

TOTAL Lic Capacity: 70 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 70 **TITLE 18/19:** 0

Owner Information

SENIOR LIFESTYLE TEXAS SAN ANTONIO LP
303 E WACKER DR ,STE 2400
CHICAGO IL 60601
PHONE: (312) 673-4333 **FAX:** (312) 673-4430
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/01/2016

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 050473

SCOTTSDALE PERSONAL CARE FACILITY
3113 FORNEY LN
EL PASO **TX** 79935

Phone (915) 594-7230 **Fax** (915) 594-7230

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

YOLANDA RUIZ
3108 GASTON DR
EL PASO TX 79935

PHONE: (915) 309-6999 **FAX:** (915) 594-7230

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/17/2017

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 103784

SERENITY HOUSE ASSISTED LIVING, INC.
4200 SKYLINE AVE
EL PASO **TX** 79904

Phone (915) 751-0300 **Fax** (915) 715-0315

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

SERENTIY HOUSE ASSISTED LIVING INC
4200 SKYLINE AVE
EL PASO TX 79904

PHONE: (915) 751-0300 **FAX:** (915) 751-0315

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/03/2017

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 000728

SUNRIDGE AT CAMBRIA
1991 SAUL KLEINFELD DR
EL PASO **TX** 79936

Phone (915) 857-5487 **Fax** (915) 857-7404

TOTAL Lic Capacity: 129 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 32 **TITLE19:** 0
PRIVATE Beds: 129 **TITLE 18/19:** 0

Owner Information

GOLDEN AGE SENIOR CARE OF CAMBRIA LLC
125 S WACKER DR ,STE 1800
CHICAGO IL 60606

PHONE: (312) 357-1601 **FAX:** (312) 357-1611

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/01/2018

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 030193

SUNRIDGE AT CIELO VISTA
7949 SUNMOUNT DR STE 500
EL PASO **TX** 79925

Phone (915) 772-4036 **Fax** (915) 772-2191

TOTAL Lic Capacity: 114 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 45 **TITLE19:** 0
PRIVATE Beds: 114 **TITLE 18/19:** 0

Owner Information

GOLDEN AGE SENIOR CARE OF CIELO VISTA LLC
125 S WACKER DR ,STE 1800
CHICAGO IL 60606

PHONE: (312) 357-1601 **FAX:** (312) 357-1611

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/01/2018

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 100118

SUNRIDGE AT DESERT SPRINGS
5901 BANDOLERO DR
EL PASO **TX** 79912

Phone (915) 842-0900 **Fax** (915) 842-0903

TOTAL Lic Capacity: 61 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 61 **TITLE19:** 0
PRIVATE Beds: 61 **TITLE 18/19:** 0

Owner Information

GOLDEN AGE SENIOR CARE OF DESERT SPRINGS LLC
125 S WACKER DR ,STE 1800
CHICAGO IL 60606

PHONE: (312) 357-1601 **FAX:** (312) 357-1611

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/01/2018

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 000516

SUNRIDGE AT PALISADES
1831 MURCHISON DR
EL PASO **TX** 79902

Phone (915) 533-8271 **Fax** (915) 533-1307

TOTAL Lic Capacity: 170 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 170 **TITLE 18/19:** 0

Owner Information

GOLDEN AGE SENIOR CARE OF PALISADES LLC
125 S WACKER DR STE 1800
CHICAGO IL 60606

PHONE: (312) 357-1601 **FAX:** (312) 357-1611

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/01/2018

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 050023

THE ARK
2830 FILMORE AVE
EL PASO **TX** 79930
Phone (915) 203-7163 **Fax**

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

PATRICIA ANN ATTAGUILE
2830 FILLMORE AVE
EL PASO TX 79930
PHONE: (915) 203-7163 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/28/2018

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 000370

THE BARTLETT REHABILITATION, SKILLED CARE AND ASSISTED LIVING
221 BARTLETT DR
EL PASO **TX** 79912
Phone (915) 584-8438 **Fax** (915) 584-5115

TOTAL Lic Capacity: 70 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 70 **TITLE 18/19:** 0

Owner Information

PENAN RETIREMENT CENTER LIMITED PARTNERSHIP
221 BARTLETT DR
EL PASO TX 79912
PHONE: (915) 584-8438 **FAX:** (915) 584-5115
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/11/2017

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 104538

THE ETERNAL YOUTH HOME
2218 MERMAID DR
EL PASO **TX** 79936
Phone (915) 249-6079 **Fax**

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

BERNARDO M TERRES
2218 MERMAID DR
EL PASO TX 79936
PHONE: (915) 243-8188 **FAX:** (915) 633-1994
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/13/2017

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 102864

THE FOREST ASSISTED LIVING
9355 NORTH LOOP
EL PASO **TX** 79907
Phone (915) 329-1897 **Fax** (915) 858-1105

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

Owner Information

SANTIAGO VEGA
9355 NORTH LOOP
EL PASO TX 79907
PHONE: (915) 329-1897 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/28/2017

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 001145

UNZUETAS FOSTER HOME
1809 PIEDRA ROJA
EL PASO **TX** 79936
Phone (915) 855-1054 **Fax**

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

MARIA D UNZUETA
1809 PIEDRA ROJA
EL PASO TX 79936
PHONE: (915) 855-1054 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE C
License Exp Dt: 09/27/2017

County **EL PASO** Reg Svcs: EL PASO GERIATRIC Region 10 - EL PASO

Facility Information: **Facility ID:** 010276

VEGA ADULT FOSTER HOME
10628 DRILLSTONE
EL PASO **TX** 79925
Phone (915) 590-3762 **Fax** (915) 591-1498

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

ANA L VEGA
10628 DRILLSTONE
EL PASO TX 79925
PHONE: (915) 590-3762 **FAX:** (915) 591-1498
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/14/2017

County **ELLIS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000499

BROOKDALE ENNIS
2500 YORKSTOWN DR
ENNIS **TX** 75119

Phone (972) 875-6900 **Fax** (972) 875-6935

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

BROOKDALE SENIOR LIVING COMMUNITIES INC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214

PHONE: (414) 918-5441 **FAX:** (414) 918-6076

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/01/2017

County **ELLIS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103077

IN MILORD HANDS
3037 DOROTHY LANE
GLENN HEIGHTS **TX** 75154

Phone (469) 563-8884 **Fax** (469) 552-6330

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

MAURICE Y MILORD
3037 DOROTHY LANE
GLENN HEIGHTS TX 75154

PHONE: (469) 563-8884 **FAX:** (469) 442-0121

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 06/28/2018

County **ELLIS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106233

MIDTOWNE ASSISTED LIVING
910 S. 9TH STREET
MIDLOTHIAN **TX** 76065

Phone (469) 672-1400 **Fax** (817) 386-8324

TOTAL Lic Capacity: 94 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 18 **TITLE19:** 0
PRIVATE Beds: 94 **TITLE 18/19:** 0

Owner Information

MIDTOWN 2013 RE, LLC
910 S. 9TH STREET
MIDLOTHIAN TX 76065

PHONE: (817) 386-8888 **FAX:** (817) 386-8324

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/09/2017

County **ELLIS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030312

SPRINGBROOK HOUSELLC
824 CLEARWATER DR
MIDLOTHIAN **TX** 76065

Phone (972) 723-0597 **Fax** (972) 775-2474

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

SPRINGBROOK HOUSE LLC
824 CLEARWATER DR
MIDLOTHIAN TX 76065

PHONE: (972) 723-0597 **FAX:** (972) 775-2474

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/01/2018

County **ELLIS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000902

BROOKDALE WAXAHACHIE
2250 BROWN ST
WAXAHACHIE **TX** 75165

Phone (972) 937-2600 **Fax** (972) 938-1686

TOTAL Lic Capacity: 58 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 38 **TITLE19:** 0
PRIVATE Beds: 58 **TITLE 18/19:** 0

Owner Information

BROOKDALE SENIOR LIVING COMMUNITIES INC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214

PHONE: (414) 918-5441 **FAX:** (414) 918-6076

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/01/2016

County **ELLIS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103398

BUFFALO CREEK ASSISTED LIVING AND MEMORY CARE COMMUNITY
1329 BROWN ST
WAXAHACHIE **TX** 75165

Phone (972) 937-5999 **Fax**

TOTAL Lic Capacity: 70 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 70 **TITLE 18/19:** 0

Owner Information

CSL S WAXAHACHIE LLC
14160 DALLAS PARKWAY ,STE 300
DALLAS TX 75254

PHONE: (972) 308-8366 **FAX:** (972) 387-8216

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/10/2016

County **ELLIS** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030078

COVENANT PLACE OF WAXAHACHIE
401 SOLON RD
WAXAHACHIE **TX** 75165
Phone (972) 923-9911 **Fax** (972) 923-3289

TOTAL Lic Capacity: 55 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 55 **TITLE 18/19:** 0

Owner Information

CSL LEASECO INC
14160 DALLAS PKWY ,STE 300
DALLAS TX 75254
PHONE: (972) 770-5600 **FAX:** (972) 770-5666

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/01/2017

County **ERATH** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 100699

THREE OAKS ASSISTED LIVING
118 E LIVE OAK
DUBLIN **TX** 76446
Phone (254) 445-3180 **Fax** (254) 445-3960

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

KBN ENTERPRISES INC
118 E LIVE OAK
DUBLIN TX 76446
PHONE: (254) 445-2517 **FAX:** (254) 445-4429

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/19/2018

County **ERATH** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030090

GOOD TREE RETIREMENT
2010 GOOD TREE STREET
STEPHENVILLE **TX** 76401
Phone (254) 965-9897 **Fax** (888) 753-6262

TOTAL Lic Capacity: 65 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 10 **TITLE19:** 0
PRIVATE Beds: 65 **TITLE 18/19:** 0

Owner Information

CSL CE STEPHENVILLE LLC
14160 DALLAS PKWY ,STE 300
DALLAS TX 75254
PHONE: (972) 308-8366 **FAX:** (972) 387-8216

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/30/2016

County **ERATH** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 050239

OAKWOOD ASSISTED LIVING & MEMORY CARE
2305 LINGLEVILLE RD
STEPHENVILLE **TX** 76401-6012
Phone (254) 968-5229 **Fax** (254) 965-4164

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

WC-OAKWOOD OPS LLC
303 E WACKER DRIVE ,STE 2400
CHICAGO IL 60601
PHONE: (312) 673-4333 **FAX:** (312) 673-4487

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/05/2017

County **ERATH** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105974

TENDER HEARTS ASSISTED LIVING
1208 BOWMAN RIDGE
STEPHENVILLE **TX** 76401
Phone (254) 485-5389 **Fax** (254) 485-5389

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

TENDER HEARTS ASSISTED LIVING
1208 BOWMAN RIDGE
STEPHENVILLE TX 76401
PHONE: (254) 485-5389 **FAX:** (254) 485-5389

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/03/2017

County **FALLS** Reg Svcs: BRENHAM Region 07 - AUSTIN

Facility Information: **Facility ID:** 000877

MARLIN PERSONAL CARE
322 CAPPS
MARLIN **TX** 76661
Phone (254) 803-6748 **Fax** (254) 803-2142

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

MILDRED WILSON
322 CAPPS
MARLIN TX 76661
PHONE: (254) 803-6748 **FAX:** (254) 803-2142

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/02/2015

County **FALLS** Reg Svcs: BRENHAM Region 07 - AUSTIN

Facility Information: **Facility ID:** 000858

PERSONAL CARE OF CENTRAL TEXAS
402 LIVE OAK ST
MARLIN **TX** 76661
Phone (254) 803-2674 **Fax**

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

ROSE M REDDING
402 LIVE OAK ST
MARLIN TX 76661
PHONE: (254) 803-2674 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/25/2017

County **FANNIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000718

HOFMANN MRAZ CARE HOME
1405 N CEDAR ST
BONHAM **TX** 75418
Phone (903) 583-8380 **Fax** (903) 583-5049

TOTAL Lic Capacity: 15 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 15 **TITLE 18/19:** 0

Owner Information

HOFMANN MRAZ CARE HOME
1405 N CEDAR ST
BONHAM TX 75418
PHONE: (903) 583-8380 **FAX:** (903) 583-5040
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/26/2017

County **FANNIN** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101547

THE WOODMOORE
1200 W RUSSELL AVE
BONHAM **TX** 75418
Phone (903) 640-1200 **Fax** (903) 640-1202

TOTAL Lic Capacity: 52 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 52 **TITLE 18/19:** 0

Owner Information

ARMSTRONG, DRAUGHN & COOPER, LTD
PO BOX 677
COMMERCE TX 75429
PHONE: (903) 886-8050 **FAX:** (903) 886-8064
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/30/2016

County **FAYETTE** Reg Svcs: TEAM X Region 07 - AUSTIN

Facility Information: **Facility ID:** 030411

JEFFERSON PLACE ASSISTED LIVING
911 S JEFFERSON
LA GRANGE **TX** 78945
Phone (979) 968-9161 **Fax** (979) 968-6962

TOTAL Lic Capacity: 45 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 45 **TITLE 18/19:** 0

Owner Information

JEFFERSON PLACE ASSISTED LIVING INC
205 E AVE B
SCHULENBURG TX 78956
PHONE: (979) 743-2502 **FAX:** (979) 743-2601
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/11/2017

County **FAYETTE** Reg Svcs: TEAM W Region 07 - AUSTIN

Facility Information: **Facility ID:** 000944

COLLEGE PLACE INC
210 COLLEGE ST
SCHULENBURG **TX** 78956
Phone (979) 743-6180 **Fax** (979) 743-3161

TOTAL Lic Capacity: 52 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 52 **TITLE 18/19:** 0

Owner Information

COLLEGE PLACE INC
210 COLLEGE ST
SCHULENBURG TX 78956
PHONE: (979) 743-6180 **FAX:** (979) 743-3161
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 06/09/2017

County **FISHER** Reg Svcs: ABILENE GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 102269

HERITAGE HOUSE ON THE BRAZOS
776 STATE HWY 70 N
ROTAN **TX** 79546
Phone (325) 735-1501 **Fax** (325) 735-1502

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

FISHER COUNTY HEALTH CARE DEVELOPMENT CORPORATION
774 STATE HWY 70 N
ROTAN TX 79546
PHONE: (325) 735-2256 **FAX:** (325) 735-3070
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/02/2016

County **FLOYD** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 102572

BEEHIVE HOMES AT SHEPHERD'S MEADOW
1230 S. RALLS HWY
FLOYDADA **TX** 79235
Phone (806) 983-8177 **Fax**

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

NVJ OPERATIONS, LLC
1230 S. RALLS HWY
FLOYDADA TX 79235
PHONE: (505) 480-1445 **FAX:** (505) 821-1834
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/01/2018

County **FORT BEND** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 101400

QUALITY PERSONAL CARE HOME INC
703 EAST PALM
FRESNO **TX** 77545
Phone (281) 431-8418 **Fax** (281) 208-1627

TOTAL Lic Capacity: 11 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 11 **TITLE 18/19:** 0

Owner Information

QUALITY PERSONAL CARE HOMES, INC
543 DALEWOOD DR
MISSOURI TX 77459
PHONE: (281) 431-8418 **FAX:** (281) 208-1627
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/30/2017

County **FORT BEND** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 106245

OSA HERITAGE HOMES, INC
4218 BRANNON BRANCH COURT
FULSHEAR **TX** 77441
Phone (832) 392-1786 **Fax** (832) 437-7341

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

OSA HERITAGE HOMES, INC
4219 BRANNON BRANCH DRIVE
FULSHEAR TX 77441
PHONE: (832) 392-1786 **FAX:** (832) 437-7341
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/05/2018

County **FORT BEND** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105905

DESTINED ASSISTED LIVING FACILITY
15418 BEECHNUT ST
HOUSTON **TX** 77083
Phone (832) 243-4463 **Fax** (832) 243-4093

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

DESTINED ASSISTED LIVING LLC
15418 BEECHNUT ST
HOUSTON TX 77083
PHONE: **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/17/2018

County **FORT BEND** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103716

FAITH PERSONAL HOME CARE #2
16251 BARBAROSSA DR
HOUSTON **TX** 77083
Phone (281) 762-3381 **Fax**

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

Owner Information

DEBO JOKODOLA
4003 LAKE BRAZOS LN
RICHMOND TX 77406
PHONE: (713) 299-4059 **FAX:** (281) 750-0901
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 06/11/2017

County **FORT BEND** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103478

ULTIMATE PERSONAL CARE
14822 CHARLMONT DR
HOUSTON **TX** 77083
Phone (281) 530-5795 **Fax** (866) 249-2956

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

ULTIMATE PERSONAL CARE INC
14822 CHARLMONT DR
HOUSTON TX 77083
PHONE: (281) 530-5795 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/05/2016

County **FORT BEND** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030257

WILDWOOD TERRACE ASSISTED LIVING FACILITY
15318 WILDWOOD GLEN
HOUSTON **TX** 77083
Phone (281) 498-6977 **Fax** (281) 498-6977

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

FAITHLIN M SLAUGHTER
15318 WILDWOOD GLEN
HOUSTON TX 77083
PHONE: (281) 498-6977 **FAX:** (281) 498-6977
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/10/2018

County **FORT BEND** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105228

AGAPE HERITAGE HOME INC
20334 MEMORIAL PASS DR
KATY **TX** 77450
Phone (713) 562-5363 **Fax** (281) 762-7716

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 12 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

AGAPE HERITAGE HOME INC
23330 ALLISTER CT
KATY TX 77494
PHONE: (713) 562-5363 **FAX:** (281) 762-7716
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/28/2016

County **FORT BEND** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 104190

ALWAYS HOME AT SADDLEHORN TRAIL
2635 SADDLEHORN TRAIL
KATY **TX** 77494
Phone (281) 392-4212 **Fax** (832) 437-5892

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

2635 SADDLEHORN TRAIL LLC
24624 ROESNER RD
KATY TX 77494
PHONE: (832) 724-0528 **FAX:** (832) 437-5892
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/07/2018

County **FORT BEND** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 104047

ARBOR TERRACE CINCO RANCH
24001 CINCO VILLAGE CENTER BLVD
KATY **TX** 77494
Phone (281) 395-9600 **Fax** (281) 395-0745

TOTAL Lic Capacity: 78 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 39 **TITLE19:** 0
PRIVATE Beds: 78 **TITLE 18/19:** 0

Owner Information

ARHC SOKTYTX01 TRS, LLC
10350 ORMSBY PARK PL ,STE 300
LOUISVILLE KY 40223
PHONE: (502) 357-9000 **FAX:** (502) 357-9441
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/30/2017

County **FORT BEND** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105776

AUTUMN LEAVES OF CINCO RANCH
24024 WESTHEIMER PARKWAY
KATY **TX** 77494
Phone (281) 392-2050 **Fax**

TOTAL Lic Capacity: 50 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 50 **TITLE19:** 0
PRIVATE Beds: 50 **TITLE 18/19:** 0

Owner Information

CINCO RANCH MEMORY CARE LLC
24024 WESTHEIMER PARKWAY
KATY TX 77494
PHONE: (214) 845-4500 **FAX:** (214) 845-4501
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/12/2018

County **FORT BEND** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 106235

BETHEL PLACE
23330 ALLISTER COURT
KATY **TX** 77494
Phone (713) 562-5363 **Fax** (281) 762-7716

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 10 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

AGAPE HERITAGE HOME INC
23330 ALLISTER CT
KATY TX 77494
PHONE: (713) 562-5363 **FAX:** (281) 762-7716
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/01/2017

County **FORT BEND** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105906

CARRIAGE INN-KATY II
1400-B KATY FLEWELLEN ROAD
KATY **TX** 77494
Phone (281) 392-2800 **Fax** (281) 392-2805

TOTAL Lic Capacity: 51 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 20 **TITLE19:** 0
PRIVATE Beds: 51 **TITLE 18/19:** 0

Owner Information

BRIDGEWOOD KATY II LLC
6363 WOODWAY ,STE 410
HOUSTON TX 77057
PHONE: (713) 623-6767 **FAX:** (713) 623-6772
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/05/2016

County **FORT BEND** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102652

CINCO RANCH ALZHEIMERS SPECIAL CARE CENTER
3206 SOUTH FRY RD
KATY **TX** 77450
Phone (281) 599-3334 **Fax**

TOTAL Lic Capacity: 66 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 66 **TITLE19:** 0
PRIVATE Beds: 66 **TITLE 18/19:** 0

Owner Information

KATY CARE GROUP LP
5101 NE 82ND AVE ,STE 200
VANCOUVER WA 98662
PHONE: (214) 800-2820 **FAX:** (214) 800-2857
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/29/2017

County **FORT BEND** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 100977

COMFY HOME
21819 HOLLOW FIELD LN
KATY **TX** 77450
Phone (281) 398-6207 **Fax** (281) 277-2676

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

COMFY HOME INC
6607 HOLLOWAY SQUARE LANE
RICHMOND TX 77407
PHONE: (281) 277-0675 **FAX:** (281) 277-2676
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/29/2016

County **FORT BEND** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105512

SUNDANCE AT WOODCREEK RESERVE
1820 WOOD CREEK BEND LN
KATY **TX** 77494
Phone (281) 347-4450 **Fax**

TOTAL Lic Capacity: 48 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 48 **TITLE19:** 0
PRIVATE Beds: 48 **TITLE 18/19:** 0

Owner Information

HUNTINGTON CREEK CAPITAL IV LLC
5301 VILLAGE CREEK DR ,STE E
PLANO TX 75093
PHONE: (214) 364-5564 **FAX:** (903) 939-9937
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/10/2017

County **FORT BEND** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103706

THE VILLA AT SAVORY SPRINGS LLC
26102 SAVORY SPRINGS LN
KATY **TX** 77494
Phone (832) 437-0703 **Fax** (281) 347-2963

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

THE VILLA AT SAVORY SPRINGS LLC
26102 SAVORY SPRINGS LN
KATY TX 77494
PHONE: (832) 437-0703 **FAX:** (281) 347-2963
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/23/2017

County **FORT BEND** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102961

THE VILLA AT WILLOW COLONY LLC
26110 WILLOW COLONY LN
KATY **TX** 77494
Phone (281) 395-8728 **Fax** (281) 395-6326

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

THE VILLA AT WILLOW COLONY LLC
26110 WILLOW COLONY LN
KATY TX 77494
PHONE: (281) 395-0139 **FAX:** (281) 395-0773
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/09/2017

County **FORT BEND** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 104384

TUSCANY LIVING VILLA KATY
28019 NORFOLK TRAIL LANE
KATY **TX** 77494

Phone (832) 361-4064 **Fax** (281) 395-3496

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

TUSCANY LIVING MANAGEMENT LLC
1331 W GRAND PARKWAY N ,#145
KATY TX 77493

PHONE: (281) 221-0662 **FAX:** (281) 395-3496

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/15/2016

County **FORT BEND** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 101283

ADA'S PERSONAL CARE HOME
2015 EASTFIELD CIR
MISSOURI CITY **TX** 77459

Phone (281) 438-1677 **Fax** (281) 438-5629

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

Owner Information

SANDRA D BUCHANAN
1738 EASTFIELD DR
MISSOURI CITY TX 77459

PHONE: (281) 438-1677 **FAX:** (281) 438-5629

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/10/2018

County **FORT BEND** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 104587

AUTUMN LEAVES OF RIVERSTONE
20313 S. UNIVERSITY BLVD
MISSOURI CITY **TX** 77459

Phone (281) 778-2881 **Fax** (281) 778-2888

TOTAL Lic Capacity: 50 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 50 **TITLE19:** 0
PRIVATE Beds: 50 **TITLE 18/19:** 0

Owner Information

RIVERSTONE MEMORY CARE LLC
545 E JOHN CARPENTER FWY ,STE 500
IRVING TX 75062

PHONE: (214) 845-4500 **FAX:** (214) 845-4501

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/04/2017

County **FORT BEND** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 101677

BETHEL HOME CARE
7315 TOWERVIEW LN
MISSOURI CITY **TX** 77489

Phone (281) 437-2956 **Fax** (281) 416-2190

TOTAL Lic Capacity: 11 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 11 **TITLE 18/19:** 0

Owner Information

LEWIS CHARLES
7315 TOWERVIEW LN
MISSOURI CITY TX 77489

PHONE: (281) 438-4364 **FAX:** (281) 416-2190

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/04/2018

County **FORT BEND** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 104123

CIRCLES AT WRENWAY, LLC
1602 WRENWAY DR
MISSOURI CITY **TX** 77489

Phone (281) 741-9945 **Fax** (281) 741-9945

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

CIRCLES OF WRENWAY LLC
1602 WRENWAY
MISSOURI CITY TX 77489

PHONE: (281) 741-9945 **FAX:** (281) 741-9945

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/18/2017

County **FORT BEND** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 050655

GEMS QUALITY CARE HOME
1407 RIVER ROCK DR
MISSOURI CITY **TX** 77489

Phone (281) 438-9789 **Fax**

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

Owner Information

GEMELINE M ATLAN
1502 AUTUMN DAWN CT
MISSOURI CITY TX 77489

PHONE: (281) 438-1206 **FAX:** (281) 438-1206

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 06/30/2016

County **FORT BEND** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102033

GOLDEN SPLENDOR PERSONAL CARE HOME
8610 QUAIL VISTA DR
MISSOURI CITY **TX** 77489

Phone (281) 835-0662 **Fax** (281) 438-2144

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

GOLDEN SPLENDOR INC
6602 ROCKERGATE
MISSOURI CITY TX 77489

PHONE: (281) 438-8267 **FAX:** (281) 438-2144

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/14/2017

County **FORT BEND** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030172

JOSEPHINES HOME CARE
7510 DAWNBRIAR CT
MISSOURI CITY **TX** 77489

Phone (281) 437-9800 **Fax** (281) 416-8663

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

ELOISA ROYAL
6407 MISTY CREEK DR.
MISSOURI CITY TX 77459

PHONE: (281) 261-4767 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/16/2016

County **FORT BEND** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030391

OPTIMUM PERSONAL CARE INC
2019 FM 1092
MISSOURI CITY **TX** 77459

Phone (281) 208-2320 **Fax** (281) 208-3042

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

OPTIMUM PERSONAL CARE INC
2021 FM 1092
MISSOURI CITY TX 77459

PHONE: (281) 565-4144 **FAX:** (281) 208-3042

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/31/2018

County **FORT BEND** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030390

OPTIMUM PERSONAL CARE INC
2021 FM 1092
MISSOURI CITY **TX** 77459

Phone (281) 208-2318 **Fax** (281) 208-3042

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

OPTIMUM PERSONAL CARE INC
2021 FM 1092
MISSOURI CITY TX 77459

PHONE: (281) 565-4144 **FAX:** (281) 208-3042

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/31/2017

County **FORT BEND** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 101212

OPTIMUM PERSONAL CARE INC
2021 B FM 1092
MISSOURI CITY **TX** 77459

Phone (281) 403-0779 **Fax** (281) 208-3042

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

OPTIMUM PERSONAL CARE INC
2021 FM 1092
MISSOURI CITY TX 77459

PHONE: (281) 565-4144 **FAX:** (281) 208-3042

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/19/2017

County **FORT BEND** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 101213

OPTIMUM PERSONAL CARE INC
2021-A FM 1092 (MURPHY RD)
MISSOURI CITY **TX** 77459

Phone (281) 403-0789 **Fax** (281) 208-3042

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

OPTIMUM PERSONAL CARE INC
2021 FM 1092
MISSOURI CITY TX 77459

PHONE: (281) 565-4144 **FAX:** (281) 208-3042

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/22/2018

County **FORT BEND** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105034

OYSTER CREEK MANOR
3505 FM 1092
MISSOURI CITY **TX** 77459
Phone (281) 261-1217 **Fax** (281) 261-1310

TOTAL Lic Capacity: 87 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 87 **TITLE19:** 0
PRIVATE Beds: 87 **TITLE 18/19:** 0

Owner Information

WB OM AL DEVELOPMENT I LLC
3050 POST OAK BLVD ,STE 1690
HOUSTON TX 77056
PHONE: (281) 768-6700 **FAX:** (281) 768-6719
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/15/2016

County **FORT BEND** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103822

QUALITY LIVING
2029 A FM 1092
MISSOURI CITY **TX** 77459
Phone (281) 499-7050 **Fax** (281) 499-7145

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

HILDA L EAGLETON
8202 CANDLEGREEN CT
HOUSTON TX 77071
PHONE: (713) 771-8735 **FAX:** (281) 499-7145
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/19/2017

County **FORT BEND** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103821

QUALITY LIVING FM 1092
2029 B FM 1092
MISSOURI CITY **TX** 77459
Phone (281) 499-7174 **Fax** (281) 499-7145

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

HILDA L EAGLETON
8202 CANDLEGREEN CT
HOUSTON TX 77071
PHONE: (713) 771-8735 **FAX:** (281) 499-7145
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/28/2017

County **FORT BEND** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 100261

QUALITY PERSONAL CARE HOMES INC
17015 ARTWOOD LN
MISSOURI CITY **TX** 77489
Phone (281) 437-1780 **Fax** (281) 208-1627

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

QUALITY PERSONAL CARE HOMES INC
17015 ARTWOOD LN
MISSOURI CITY TX 77489
PHONE: (281) 437-1780 **FAX:** (281) 208-1627
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/31/2017

County **FORT BEND** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000351

QUALITY PERSONAL CARE HOMES, INC
543 DALEWOOD DR
MISSOURI CITY **TX** 77489
Phone (281) 438-9231 **Fax** (281) 208-1627

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

QUALITY PERSONAL CARE HOMES, INC
543 DALEWOOD DR
MISSOURI TX 77459
PHONE: (281) 431-8418 **FAX:** (281) 208-1627
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/15/2016

County **FORT BEND** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102335

SHEPHERD PERSONAL CARE HOME
2810 TROY DR
MISSOURI CITY **TX** 77459
Phone (281) 437-2003 **Fax** (281) 437-2003

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

SHEPHERD PERSONAL CARE HOME INC
2810 TROY DR
MISSOURI TX 77459
PHONE: (281) 772-6482 **FAX:** (281) 437-2003
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/22/2018

County **FORT BEND** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102832

RELIABLE OAKS ASSISTED LIVING
11750 PADON RD
NEEDVILLE **TX** 77461

Phone (979) 793-4389 **Fax** (866) 306-3650

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

RELIABLE HEALTHCARE SERVICES INC
PO BOX 1289
NEEDVILLE TX 77461

PHONE: (832) 282-7363 **FAX:** (866) 306-3650

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/19/2016

County **FORT BEND** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 106501

SUPREME MEMORY CARE
11750 PADON RD STE B
NEEDVILLE **TX** 77461

Phone (832) 282-7363 **Fax** (866) 306-3650

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

SUPREME MEMORY CARE, LLC
11750 PADON RD ,STE B
NEEDVILLE TX 77461

PHONE: (832) 282-7383 **FAX:** (866) 306-3650

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/25/2018

County **FORT BEND** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 106601

LARRY'S LAKE HOUSE, INC,
3418 COLORADO BEND DR.
PARK ROW **TX** 77494

Phone (832) 437-9134 **Fax**

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

Owner Information

LARRY'S LAKE HOUSE, INC
3418 COLORADO BEND DR
KATY TX 77494

PHONE: (832) 437-9134 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/14/2018

County **FORT BEND** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103987

AGAPE HERITAGE HOME
1911 GRAND WILLOW LANE
RICHMOND **TX** 77469

Phone (713) 562-5363 **Fax** (281) 762-7716

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 8 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

AGAPE HERITAGE HOME INC
23330 ALLISTER CT
KATY TX 77494

PHONE: (713) 562-5363 **FAX:** (281) 762-7716

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/21/2017

County **FORT BEND** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 106184

CLAYTON OAKS LIVING
21175 SOUTHWEST FREEWAY
RICHMOND **TX** 77469

Phone (281) 341-6205 **Fax** (281) 341-6205

TOTAL Lic Capacity: 108 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 25 **TITLE19:** 0
PRIVATE Beds: 108 **TITLE 18/19:** 0

Owner Information

CLAYTON OAKS LIVING, LTD.
5325 KATY FREEWAY ,SUITE ONE
HOUSTON TX 77479

PHONE: (713) 871-0063 **FAX:** (713) 871-1916

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/04/2017

County **FORT BEND** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103111

COMFY HOME, INC.
7214 WOODED LAKE LANE
RICHMOND **TX** 77407

Phone (281) 238-8040 **Fax** (281) 277-2676

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

COMFY HOME INC
6607 HOLLOWAY SQUARE LANE
RICHMOND TX 77407

PHONE: (281) 277-0675 **FAX:** (281) 277-2676

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/02/2018

County **FORT BEND** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102769

FAITH PERSONAL HOME CARE
3718 LAKE EDINBURG
RICHMOND **TX** 77406
Phone (281) 762-3381 **Fax** (281) 750-0901

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

DEBO JOKODOLA
4003 LAKE BRAZOS LN
RICHMOND TX 77406
PHONE: (713) 299-4059 **FAX:** (281) 750-0901
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/14/2017

County **FORT BEND** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 106311

ROSE HILL ASSISTED LIVING
513 FM 359 RD
RICHMOND **TX** 77406
Phone (281) 232-3214 **Fax** (281) 277-4663

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

PGAL LLC
3603 ALCORM BEND DR
SUGAR LAND TX 77479
PHONE: (713) 927-7946 **FAX:** (281) 277-4663
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/01/2018

County **FORT BEND** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103236

SUPREME PERSONAL CARE HOME
7302 CHASE GROVE LANE
RICHMOND **TX** 77469
Phone (281) 239-2404 **Fax**

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

Owner Information

SUPREME RESIDENTIAL HOME INC.
7302 CHASE GROVE LANE
RICHMOND TX 77407
PHONE: (281) 650-0450 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/23/2016

County **FORT BEND** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000890

CAMBRIDGE SQUARE RETIREMENT CENTER
2700 AVENUE N
ROSENBERG **TX** 77471
Phone (281) 344-8444 **Fax** (281) 344-1050

TOTAL Lic Capacity: 44 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 44 **TITLE 18/19:** 0

Owner Information

ROSENBURG SENIOR LIVING INC
2700 AVENUE N
ROSENBURG TX 77471
PHONE: (281) 344-8444 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/01/2016

County **FORT BEND** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000474

THE HAMPTON AT MEADOWS PLACE
11919 W AIRPORT BLVD
STAFFORD **TX** 77477
Phone (281) 240-1707 **Fax** (281) 240-0140

TOTAL Lic Capacity: 246 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 90 **TITLE19:** 0
PRIVATE Beds: 246 **TITLE 18/19:** 0

Owner Information

CHP MEADOWS PLACE TX TENANT CORP.
450 SOUTH ORANGE AVENUE
ORLANDO FL 32801
PHONE: (407) 650-1000 **FAX:** (407) 540-2576
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/30/2017

County **FORT BEND** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 010284

ATRIA SUGAR LAND
1401 SOLDIERS FIELD DR
SUGAR LAND **TX** 77479
Phone (281) 494-4200 **Fax** (281) 494-9631

TOTAL Lic Capacity: 64 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 64 **TITLE 18/19:** 0

Owner Information

WG SUGAR LAND SH, LLC
10350 ORMSBY PARK PLACE ,SUITE 300
LOUISVILLE KY 40223
PHONE: (502) 779-4700 **FAX:** (502) 779-4749
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/12/2017

County **FORT BEND** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030334

BARTON HOUSE
2229 WILLIAMS TRACE BLVD
SUGAR LAND **TX** 77478

Phone (281) 313-2500 **Fax** (281) 313-2505

TOTAL Lic Capacity: 20 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 20 **TITLE19:** 0
PRIVATE Beds: 20 **TITLE 18/19:** 0

Owner Information

COALITION FOR HOUSING OPPORTUNITIES, INC.
9605 CLARKS CROSSING ROAD
VIENNA VA 22182

PHONE: (703) 938-6124 **FAX:** (703) 938-1059

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/22/2017

County **FORT BEND** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000977

BROOKDALE SUGAR LAND
151 COMMERCE GREEN BLVD
SUGAR LAND **TX** 77478

Phone (281) 491-6257 **Fax** (281) 242-1833

TOTAL Lic Capacity: 126 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 24 **TITLE19:** 0
PRIVATE Beds: 126 **TITLE 18/19:** 0

Owner Information

ESC-NGH, LP
111 WESTWOOD PL ,STE 400
BRENTWOOD TN 37027

PHONE: (206) 298-2909 **FAX:** (206) 301-4500

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/01/2016

County **FORT BEND** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030191

COLONIAL OAKS AT FIRST COLONY
13825 LEXINGTON BLVD
SUGAR LAND **TX** 77478

Phone (281) 277-0900 **Fax** (281) 277-3674

TOTAL Lic Capacity: 93 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 19 **TITLE19:** 0
PRIVATE Beds: 93 **TITLE 18/19:** 0

Owner Information

FC COLONIAL OAKS ASSISTED LIVING LTD
510 BERING DR ,STE 210
HOUSTON TX 77057

PHONE: (713) 780-8100 **FAX:** (713) 780-8105

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/05/2016

County **FORT BEND** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 010400

COMBINED GLORY ASSISTED LIVING FACILITY
13909 SKYVIEW DR
SUGAR LAND **TX** 77478

Phone (281) 491-0076 **Fax** (281) 491-1940

TOTAL Lic Capacity: 15 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 15 **TITLE 18/19:** 0

Owner Information

COMBINED GLORY (ALF) - LIMITED LIABILITY COMPANY
13909 SKYVIEW DR
SUGARLAND TX 77498

PHONE: (281) 750-0797 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/15/2016

County **FORT BEND** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 050602

GREATWOOD RETIREMENT AND ASSISTED LIVING COMMUNITY
7001 RIVERBROOK DR
SUGAR LAND **TX** 77479

Phone (281) 343-8400 **Fax** (281) 343-8600

TOTAL Lic Capacity: 70 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 70 **TITLE 18/19:** 0

Owner Information

LSREF GOLDEN OPS 26 (TX) LLC
3500 LENOX ROAD NE ,STE 510
ATLANTA GA 30326

PHONE: (770) 754-9660 **FAX:** (770) 754-3085

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/15/2017

County **FORT BEND** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030350

HOME SWEET HOME RESIDENTIAL CARE FACILITY FOR THE ELDERLY
13218 NANTUCKET DR
SUGAR LAND **TX** 77478

Phone (281) 704-1164 **Fax** (281) 531-0571

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

HOME SWEET HOME RESIDENTIAL CARE FACILITY FOR THE ELDERLY INC
P.O. BOX 983
FULSHEAR TX 77478

PHONE: (281) 704-1164 **FAX:** (281) 346-1163

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/13/2017

County **FORT BEND** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105767

MARITT SENIOR LIVING
13534 FERNHILL DR
SUGAR LAND **TX** 77498

Phone (832) 886-4868 **Fax** (832) 886-4868

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

MARITT INC
13534 FERNHILL DR
SUGAR LAND TX 77498

PHONE: (832) 886-4868 **FAX:** (832) 886-4868

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/27/2018

County **FORT BEND** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105254

MERCIFUL HANDS ASSISTED LIVING LLC
13711 SOUTHLINE RD
SUGAR LAND **TX** 77498

Phone (832) 428-4852 **Fax** (281) 494-3328

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

MERCIFUL HANDS ASSISTED LIVING LLC
13711 SOUTHLINE RD
SUGAR LAND TX 77498

PHONE: (832) 428-4852 **FAX:** (281) 494-3328

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/05/2016

County **FORT BEND** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 106280

OPTIMUM PERSONAL CARE - SUGAR LAND
1110 LAKEVIEW DR. - WING B
SUGAR LAND **TX** 77478

Phone (281) 565-4144 **Fax** (281) 208-3042

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

OPTIMUM PERSONAL CARE SUGARLAND I LLC
2021 FM 1092 MURPHY RD
MISSOURI CITY TX 77459

PHONE: (281) 565-4144 **FAX:** (281) 208-3042

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/25/2017

County **FORT BEND** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 106279

OPTIMUM PERSONAL CARE-SUGAR LAND
1110 LAKEVIEW DR. WING A
SUGAR LAND **TX** 77478

Phone (281) 565-4144 **Fax** (281) 208-3042

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

OPTIMUM PERSONAL CARE SUGARLAND I LLC
2021 FM 1092 MURPHY RD
MISSOURI CITY TX 77459

PHONE: (281) 565-4144 **FAX:** (281) 208-3042

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/25/2017

County **FORT BEND** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000320

SILVERADO SENIOR LIVING - SUGAR LAND
1221 SEVENTH ST
SUGAR LAND **TX** 77478

Phone (281) 277-1221 **Fax** (281) 277-1020

TOTAL Lic Capacity: 96 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 96 **TITLE19:** 0
PRIVATE Beds: 96 **TITLE 18/19:** 0

Owner Information

SUBTENANT 1221 SEVENTH STREET LLC
4500 DORR ST
TOLEDO OH 43615

PHONE: (419) 247-2800 **FAX:** (419) 247-2826

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/01/2017

County **FORT BEND** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 106134

THE SYCAMORES AT SUGAR LAND
770 BROOKS ST
SUGAR LAND **TX** 77478

Phone (281) 491-0448 **Fax** (281) 491-0449

TOTAL Lic Capacity: 129 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 43 **TITLE19:** 0
PRIVATE Beds: 129 **TITLE 18/19:** 0

Owner Information

SUGARLAND CARE GROUP, LP
1910 FAIRVIEW AVE EAST
SEATTLE WA 98102

PHONE: (206) 453-0290 **FAX:** (206) 694-2705

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/11/2017

County **FRANKLIN** Reg Svcs: TYLER NW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 000914

MOUNT VERNON HOUSE
502 MEADOW PARK
MOUNT VERNON **TX** 75457

Phone (903) 537-4857 **Fax** (903) 537-2833

TOTAL Lic Capacity: 68 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 68 **TITLE 18/19:** 0

Owner Information

K C V T NURSING CENTERS INC
502 MEADOW PARK
MOUNT VERNON TX 75457

PHONE: (903) 537-4857 **FAX:** (903) 537-2833

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/30/2016

County **FRIO** Reg Svcs: TEAM X Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 000716

COUNTRY VIEW CARE CENTER
1060 NW FM 462
MOORE **TX** 78057

Phone (830) 665-6068 **Fax** (830) 663-5232

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

RHONDA L KORCZYNSKI
PO BOX 186
MOORE TX 78057

PHONE: (830) 665-6068 **FAX:** (830) 663-5232

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 06/11/2017

County **GAINES** Reg Svcs: MIDLAND GERIATRIC Region 09 - ABILENE

Facility Information: **Facility ID:** 100794

MEMORIAL PLACE
300 NW 8TH ST
SEMINOLE **TX** 79360

Phone (432) 758-5802 **Fax** (432) 955-0568

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

SEMINOLE HOSPITAL DISTRICT OF GAINES COUNTY TEXAS
209 NW 8TH ST
SEMINOLE TX 79360

PHONE: (432) 758-5811 **FAX:** (432) 758-4880

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/19/2017

County **GALVESTON** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000842

LA VITA BELLA
3527 OAK DR
DICKINSON **TX** 77539

Phone (281) 534-9404 **Fax** (281) 534-9384

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

LAMPSON ASSISTED LIVING INC
718 BEACHCOMBER LN
HOUSTON TX 77062

PHONE: (281) 488-7907 **FAX:** (281) 488-8508

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/23/2017

County **GALVESTON** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105010

SERENITY GARDENS
1816 GILL RD
DICKINSON **TX** 77539

Phone (832) 738-1576 **Fax** (832) 738-1061

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

SERENITY PCH LLC
1816 GILL RD
DICKINSON TX 77539

PHONE: (832) 738-1576 **FAX:** (832) 738-1061

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/21/2018

County **GALVESTON** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030422

BROOKDALE FRIENDSWOOD
1310 FRIENDSWOOD DR SOUTH
FRIENDSWOOD **TX** 77546

Phone (281) 648-5454 **Fax** (281) 648-5455

TOTAL Lic Capacity: 120 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 45 **TITLE19:** 0
PRIVATE Beds: 120 **TITLE 18/19:** 0

Owner Information

SUMMERVILLE AT FRIENDSWOOD ASSOCIATES LP
111 WESTWOOD PL ,STE 400
BRENTWOOD TN 37027

PHONE: (615) 221-2250 **FAX:** (615) 221-8204

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/31/2017

County **GALVESTON** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 106575

SERENITY GARDENS
118 W WILLOWICK AVE
FRIENDSWOOD **TX** 77546

Phone (832) 569-4517 **Fax** (832) 569-4616

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

SERENITY ALF, LLC
118 W WILLOWICK AVE
FRIENDSWOOD TX 77546

PHONE: (832) 569-4517 **FAX:** (832) 569-4616

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/22/2018

County **GALVESTON** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030105

CONCORD ASSISTED LIVING LLC
1516 HARBORVIEW CIR
GALVESTON **TX** 77550

Phone (409) 765-1353 **Fax** (409) 762-1010

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

CONCORD ASSISTED LIVING LLC
1516 HARBORVIEW CIRCLE
GALVESTON TX 77550

PHONE: (409) 765-1353 **FAX:** (409) 765-5084

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/15/2018

County **GALVESTON** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030214

CONCORD ON BROADWAY
1601 BROADWAY
GALVESTON **TX** 77550

Phone (409) 789-7611 **Fax**

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

REEJUD ENTERPRISES INC
2200 MARKET ST
GALVESTON TX 77550

PHONE: (409) 729-7611 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/20/2017

County **GALVESTON** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 101548

TRANSITIONAL LEARNING CENTER AT GALVESTON
1527 MARKET ST
GALVESTON **TX** 77550

Phone (409) 762-6661 **Fax** (409) 762-9961

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

TRANSITIONAL LEARNING CENTER AT GALVESTON
1528 POSTOFFICE ST
GALVESTON TX 77550

PHONE: (409) 762-6661 **FAX:** (409) 762-9961

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/06/2016

County **GALVESTON** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000551

TRANSITIONAL LEARNING CENTER AT GALVESTON
1528 POSTOFFICE ST
GALVESTON **TX** 77550

Phone (409) 762-6661 **Fax** (409) 762-9961

TOTAL Lic Capacity: 24 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 24 **TITLE 18/19:** 0

Owner Information

TRANSITIONAL LEARNING CENTER AT GALVESTON
1528 POSTOFFICE ST
GALVESTON TX 77550

PHONE: (409) 762-6661 **FAX:** (409) 762-9961

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/31/2016

County **GALVESTON** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102680

TRANSITIONAL LEARNING CENTER AT GALVESTON - TIDEWAY SOUTH
6444 CENTRAL CITY BOULEVARD
GALVESTON **TX** 77551

Phone (409) 741-3266 **Fax** (409) 741-1523

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

TRANSITIONAL LEARNING CENTER AT GALVESTON
1528 POSTOFFICE ST
GALVESTON TX 77550

PHONE: (409) 762-6661 **FAX:** (409) 762-9961

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/06/2017

County **GALVESTON** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 101922

TRANSITIONAL LEARNING CENTER AT GALVESTON TIDEWAY
6444 CENTRAL CITY BLVD
GALVESTON **TX** 77551
Phone (409) 741-3266 **Fax** (409) 741-1523

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

TRANSITIONAL LEARNING CENTER AT GALVESTON
1528 POSTOFFICE ST
GALVESTON TX 77550
PHONE: (409) 762-6661 **FAX:** (409) 762-9961
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/10/2016

County **GALVESTON** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 104947

SEASONS PERSONAL CARE HOME
6714 DELANEY RD
HITCHCOCK **TX** 77563
Phone (409) 986-8888 **Fax** (409) 316-9376

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

RITA M KETTERL
6714 DELANEY RD
HITCHCOCK TX 77563
PHONE: (409) 986-8888 **FAX:** (409) 316-9376
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/15/2018

County **GALVESTON** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030287

DOLL HOUSE ENTERPRISE LLC
1031 LAUREL
LA MARQUE **TX** 77568
Phone (409) 797-4176 **Fax**

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

DOLL HOUSE ENTERPRISE LLC
1031 LAUREL STREET
LAMARQUE TX 77568
PHONE: (409) 797-4176 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/13/2017

County **GALVESTON** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030166

LAUREL HOUSE
1109 HOLLY
LA MARQUE **TX** 77568
Phone (409) 935-2625 **Fax**

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

Owner Information

BALLIEW ASSISTED LIVING INC
1109 HOLLY ST
LA MARQUE TX 77568
PHONE: (832) 561-1402 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/07/2017

County **GALVESTON** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030348

THE MILDRED HOUSE INC
1515 4TH AVE
LA MARQUE **TX** 77568
Phone (409) 933-1219 **Fax** (409) 933-1812

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

VERSIE M BLACKMON
1515 4TH AVENUE
LAMARQUE TX 77568
PHONE: (409) 933-1219 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/02/2017

County **GALVESTON** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105074

BRAWNER SUNSET HAVEN LLC
2019 SUNSET COURT SOUTH
LEAGUE CITY **TX** 77573
Phone (832) 932-5020 **Fax** (832) 932-5020

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

BRAWNER SUNSET HAVEN LLC
2019 SUNSET COURT SOUTH
LEAGUE CITY TX 77573
PHONE: (832) 932-5020 **FAX:** (832) 932-5020
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/31/2016

County **GALVESTON** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 106261

MRC THE CROSSINGS
255 N. EGRET BAY BLVD
LEAGUE CITY **TX** 77573

Phone (281) 724-2345 **Fax** (281) 664-3279

TOTAL Lic Capacity: 68 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 24 **TITLE19:** 0
PRIVATE Beds: 68 **TITLE 18/19:** 0

Owner Information

HAPPY HARBOR METHODIST HOME INC
1440 LAKE FRONT CIRCLE ,STE 110
THE WOODLANDS TX 77380

PHONE: (281) 363-2600 **FAX:** (281) 664-3279

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/11/2018

County **GALVESTON** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105782

ORCHARD PARK AT VICTORY LAKES
2760 W. WALKER STREET
LEAGUE CITY **TX** 77573

Phone (281) 369-4404 **Fax** (832) 769-3594

TOTAL Lic Capacity: 136 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 75 **TITLE19:** 0
PRIVATE Beds: 136 **TITLE 18/19:** 0

Owner Information

WALKER SENIOR CARE LLC
1000 LEGION PL ,STE 1750
ORLANDO FL 32801

PHONE: (407) 999-2400 **FAX:** (407) 999-7775

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/02/2017

County **GALVESTON** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 050601

REGAL ESTATES ASSISTED LIVING COMMUNITY
500 ENTERPRISE DR
LEAGUE CITY **TX** 77573-2920

Phone (281) 538-5993 **Fax** (281) 538-9664

TOTAL Lic Capacity: 142 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 142 **TITLE 18/19:** 0

Owner Information

LSREF GOLDEN OPS 26 (TX) LLC
3500 LENOX ROAD NE ,STE 510
ATLANTA GA 30326

PHONE: (770) 754-9660 **FAX:** (770) 754-3085

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/15/2017

County **GALVESTON** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 106178

SENIOR VILLAGE
501 NEWPORT BLVD
LEAGUE CITY **TX** 77573

Phone (832) 632-1188 **Fax** (832) 632-2587

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

NRASHAH INC
10203 WEST PALM LAKE DR
HOUSTON TX 77034

PHONE: (832) 794-0390 **FAX:** (932) 632-1184

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/02/2017

County **GALVESTON** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105485

THE COTTAGES AT CLEAR LAKE
400 LANDING BLVD.
LEAGUE CITY **TX** 77573

Phone (281) 316-4281 **Fax** (281) 554-8607

TOTAL Lic Capacity: 72 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 72 **TITLE19:** 0
PRIVATE Beds: 72 **TITLE 18/19:** 0

Owner Information

CLEAR LAKE COTTAGES LTD
4514 TRAVIS ST ,STE 211
DALLAS TX 75205

PHONE: (214) 526-0021 **FAX:** (214) 526-7965

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/01/2017

County **GALVESTON** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 010237

THE COTTAGES AT CLEAR LAKE I
450 LANDING BLVD
LEAGUE CITY **TX** 77573

Phone (281) 316-4281 **Fax** (281) 554-8607

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

CLEAR LAKE COTTAGES LTD
4514 TRAVIS ST ,STE 211
DALLAS TX 75205

PHONE: (214) 526-0021 **FAX:** (214) 526-7965

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/08/2017

County **GALVESTON** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 010241

THE COTTAGES AT CLEAR LAKE I I
450 LANDING BLVD
LEAGUE CITY **TX** 77573

Phone (281) 316-4281 **Fax** (281) 554-8607

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

CLEAR LAKE COTTAGES LTD
4514 TRAVIS ST ,STE 211
DALLAS TX 75205

PHONE: (214) 526-0021 **FAX:** (214) 526-7965

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/08/2017

County **GALVESTON** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000694

ELMCROFT OF THE MAINLAND
1901 N AMBURN RD
TEXAS CITY **TX** 77591

Phone (409) 935-6620 **Fax** (409) 933-0658

TOTAL Lic Capacity: 108 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 108 **TITLE 18/19:** 0

Owner Information

ESL MAINLAND OPERATIONS LLC
9510 ORMSBY STATION RD ,STE 101
LOUISVILLE KY 40223

PHONE: (502) 753-6004 **FAX:** (502) 753-6104

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/10/2017

County **GALVESTON** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030097

GAMBLES PERSONAL TOUCH CARE HOME
501 N AMBURN RD
TEXAS CITY **TX** 77591

Phone (409) 935-5655 **Fax** (409) 938-4349

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

CARING HANDS ASSISTED LIVING, LLC
726 DUNWICK LN
PASADENA TX 77502

PHONE: (888) 672-2221 **FAX:** (832) 202-2688

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/16/2017

County **GALVESTON** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 101040

H R A VILLAGE INC
905 HWY 3 N
TEXAS CITY **TX** 77591

Phone (409) 935-4335 **Fax** (409) 935-4153

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

HRA VILLAGE INCORPORATED
905 HWY 3 N
TEXAS CITY TX 77591

PHONE: (409) 935-4335 **FAX:** (409) 935-4153

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/21/2017

County **GALVESTON** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000443

THE INDEPENDENCE VILLAGE
905 HWY 3 N
TEXAS CITY **TX** 77591

Phone (409) 935-4335 **Fax** (409) 935-4153

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

HRA VILLAGE INCORPORATED
905 HWY 3 N
TEXAS CITY TX 77591

PHONE: (409) 935-4335 **FAX:** (409) 935-4153

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/05/2018

County **GILLESPIE** Reg Svcs: TEAM X Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 030089

HERITAGE PLACE
96 FREDERICK RD
FREDERICKSBURG **TX** 78624

Phone (830) 997-9406 **Fax** (830) 997-4374

TOTAL Lic Capacity: 70 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 70 **TITLE 18/19:** 0

Owner Information

FSQC-TX LLC
400 CENTRE ST
NEWTON MA 02458

PHONE: (617) 796-8387 **FAX:** (617) 219-1435

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/07/2018

County **GILLESPIE** Reg Svcs: TEAM W Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 000530

KNOPP ASSISTED LIVING CENTER INC
202 BILLIE DR
FREDERICKSBURG **TX** 78624
Phone (830) 997-7924 **Fax** (830) 990-4731

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

KNOPP ASSISTED LIVING CENTER INC
202 BILLIE DR
FREDERICKSBURG TX 78624
PHONE: (830) 997-7924 **FAX:** (830) 990-4731
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/01/2017

County **GILLESPIE** Reg Svcs: TEAM V Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 000552

KNOPP RETIREMENT CENTER
103 E TRAILMOOR DR
FREDERICKSBURG **TX** 78624
Phone (830) 997-4426 **Fax** (830) 997-5245

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

KNOPP RETIREMENT CENTER INC
103 E TRAILMOOR
FREDERICKSBURG TX 78624
PHONE: (830) 997-5349 **FAX:** (830) 990-4731
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/01/2017

County **GILLESPIE** Reg Svcs: TEAM W Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 104847

MORNING STAR MEMORY CARE OF FREDERICKSBURG TEXAS LLC
106 HERITAGE HILLS DR
FREDERICKSBURG **TX** 78624
Phone (830) 990-9007 **Fax** (830) 990-8000

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

MORNING STAR MEMORY CARE OF FREDRICKSBURG TEXAS LLC
106 HERITAGE HILLS DR
FREDRICKSBURG TX 78624
PHONE: (830) 900-9007 **FAX:** (830) 990-8000
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/01/2018

County **GILLESPIE** Reg Svcs: TEAM W Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 101386

THE PAIGE HOUSE
2230 N LLANO
FREDERICKSBURG **TX** 78624
Phone (830) 997-4613 **Fax** (830) 997-3592

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

THE PAIGE HOUSE INC
2230 N LLANO RD
FREDERICKSBURG TX 78624
PHONE: (830) 997-4613 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/24/2017

County **GONZALES** Reg Svcs: TEAM W Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 000702

THE BRAIN INJURY LIFECARE CENTER
239 PRIVATE ROAD 5091
GONZALES **TX** 78629
Phone (830) 672-6596 **Fax** (830) 672-7446

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

POST ACUTE MEDICAL OUTPATIENT CLINICS, LLC
3500 MARKET ST ,STE 202
CAMP HILL PA 17011
PHONE: (717) 731-9660 **FAX:** (717) 731-9665
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/01/2016

County **GONZALES** Reg Svcs: TEAM W Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 030010

THE ROMBERG HOUSE
210 QUALLS ST
GONZALES **TX** 78629
Phone (830) 672-8249 **Fax** (830) 672-2493

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

210 QUALLS LLC
210 QUALLS
GONZALES TX 78629
PHONE: (830) 672-8249 **FAX:** (210) 826-8548
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/15/2017

County **GRAY** Reg Svcs: HIGH PLAINS GERI 1 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 000434

MEREDITH PLACE
812 W 25TH ST
PAMPA **TX** 79065

Phone (806) 665-5668 **Fax** (806) 665-2599

TOTAL Lic Capacity: 43 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 43 **TITLE 18/19:** 0

Owner Information

MEREDITH AID OPCO LLC
330 N WABASH ,STE 3700
CHICAGO IL 60611

PHONE: (312) 725-7000 **FAX:** (312) 332-5300

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/11/2017

County **GRAYSON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 100516

CRAWFORD STREET PLACE, INC
4318 CRAWFORD ST RD
DENISON **TX** 75020

Phone (903) 463-0400 **Fax** (903) 463-0431

TOTAL Lic Capacity: 11 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 11 **TITLE 18/19:** 0

Owner Information

CRAWFORD STREET PLACE INC
3110 NORTHPOINT
SHERMAN TX 75090

PHONE: (903) 892-1695 **FAX:** (903) 892-1695

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/23/2017

County **GRAYSON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000999

GRAYSON PLACE
3001 CRAWFORD ST
DENISON **TX** 75020

Phone (903) 463-1323 **Fax** (903) 463-4780

TOTAL Lic Capacity: 36 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 36 **TITLE 18/19:** 0

Owner Information

KATY AID OPCO LLC
330 N WABASH ,STE 3700
CHICAGO IL 60611

PHONE: (312) 725-7000 **FAX:** (312) 332-5300

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/11/2017

County **GRAYSON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105115

LEGACY ASSISTED LIVING AND MEMORY CARE INC
1100 REBA MCENTIRE LANE
DENISON **TX** 75020

Phone (903) 337-1625 **Fax**

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

LEGACY ASSISTED LIVING AND MEMORY CARE INC
1100 REBA MCENTIRE LANE
DENISON TX 75020

PHONE: (903) 337-1625 **FAX:** (903) 463-0431

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/21/2018

County **GRAYSON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104136

NANAWS PLACE
1100 W MUNSON ST
DENISON **TX** 75020

Phone (903) 375-7600 **Fax**

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

DONNA HIGGINBOTHAM
1204 W BULLOCK
DENISON TX 75020

PHONE: (903) 361-5044 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/15/2016

County **GRAYSON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000463

STONE BROOK ASSISTED LIVING AND MEMORY CARE
1616 LIFESEARCH WAY
DENISON **TX** 75020

Phone (903) 465-5051 **Fax** (903) 465-4711

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 30 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

STONEBROOK ASSISTED LIVING LLC
885 CAMPGROUND RD
SHERMAN TX 75090

PHONE: (214) 306-7674 **FAX:** (866) 684-0884

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/01/2018

County **GRAYSON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000765

WESLEY VILLAGE
2800 LOY LAKE RD
DENISON **TX** 75020
Phone (903) 465-6463 **Fax** (903) 465-6498

TOTAL Lic Capacity: 72 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 72 **TITLE 18/19:** 0

Owner Information

WESLEY VILLAGE RETIREMENT HOME INC
2800 LOY LAKE RD
DENISON TX 75020
PHONE: (903) 465-6463 **FAX:** (903) 465-6498
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/23/2018

County **GRAYSON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030070

BROOKDALE WILLOWS SHERMAN
3410 POST OAK CROSSING
SHERMAN **TX** 75092
Phone (903) 891-3737 **Fax** (903) 891-3770

TOTAL Lic Capacity: 75 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 20 **TITLE19:** 0
PRIVATE Beds: 75 **TITLE 18/19:** 0

Owner Information

EMERITUS CORPORATION
6737 W. WASHINGTON STREET ,SUITE 2300
MILWAUKEE WI 53214
PHONE: (414) 918-5000 **FAX:** (414) 918-5054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/31/2016

County **GRAYSON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000795

HOME TO YOU
243 INDEPENDENCE SPRINGS RD
SHERMAN **TX** 75090
Phone (903) 893-7093 **Fax** (903) 893-7093

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

JESSLEEDRA CORPORATION
243 INDEPENDENCE SPRINGS RD
SHERMAN TX 75090
PHONE: (903) 893-7093 **FAX:** (903) 893-2805
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/01/2017

County **GRAYSON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102688

PECAN POINT ASSISTED LIVING AND MEMORY CARE COMMUNITY
1011 E. PECAN GROVE RD
SHERMAN **TX** 75090
Phone (903) 892-9100 **Fax** (903) 892-2200

TOTAL Lic Capacity: 70 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 70 **TITLE 18/19:** 0

Owner Information

CSL S SHERMAN LLC
14160 DALLAS PARKWAY ,SUITE 300
DALLAS TX 75254
PHONE: (512) 305-4776 **FAX:** (512) 391-4776
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/10/2016

County **GRAYSON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000972

PRESTON PLACE
620 BLANTON DR
SHERMAN **TX** 75092
Phone (903) 892-6937 **Fax** (903) 870-0279

TOTAL Lic Capacity: 48 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 48 **TITLE 18/19:** 0

Owner Information

PRESTON AID OPCO LLC
330 N WABASH AVE ,STE 3700
CHICAGO IL 60611
PHONE: (312) 725-7000 **FAX:** (312) 332-5300
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/11/2017

County **GRAYSON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000690

RENAISSANCE - SHERMAN
3701 LOY LAKE RD
SHERMAN **TX** 75090
Phone (903) 868-2200 **Fax** (903) 868-1877

TOTAL Lic Capacity: 40 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 40 **TITLE 18/19:** 0

Owner Information

HARVEST RENAISSANCE - SHERMAN LLC
5585 MEADOWS RD ,STE 500
LAKE OSWEGO OR 97035
PHONE: (503) 586-7309 **FAX:** (503) 431-2320
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/28/2018

County **GRAYSON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104670

TRADITIONS SENIOR LIVING AND MEMORY CARE
505 NORTH FM 1417
SHERMAN **TX** 75092

Phone (903) 893-4282 **Fax** (903) 893-4262

TOTAL Lic Capacity: 76 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 35 **TITLE19:** 0
PRIVATE Beds: 76 **TITLE 18/19:** 0

Owner Information

SHERMAN SENIOR LIVING LLC
117 W MAIN ST
ALLEN TX 75013

PHONE: (817) 984-4404 **FAX:** (903) 215-8581

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/01/2017

County **GRAYSON** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101205

JUST LIKE HOME
6313 OLD SHERMAN RD
WHITESBORO **TX** 76273

Phone (903) 564-7466 **Fax** (903) 564-5405

TOTAL Lic Capacity: 15 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 15 **TITLE 18/19:** 0

Owner Information

REED FRANCIS COMPANY
6313 OLD SHERMAN RD
WHITESBORO TX 76273

PHONE: (903) 564-7466 **FAX:** (903) 564-5405

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/24/2017

County **GREGG** Reg Svcs: TYLER SE TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 100561

ARABELLA OF KILGORE
2103 CHANDLER ST
KILGORE **TX** 75662

Phone (903) 984-8839 **Fax**

TOTAL Lic Capacity: 67 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 24 **TITLE19:** 0
PRIVATE Beds: 67 **TITLE 18/19:** 0

Owner Information

KAL 2016 LLC
3973 W VICKERY BLVD ,STE 101
FORT WORTH TX 76107

PHONE: (817) 386-8888 **FAX:** (817) 386-8324

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/01/2018

County **GREGG** Reg Svcs: TYLER SE TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 000965

ALPINE HOUSE
2104 ALPINE RD
LONGVIEW **TX** 75601

Phone (903) 234-8600 **Fax** (903) 234-1149

TOTAL Lic Capacity: 36 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 36 **TITLE 18/19:** 0

Owner Information

VERITAS INCARE, LLC
6933 CRUMPLER BLVD ,STE A
OLIVE BRANCH MS 38654

PHONE: (662) 895-1801 **FAX:** (662) 895-1804

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/01/2017

County **GREGG** Reg Svcs: TYLER SE TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 106015

ARABELLA OF LONGVIEW ASSISTED LIVING AND MEMORY CARE
1155 E. HAWKINS PWKY
LONGVIEW **TX** 75605

Phone (903) 663-8886 **Fax** (903) 566-8506

TOTAL Lic Capacity: 92 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 32 **TITLE19:** 0
PRIVATE Beds: 92 **TITLE 18/19:** 0

Owner Information

ARABELLA OF LONGVIEW ASSISTED LIVING, LLC
1155 E. HAWKINS
LONGVIEW TX 75605

PHONE: (903) 239-2437 **FAX:** (903) 566-8506

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/01/2017

County **GREGG** Reg Svcs: TYLER SE TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 103314

BOYDS HOME
315 E CLIFFWOOD
LONGVIEW **TX** 75603

Phone (903) 643-9990 **Fax** (903) 643-3203

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

WILLIE E BOYD
315 E CLIFFWOOD
LONGVIEW TX 75603

PHONE: (903) 643-9990 **FAX:** (903) 643-3203

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE C
License Exp Dt: 12/27/2016

County **GREGG** Reg Svcs: TYLER SE TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 000382

BROOKDALE LONGVIEW
2920 N EASTMAN RD
LONGVIEW **TX** 75605
Phone (903) 757-6020 **Fax** (903) 757-2491

TOTAL Lic Capacity: 80 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 80 **TITLE 18/19:** 0

Owner Information

ESC IV LP
111 WESTWOOD PL ,STE 400
BRENTWOOD TN 37027
PHONE: (414) 918-5441 **FAX:** (414) 918-5054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/01/2016

County **GREGG** Reg Svcs: TYLER SE TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 100157

BUCKNER WESTMINSTER PLACE
2201 HORSESHOE LN
LONGVIEW **TX** 75605
Phone (903) 234-0000 **Fax** (903) 234-0909

TOTAL Lic Capacity: 61 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 25 **TITLE19:** 0
PRIVATE Beds: 61 **TITLE 18/19:** 0

Owner Information

BUCKNER RETIREMENT SERVICES INC
700 N PEARL ST ,STE 1200
DALLAS TX 75201
PHONE: (214) 758-8000 **FAX:** (214) 758-8153
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/16/2017

County **GREGG** Reg Svcs: TYLER SE TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 001231

DEBORAH NALLS FOSTER CARE
512 N 2ND ST
LONGVIEW **TX** 75601
Phone (903) 236-0606 **Fax** (903) 236-0606

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

DEBORAH E NALLS
512 N 2ND ST
LONGVIEW TX 75601
PHONE: **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE C
License Exp Dt: 07/10/2016

County **GREGG** Reg Svcs: TYLER SE TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 103336

EMMANUEL HOMES
812 S GREEN
LONGVIEW **TX** 75602
Phone (903) 238-9723 **Fax** (903) 234-8138

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

LATONYA WILLIE-POLK
PO BOX 8664
LONGVIEW TX 75602
PHONE: (903) 315-8302 **FAX:** (903) 297-4999
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 06/02/2017

County **GREGG** Reg Svcs: TYLER SE TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 104611

EMMANUEL HOMES #3
807 S MOBBERLY
LONGVIEW **TX** 75602
Phone (903) 553-0413 **Fax** (903) 297-4999

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

LATONYA WILLIE-POLK
1206 BERRY LN
LONGVIEW TX 75602
PHONE: (903) 315-8302 **FAX:** (903) 234-8138
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/08/2017

County **GREGG** Reg Svcs: TYLER SE TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 102944

HAWKINS CREEK ASSISTED LIVING AND MEMORY CARE COMMUNITY
311 E HAWKINS PKWY
LONGVIEW **TX** 75605
Phone (903) 663-1079 **Fax** (903) 663-0529

TOTAL Lic Capacity: 70 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 70 **TITLE 18/19:** 0

Owner Information

CSL S LONGVIEW LLC
14160 DALLAS PARKWAY ,SUITE 300
DALLAS TX 75254
PHONE: (972) 308-8366 **FAX:** (972) 387-8216
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/10/2016

County **GREGG** Reg Svcs: TYLER SE TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 105642

HEARTIS LONGVIEW
1408 LAGO TRL
LONGVIEW **TX** 75604

Phone (903) 291-0020 **Fax** (903) 758-7984

TOTAL Lic Capacity: 82 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 22 **TITLE19:** 0
PRIVATE Beds: 82 **TITLE 18/19:** 0

Owner Information

HEART FOUNTAINVIEW PARTNERS, LP
5910 N CENTRAL EXPRESSWAY ,SUITE 200
DALLAS TX 75206

PHONE: (214) 916-5750 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/01/2017

County **GREGG** Reg Svcs: TYLER SE TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 001178

HIGGS FOSTER HOME 1
611 E BUCHANAN AVE
LONGVIEW **TX** 75602

Phone (903) 753-4517 **Fax**

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

MARY HIGGS
611 E BUCHANAN AVE
LONGVIEW TX 75602

PHONE: (903) 753-4517 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE C
License Exp Dt: 09/30/2016

County **GREGG** Reg Svcs: TYLER SE TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 050011

NEW LIFE OUTREACH BOARDING HOME
1511 MOBBERLY AVE
LONGVIEW **TX** 75602

Phone (903) 758-2866 **Fax** (903) 758-9153

TOTAL Lic Capacity: 29 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 29 **TITLE 18/19:** 0

Owner Information

SHIRLEY M ANDERSON
P O BOX 12478
LONGVIEW TX 75607

PHONE: (903) 758-2866 **FAX:** (903) 758-9153

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/06/2017

County **GREGG** Reg Svcs: TYLER SE TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 030195

NEW LIFE OUTREACH BOARDING HOME
2016 S HIGH ST
LONGVIEW **TX** 75602

Phone (903) 758-2866 **Fax** (903) 758-9153

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

SHIRLEY M ANDERSON
P O BOX 12478
LONGVIEW TX 75607

PHONE: (903) 758-2866 **FAX:** (903) 758-9153

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/20/2017

County **GREGG** Reg Svcs: TYLER SE TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 100155

SONGBIRD ASSISTED LIVING A
3102 A GILMER RD
LONGVIEW **TX** 75604

Phone (903) 295-1711 **Fax** (903) 297-0904

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

Owner Information

CHG SENIOR LIVING OF LONGVIEW LLC
2200 ROSS AVE ,STE 5400
DALLAS TX 75604

PHONE: (469) 621-6700 **FAX:** (469) 621-6672

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/04/2018

County **GREGG** Reg Svcs: TYLER SE TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 100156

SONGBIRD ASSISTED LIVING B
3102 B GILMER RD
LONGVIEW **TX** 75604

Phone (903) 295-1711 **Fax** (903) 297-0904

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

Owner Information

CHG SENIOR LIVING OF LONGVIEW LLC
2200 ROSS AVE ,STE 5400
DALLAS TX 75604

PHONE: (469) 621-6700 **FAX:** (469) 621-6672

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/04/2018

County **GRIMES** Reg Svcs: BRENHAM Region 07 - AUSTIN

Facility Information: **Facility ID:** 104330

THE SEASONS ON WATER STREET
1103 WATER STREET
NAVASOTA **TX** 77868
Phone (936) 825-2237 **Fax** (936) 825-1897

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

Owner Information

RTS READY TO SERVE, LLC
P O BOX 49
NAVASOTA TX 77868
PHONE: (936) 825-2237 **FAX:** (936) 825-1897
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/14/2018

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

Facility Information: **Facility ID:** 103588

MARION HOUSE
326 W SEGUIN ST
MARION **TX** 78124
Phone (830) 914-3371 **Fax** (930) 914-3371

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

ELVIRA J CADENA
PO BOX 390
MARION TX 78124
PHONE: (830) 914-3371 **FAX:** (830) 914-3371
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/05/2017

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

Facility Information: **Facility ID:** 104975

FIRST STREET ASSISTED LIVING AND ADULT DAY CARE
312 FIRST STREET
SCHERTZ **TX** 78154
Phone (210) 566-6303 **Fax** (210) 566-4191

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

AMERICAN ASSISTED LIVING GROUP, LP
312 FIRST STREET
SCHERTZ TX 78154
PHONE: (210) 566-6303 **FAX:** (210) 566-4191
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/15/2018

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

Facility Information: **Facility ID:** 106371

LEGACY AT FOREST RIDGE
5001 SCHERTZ PARKWAY
SCHERTZ **TX** 78154
Phone (210) 305-5713 **Fax**

TOTAL Lic Capacity: 108 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 30 **TITLE19:** 0
PRIVATE Beds: 108 **TITLE 18/19:** 0

Owner Information

LARF TENANT LLC
675 BERING DR ,SUITE 550
HOUSTON TX 77057
PHONE: (713) 425-5423 **FAX:** (713) 425-5402
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/01/2018

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

Facility Information: **Facility ID:** 105480

NEW HAVEN ASSISTED LIVING OF SCHERTZ, LLC
2300 FM 3009
SCHERTZ **TX** 78154
Phone (210) 319-4965 **Fax** (210) 309-4947

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

NEW HAVEN ASSISTED LIVING OF SCHERTZ LLC
2300 FM 3009
SCHERTZ TX 78154
PHONE: (210) 319-4965 **FAX:** (210) 309-4947
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/03/2017

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

Facility Information: **Facility ID:** 105481

NEW HAVEN ASSISTED LIVING OF SCHERTZ, LLC
2332 FM 3009
SCHERTZ **TX** 78154
Phone (210) 319-4965 **Fax** (210) 309-4947

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

NEW HAVEN ASSISTED LIVING OF SCHERTZ LLC
2300 FM 3009
SCHERTZ TX 78154
PHONE: (210) 319-4965 **FAX:** (210) 309-4947
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/20/2017

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

Facility Information: **Facility ID:** 030122

ARGENT COURT
953 S HWY 123 BYPASS
SEGUIN **TX** 78155
Phone (830) 372-1177 **Fax** (830) 372-4477

TOTAL Lic Capacity: 56 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 56 **TITLE 18/19:** 0

Owner Information

ARGENT SEGUIN OPERATIONS LLC
8301 BROADWAY ,STE 319
SAN ANTONIO TX 78209
PHONE: (210) 829-7121 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/01/2017

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

Facility Information: **Facility ID:** 000554

HACIENDA ASSISTED LIVING CYPRESS HILL
3015 OLD LEHMANN RD
SEGUIN **TX** 78155
Phone (830) 372-2701 **Fax** (830) 303-3870

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

TANGRAM REHABILITATION NETWORK INC
9901 LINN STATION ROAD
LOUISVILLE KY 40223-3808
PHONE: (512) 396-1200 **FAX:** (512) 396-2024

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/15/2016

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

Facility Information: **Facility ID:** 030104

RESCARE PREMIER LOMA LINDA
301 TANGRAM RANCH RD
SEGUIN **TX** 78155
Phone (830) 372-4380 **Fax** (830) 372-1822

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

Owner Information

TANGRAM REHABILITATION NETWORK INC
9901 LINN STATION ROAD
LOUISVILLE KY 40223-3808
PHONE: (512) 396-1200 **FAX:** (512) 396-2024

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/15/2016

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

Facility Information: **Facility ID:** 000738

RESCARE PREMIER TANGRAM BEHAVIORAL PROGRAM NORTH CAMPUS
500 TANGRAM RANCH RD
SEGUIN **TX** 78155
Phone (830) 372-4774 **Fax** (830) 372-0638

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

TANGRAM REHABILITATION NETWORK INC
9901 LINN STATION ROAD
LOUISVILLE KY 40223-3808
PHONE: (512) 396-1200 **FAX:** (512) 396-2024

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/15/2016

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

Facility Information: **Facility ID:** 000905

RESCARE PREMIER TANGRAM BEHAVIORAL PROGRAM SOUTH CAMPUS
201 TANGRAM MESQUITE RD
SEGUIN **TX** 78155
Phone (830) 379-5665 **Fax** (830) 379-5885

TOTAL Lic Capacity: 16 **TITLE 18:** -2 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 18 **TITLE 18/19:** 0

Owner Information

TANGRAM REHABILITATION NETWORK INC
9901 LINN STATION ROAD
LOUISVILLE KY 40223-3808
PHONE: (512) 396-1200 **FAX:** (512) 396-2024

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/15/2017

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

Facility Information: **Facility ID:** 050604

SEGUIN ASSISTED LIVING
226 PRESTON DR
SEGUIN **TX** 78155
Phone (830) 379-8882 **Fax** (830) 379-8998

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

SEGUIN ASSISTED LIVING LLC
226 PRESTON DR
SEGUIN TX 78155
PHONE: (830) 379-8882 **FAX:** (830) 379-8998

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/01/2017

County **HALE** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 000774

SANTA FE PLACE
3404 SW 5TH
PLAINVIEW **TX** 79072

Phone (806) 291-0151 **Fax** (806) 293-1345

TOTAL Lic Capacity: 43 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 43 **TITLE 18/19:** 0

Owner Information

SANTA FE AID OPCO LLC
330 N WABASH ,STE 3700
CHICAGO IL 60611

PHONE: (312) 725-7000 **FAX:** (312) 332-5300

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/11/2017

County **HAMILTON** Reg Svcs: WACO Region 07 - AUSTIN

Facility Information: **Facility ID:** 030210

DOVE HILL CARE CENTER AND VILLAS
1315 E STATE HWY 22
HAMILTON **TX** 76531

Phone (254) 386-3171 **Fax** (254) 386-8261

TOTAL Lic Capacity: 26 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 26 **TITLE 18/19:** 0

Owner Information

HAMILTON HEALTH FACILITIES LP
5420 W PLANO PARKWAY
PLANO TX 75093

PHONE: (972) 931-3800 **FAX:** (972) 931-3801

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/02/2016

County **HAMILTON** Reg Svcs: WACO Region 07 - AUSTIN

Facility Information: **Facility ID:** 000998

HILL COUNTRY ESTATES OF HICO
100 S WALNUT
HICO **TX** 76457

Phone (254) 796-2582 **Fax** (254) 796-2151

TOTAL Lic Capacity: 32 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 32 **TITLE 18/19:** 0

Owner Information

TICKNOR ENTERPRISES HICO ALF LLC
2816 WHISPERWOOD TRAIL
ARLINGTON TX 76016

PHONE: (817) 269-3375 **FAX:** (817) 303-3356

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/01/2016

County **HAMILTON** Reg Svcs: WACO Region 07 - AUSTIN

Facility Information: **Facility ID:** 101705

ROCKING CHAIR RANCH
510 CR 317
JONESBORO **TX** 76538

Phone (254) 463-2258 **Fax** (254) 463-2258

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

SHELIA JOY SCHWALBE
2375 CR 310
JONESBORO TX 76538

PHONE: (254) 463-4022 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/29/2016

County **HARDEMAN** Reg Svcs: WICHITA FALLS GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 000556

WOOD LIVING CENTER OF QUANAH
1001 LOUISE ST
QUANAH **TX** 79252

Phone (940) 663-6396 **Fax** (940) 663-5848

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

WOOD CARE CENTERS INC
3610 BARNETT RD
WICHITA FALLS TX 76310

PHONE: (940) 767-0463 **FAX:** (940) 767-0466

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/02/2016

County **HARDIN** Reg Svcs: BEAUMONT GERIATRIC Region 05 - BEAUMONT

Facility Information: **Facility ID:** 105600

SPANISH TRAIL ASSISTED LIVING OF SILSBEE
775 HWY 96 S
SILSBEE **TX** 77656-5512

Phone (409) 373-6305 **Fax** (409) 373-6334

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

SILSBEE I ENTERPRISES, LLC
1701 RIVER RUN ,STE 304
FORT WORTH TX 76107-6547

PHONE: (817) 348-8841 **FAX:** (817) 348-0466

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/01/2016

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 106295

ADL ASSISTED LIVING INC
3604 AUTUMN LANE
BAYTOWN **TX** 77521
Phone (832) 926-7923 **Fax** (832) 926-7928

TOTAL Lic Capacity: 11 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 11 **TITLE 18/19:** 0

Owner Information

ADL ASSISTED LIVING INC
3604 AUTUMN LANE
BAYTOWN TX 77521
PHONE: **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/01/2017

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000528

SWAN MANOR ALF
2508 WARD RD
BAYTOWN **TX** 77520
Phone (281) 422-9030 **Fax** (281) 420-0780

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

SWAN MGT LLC
2508 WARD RD
BAYTOWN TX 77520
PHONE: (281) 422-9030 **FAX:** (281) 420-0780
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/01/2017

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000828

SWAN MANOR ALF
2508 WARD RD
BAYTOWN **TX** 77520
Phone (281) 422-9030 **Fax** (281) 420-0780

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

SWAN MGT LLC
2508 WARD RD
BAYTOWN TX 77520
PHONE: (281) 422-9030 **FAX:** (281) 420-0780
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/01/2017

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105002

SWAN MANOR ALF
2508 WARD RD
BAYTOWN **TX** 77520
Phone (281) 422-9030 **Fax** (281) 420-0780

TOTAL Lic Capacity: 22 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 22 **TITLE19:** 0
PRIVATE Beds: 22 **TITLE 18/19:** 0

Owner Information

SWAN MGT LLC
2508 WARD RD
BAYTOWN TX 77520
PHONE: (281) 422-9030 **FAX:** (281) 420-0780
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/21/2016

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030041

THE WATERFORD AT BAYTOWN
901 W BAKER RD
BAYTOWN **TX** 77521
Phone (281) 427-4373 **Fax** (281) 420-9465

TOTAL Lic Capacity: 42 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 42 **TITLE19:** 0
PRIVATE Beds: 42 **TITLE 18/19:** 0

Owner Information

CSL BAYTOWN, LLC
14160 DALLAS PKWY ,STE 300
DALLAS TX 75254
PHONE: (972) 770-5600 **FAX:** (972) 770-5666
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/27/2017

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030032

THE WATERFORD AT BAYTOWN
901 W BAKER RD
BAYTOWN **TX** 77521
Phone (281) 427-4373 **Fax** (281) 420-9465

TOTAL Lic Capacity: 95 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 95 **TITLE 18/19:** 0

Owner Information

CSL BAYTOWN, LLC
14160 DALLAS PKWY ,STE 300
DALLAS TX 75254
PHONE: (972) 770-5600 **FAX:** (972) 770-5666
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/27/2017

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030042

COM FOR CARE INC
5217 SPRUCE ST
BELLAIRE **TX** 77401
Phone (713) 661-7510 **Fax** (713) 592-6359

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

COM FOR CARE INC
PO BOX 106
BELLAIRE TX 77402
PHONE: (713) 664-4677 **FAX:** (713) 592-6359
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/22/2017

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 100410

COM FOR CARE INC BELLAIRE II
5215 SPRUCE
BELLAIRE **TX** 77401
Phone (713) 592-6324 **Fax** (713) 592-6359

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

COM FOR CARE INC
PO BOX 106
BELLAIRE TX 77402
PHONE: (713) 664-4677 **FAX:** (713) 592-6359
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/11/2016

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000579

THE GARDENS OF BELLAIRE
4620 BELLAIRE BLVD
BELLAIRE **TX** 77401
Phone (713) 665-3888 **Fax** (713) 666-0888

TOTAL Lic Capacity: 115 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 115 **TITLE 18/19:** 0

Owner Information

SNH SE TENANT TRS INC
TWO NEWTON PLACE ,255 WASHINGTON ST STE 300
NEWTON MA 02458
PHONE: (617) 796-8350 **FAX:** (617) 796-8349
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/01/2016

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 106336

AVANTI SENIOR LIVING AT TOWNE LAKE
17808 LAKECREST VIEW DRIVE
CYPRESS **TX** 77433
Phone (832) 653-4260 **Fax**

TOTAL Lic Capacity: 98 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 40 **TITLE19:** 0
PRIVATE Beds: 98 **TITLE 18/19:** 0

Owner Information

IP AVANTI TOWNE LAKE OPCO, LLC
2219 SAWDUST ROAD ,SUITE 1903
THE WOODLANDS TX 77380
PHONE: (281) 907-9553 **FAX:** (281) 306-2382
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/28/2017

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 106087

CYPRESS ASSISTED LIVING 2
12310 DRAKE PRAIRIE LANE
CYPRESS **TX** 77429
Phone (713) 385-0105 **Fax** (281) 955-2225

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

CYPRESS ASSISTED LIVING LLC
12310 DRAKE PRAIRIE LANE
CYPRESS TX 77429
PHONE: (713) 385-0105 **FAX:** (281) 955-2225
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/16/2017

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 104443

CYPRESS ASSISTED LIVING, LLC
12714 PARK FOREST DRIVE
CYPRESS **TX** 77429
Phone (281) 955-5557 **Fax** (281) 955-2225

TOTAL Lic Capacity: 11 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 11 **TITLE 18/19:** 0

Owner Information

CYPRESS ASSISTED LIVING LLC
12310 DRAKE PRAIRIE LANE
CYPRESS TX 77429
PHONE: (713) 385-0105 **FAX:** (281) 955-2225
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/06/2016

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 106478

HEARTIS CYPRESS
17935 LOONGENBAUGH ROAD
CYPRESS **TX** 77433

Phone (281) 392-2200 **Fax**

TOTAL Lic Capacity: 101 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 40 **TITLE19:** 0
PRIVATE Beds: 101 **TITLE 18/19:** 0

Owner Information

HEARTIS CYPRESS PARTNERS LP
5910 N CENTRAL EXPWY ,STE 200
DALLAS TX 75206

PHONE: (214) 916-5750 **FAX:** (469) 547-5422

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/06/2018

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 050696

PARSONS HOUSE CYPRESS
15055 N ELDRIDGE PKWY
CYPRESS **TX** 77429-3668

Phone (281) 374-8002 **Fax** (281) 374-8004

TOTAL Lic Capacity: 66 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 66 **TITLE 18/19:** 0

Owner Information

PARSONS HOUSE CYPRESS, LLC
15055 N ELDRIDGE PKWY
CYPRESS TX 77429

PHONE: (805) 564-3341 **FAX:** (805) 966-2009

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/20/2017

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030020

PSALM 23 HOMECARE
204 CONFEDERATE WAY
EL LAGO **TX** 77586

Phone (281) 326-9001 **Fax** (281) 326-6001

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

MARGARET MCGRAW
204 CONFEDERATE WAY
EL LAGO TX 77586

PHONE: (281) 326-9001 **FAX:** (281) 326-6001

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/27/2016

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 100789

HOPE VILLAGE HOME #5
15403 HOPE VILLAGE RD
FRIENDSWOOD **TX** 77546

Phone (281) 482-7926 **Fax** (281) 400-2012

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

THE FOUNDATION FOR HOPE VILLAGE
15403 HOPE VILLAGE RD
FRIENDSWOOD TX 77546

PHONE: (281) 482-7926 **FAX:** (281) 400-2012

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/21/2018

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000346

HOPE VILLAGE HOME 2
15403 HOPE VILLAGE RD
FRIENDSWOOD **TX** 77546

Phone (281) 482-7926 **Fax** (281) 400-2012

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

THE FOUNDATION FOR HOPE VILLAGE
15403 HOPE VILLAGE RD
FRIENDSWOOD TX 77546

PHONE: (281) 482-7926 **FAX:** (281) 400-2012

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/21/2017

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000348

HOPE VILLAGE HOME 3
15403 HOPE VILLAGE RD
FRIENDSWOOD **TX** 77546

Phone (281) 482-7926 **Fax** (281) 400-2012

TOTAL Lic Capacity: 15 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 15 **TITLE 18/19:** 0

Owner Information

THE FOUNDATION FOR HOPE VILLAGE
15403 HOPE VILLAGE RD
FRIENDSWOOD TX 77546

PHONE: (281) 482-7926 **FAX:** (281) 400-2012

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/14/2017

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000347

HOPE VILLAGE HOME 4
15403 HOPE VILLAGE RD
FRIENDSWOOD **TX** 77546

Phone (281) 482-7926 **Fax** (281) 400-2012

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

THE FOUNDATION FOR HOPE VILLAGE
15403 HOPE VILLAGE RD
FRIENDSWOOD TX 77546

PHONE: (281) 482-7926 **FAX:** (281) 400-2012

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/14/2018

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 106126

HOME SWEET HOME
12142 7TH STREET BLDG BLDG A
FULSHEAR **TX** 77441

Phone (281) 701-1164 **Fax** (281) 346-1163

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

HOME SWEET HOME RESIDENTIAL CARE FACILITY FOR THE ELDERLY INC
P.O. BOX 983
FULSHEAR TX 77478

PHONE: (281) 704-1164 **FAX:** (281) 346-1163

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/25/2017

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030048

HIGHLAND HOUSE ASSISTED LIVING
710 N MAIN ST
HIGHLANDS **TX** 77562

Phone (281) 843-2326 **Fax** (281) 843-3260

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

JAY & VMK CORP
710 N MAIN ST
HIGHLANDS TX 77562

PHONE: (281) 843-2326 **FAX:** (281) 843-3260

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/02/2017

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 101209

HIGHLAND HOUSE II
710 N MAIN ST
HIGHLANDS **TX** 77562

Phone (281) 843-2326 **Fax** (281) 843-3260

TOTAL Lic Capacity: 15 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 15 **TITLE 18/19:** 0

Owner Information

JAY & VMK CORP
710 N MAIN ST
HIGHLANDS TX 77562

PHONE: (281) 843-2326 **FAX:** (281) 843-3260

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/18/2017

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030403

MOUNTBATTEN HOUSE INC
213 MAPLE ST
HIGHLANDS **TX** 77562

Phone (281) 843-2013 **Fax** (281) 843-2206

TOTAL Lic Capacity: 24 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 24 **TITLE 18/19:** 0

Owner Information

MOUNTBATTEN HOUSE INC
213 MAPLE ST
HIGHLANDS TX 77562

PHONE: (281) 843-2013 **FAX:** (281) 843-2206

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/23/2017

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030247

A AND S PERSONAL CARE HOME
9710 GUEST ST
HOUSTON **TX** 77078

Phone (713) 635-9453 **Fax** (713) 635-1102

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

A & S COMMUNITY DEVELOPMENT CORPORATION
8211 DOCKAL RD
HOUSTON TX 77028

PHONE: (713) 635-4068 **FAX:** (713) 635-1575

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/13/2017

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102381

ADVANCED PERSONAL CARE AT HAMLIN VALLEY
1507 HAMLIN VALLEY
HOUSTON **TX** 77090
Phone (281) 919-1129 **Fax**

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

ADVANCED PERSONAL CARE LLC
6942 FM 1960 E ,#321
HUMBLE TX 77346
PHONE: (832) 368-7165 **FAX:** (888) 238-8366
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/20/2016

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000335

ADVANCED QUALITY ASSISTED LIVING
717 LEHMAN ST
HOUSTON **TX** 77018
Phone (713) 864-0627 **Fax** (713) 697-2447

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

JIMMIE W ELIE
717 LEHMAN ST
HOUSTON TX 77018
PHONE: (713) 864-0627 **FAX:** (713) 697-2447
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/03/2018

County **HARRIS** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 010309

ALL GODS PEOPLE ASSISTED LIVING HOME
3903 DARLINGHURST DR
HOUSTON **TX** 77045
Phone (713) 433-3088 **Fax** (713) 433-3088

TOTAL Lic Capacity: 11 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 11 **TITLE 18/19:** 0

Owner Information

C LOIS BRADLEY
3907 DARLINGHURST DR
HOUSTON TX 77045
PHONE: (713) 433-3088 **FAX:** (713) 433-3088
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/20/2018

County **HARRIS** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103635

ALL GODS PEOPLE ASSISTED LIVING HOME 2
3907 DARLINGHURST DR
HOUSTON **TX** 77045
Phone (713) 433-6700 **Fax** (713) 433-6700

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

C LOIS BRADLEY
3907 DARLINGHURST DR
HOUSTON TX 77045
PHONE: (713) 433-3088 **FAX:** (713) 433-3088
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/07/2018

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 101082

ANGEL OF LOVE ASSISTED LIVING
7638 CABOT
HOUSTON **TX** 77016
Phone (713) 635-3700 **Fax** (832) 644-5398

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

KATHLEEN E MOSBY
PO BOX 62262
HOUSTON TX 77205-2262
PHONE: (713) 259-6470 **FAX:** (281) 781-7011
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/18/2017

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 101871

ANGEL OF LOVE PERSONAL CARE / TAM
7634 CABOT
HOUSTON **TX** 77016
Phone (713) 259-6470 **Fax** (281) 781-7011

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

KATHLEEN E MOSBY
PO BOX 62262
HOUSTON TX 77205-2262
PHONE: (713) 259-6470 **FAX:** (281) 781-7011
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/02/2018

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 100075

ANGEL OF LOVE PERSONAL CARE HOME
6021 BRETSHIRE
HOUSTON **TX** 77016
Phone (713) 631-4409 **Fax** (281) 781-7011

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

KATHLEEN E MOSBY
PO BOX 62262
HOUSTON TX 77205-2262
PHONE: (713) 259-6470 **FAX:** (281) 781-7011
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/06/2018

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105502

ASSISTED LIVING CENTER OF BRAESWOOD,LLC
8119 BRAESWOOD BLVD
HOUSTON **TX** 77071
Phone (713) 776-0800 **Fax** (713) 776-0801

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 9 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

ASSISTED LIVING CENTER OF BRAESWOOD LLC
8119 S BRAESWOOD BLVD
HOUSTON TX 77071
PHONE: (713) 776-0800 **FAX:** (713) 776-0801
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/30/2018

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 050579

ATRIA WESTCHASE
11424 RICHMOND AVE
HOUSTON **TX** 77082
Phone (281) 759-7900 **Fax** (281) 759-5868

TOTAL Lic Capacity: 110 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 21 **TITLE19:** 0
PRIVATE Beds: 110 **TITLE 18/19:** 0

Owner Information

WG WESTCHASE SH, LLC
10350 ORMSBY PARK PLACE ,SUITE 300
LOUISVILLE KY 40223
PHONE: (502) 779-4700 **FAX:** (502) 779-4749
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/12/2017

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102347

AUTUMN GROVE - COPPERFIELD
8524 COPPERBROOK DR
HOUSTON **TX** 77095
Phone (832) 593-0033 **Fax** (832) 593-0035

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

GLEN HOPE HARBOR INC
101 FIREBIRD COVE
LAKEWAY TX 78734
PHONE: (469) 371-0445 **FAX:** (512) 761-3548
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/26/2017

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105048

AUTUMN LEAVES OF CLEAR LAKE
14225 CRESCENT LANDING DR
HOUSTON **TX** 77062
Phone (281) 938-2800 **Fax** (281) 938-2801

TOTAL Lic Capacity: 50 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 50 **TITLE19:** 0
PRIVATE Beds: 50 **TITLE 18/19:** 0

Owner Information

CLEAR LAKE MEMORY CARE LLC
545 E JOHN CARPENTER FRWY ,SUITE 500
IRVING TX 75062
PHONE: (214) 845-4500 **FAX:** (214) 845-4501
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/05/2016

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105214

AUTUMN LEAVES OF CY-FAIR
17801 WEST ROAD
HOUSTON **TX** 77095
Phone (281) 861-2590 **Fax** (281) 861-2591

TOTAL Lic Capacity: 46 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 46 **TITLE19:** 0
PRIVATE Beds: 46 **TITLE 18/19:** 0

Owner Information

CY-FAIR MEMORY CARE LLC
545 E JOHN CARPENTER FRWY ,STE 500
IRVING TX 75062
PHONE: (214) 845-4500 **FAX:** (214) 845-4501
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/16/2016

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105482

AUTUMN LEAVES OF MEMORIAL CITY
1725 ELDRIDGE PARKWAY
HOUSTON **TX** 77077

Phone (214) 845-4500 **Fax** (214) 845-4501

TOTAL Lic Capacity: 50 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 50 **TITLE19:** 0
PRIVATE Beds: 50 **TITLE 18/19:** 0

Owner Information

WEST HOUSTON MEMORY CARE LLC
545 E JOHN CARPENTER FREEWAY ,STE 500
HOUSTON TX 75062

PHONE: (214) 845-4500 **FAX:** (214) 845-4501

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/21/2017

County **HARRIS** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105181

AUTUMN LEAVES OF MEYERLAND
4710 W BELLFORT ST
HOUSTON **TX** 77035

Phone (713) 360-0000 **Fax** (713) 360-0001

TOTAL Lic Capacity: 50 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 50 **TITLE19:** 0
PRIVATE Beds: 50 **TITLE 18/19:** 0

Owner Information

MEYERLAND MEMORY CARE LLC
545 E JOHN CARPENTER FRWY ,STE 500
IRVING TX 75062

PHONE: (214) 845-4500 **FAX:** (214) 845-4501

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/24/2016

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 104984

AUTUMN YEARS II
10818 OVERBROOK LN
HOUSTON **TX** 77042

Phone (713) 789-5704 **Fax** (281) 870-0757

TOTAL Lic Capacity: 11 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 11 **TITLE 18/19:** 0

Owner Information

AUTUMN YEARS LLC
2111 WILLOW LAKE DR
HOUSTON TX 77077

PHONE: (281) 920-3611 **FAX:** (281) 870-0757

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/17/2017

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102384

AUTUMN YEARS LLC
2111 WILLOWLAKE DR
HOUSTON **TX** 77077

Phone (832) 455-4895 **Fax** (281) 870-0757

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

AUTUMN YEARS LLC
2111 WILLOW LAKE DR
HOUSTON TX 77077

PHONE: (281) 920-3611 **FAX:** (281) 870-0757

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/13/2017

County **HARRIS** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000852

AVID CARE COTTAGES
5807 OLD LODGE
HOUSTON **TX** 77066

Phone (281) 866-8185 **Fax** (281) 812-3756

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

Owner Information

ACCESS HARMONY GROUP LLC
3611 GLENPINE DR
HOUSTON TX 77068

PHONE: (281) 692-0093 **FAX:** (281) 812-3756

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/01/2016

County **HARRIS** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030131

AVID CARE COTTAGES
3611 GLENPINE DR.
HOUSTON **TX** 77068

Phone (281) 866-8840 **Fax** (936) 321-7516

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

ACCESS HARMONY GROUP LLC
3611 GLENPINE DR
HOUSTON TX 77068

PHONE: (281) 692-0093 **FAX:** (281) 812-3756

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/01/2016

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105863

AVISTA HOME
11703 ECHO SPRING LANE
HOUSTON **TX** 77065
Phone (281) 653-9694 **Fax** (281) 653-9695

TOTAL Lic Capacity: 11 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 11 **TITLE 18/19:** 0

Owner Information

AVISTA SENIOR CARE, LLC
11703 ECHO SPRING LN
HOUSTON TX 77065
PHONE: (832) 687-2758 **FAX:** (281) 653-9695
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/04/2017

County **HARRIS** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 104762

AVISTA LIVING
9014 S. FERNDALE PLACE DR
HOUSTON **TX** 77064
Phone (281) 653-9001 **Fax** (281) 653-9001

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

AVISTA HEALTH SOLUTIONS, LLC
11039 HERON VILLAGE DR
HOUSTON TX 77064
PHONE: (281) 807-0824 **FAX:** (281) 807-0824
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/31/2017

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105808

BA HOME CARE INC
11802 SHARPVIEW DR
HOUSTON **TX** 77072
Phone (832) 338-5637 **Fax**

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

BA HOME CARE INC
13427 CIRCLE
HOUSTON TX 77083
PHONE: **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/04/2018

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102199

BED OF ROSES ASSISTED LIVING LLC
5121 SHREVEPORT
HOUSTON **TX** 77028
Phone (713) 635-1475 **Fax** (713) 635-5463

TOTAL Lic Capacity: 29 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 29 **TITLE 18/19:** 0

Owner Information

BED OF ROSES ASSISTED LIVING LLC
5121 SHREVEPORT BLVD
HOUSTON TX 77028
PHONE: (713) 635-1475 **FAX:** (713) 635-5463
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/14/2015

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 010301

BEDFORD RESIDENCE ASSISTED LIVING
11718 BEDFORD ST
HOUSTON **TX** 77031
Phone (281) 498-3301 **Fax** (281) 575-7874

TOTAL Lic Capacity: 15 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 15 **TITLE 18/19:** 0

Owner Information

LMP DEVELOPMENT LLC
27510 GUTHRIE RIDGE LN
KATY TX 77494
PHONE: (847) 363-2144 **FAX:** (866) 286-8047
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/10/2018

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105963

BEDFORD RESIDENCE ASSISTED LIVING II
11718 BEDFORD ST A
HOUSTON **TX** 77031-2112
Phone (832) 619-1720 **Fax** (832) 619-1421

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

BRAL II, LLC
11718 A BEDFORD ST
HOUSTON TX 77031-2112
PHONE: (832) 819-1720 **FAX:** (832) 819-1421
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/25/2017

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000494

BELLAIRE LODGE ONE
9015 ROOS
HOUSTON **TX** 77036
Phone (713) 272-7677 **Fax**

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

PERSONAL HEALTH CARE INC
PO BOX 420189
HOUSTON TX 77242
PHONE: (832) 880-4809 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/30/2017

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030197

BELMONT VILLAGE WEST UNIVERSITY TENANT, LLC
2929 W HOLCOMBE BLVD
HOUSTON **TX** 77025
Phone (713) 592-9200 **Fax** (713) 592-0274

TOTAL Lic Capacity: 174 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 43 **TITLE19:** 0
PRIVATE Beds: 174 **TITLE 18/19:** 0

Owner Information

BELMONT VILLAGE WEST UNIVERSITY TENANT, LLC
4500 DORR STREET
TOLEDO OH 43615
PHONE: (419) 247-2800 **FAX:** (419) 247-2826

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/01/2018

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 106016

BELMONT VILLAGE HUNTERS CREEK, LLC
7667 WOODWAY DR
HOUSTON **TX** 77057
Phone (713) 781-1505 **Fax** (713) 781-1510

TOTAL Lic Capacity: 191 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 43 **TITLE19:** 0
PRIVATE Beds: 191 **TITLE 18/19:** 0

Owner Information

BELMONT VILLAGE HUNTERS CREEK, LLC
8554 KATY FRWY ,STE 200
HOUSTON TX 77024
PHONE: (713) 463-1700 **FAX:** (713) 463-9601

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/13/2016

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030371

BEST PERSONAL CARE FACILITY
7741 TANGLEWILDE
HOUSTON **TX** 77036
Phone (713) 774-2080 **Fax** (713) 771-0560

TOTAL Lic Capacity: 48 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 48 **TITLE 18/19:** 0

Owner Information

BEST PERSONAL CARE FACILITY LLC
7741 TANGLEWILDE ST
HOUSTON TX 77036
PHONE: (713) 774-2080 **FAX:** (713) 270-0560

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/24/2018

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103252

BETTER LIFE ASSISTED LIVING
12055 LONGBROOK DR
HOUSTON **TX** 77099
Phone (281) 561-8669 **Fax** (281) 530-3590

TOTAL Lic Capacity: 11 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 11 **TITLE 18/19:** 0

Owner Information

JUSTINA O UZOWULU
11502 HORNBROOK DR
HOUSTON TX 77099
PHONE: (281) 988-8648 **FAX:** (281) 530-3590

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/23/2016

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 101891

BETTER-LIFE ASSISTED LIVING
11502 HORNBROOK DR
HOUSTON **TX** 77099
Phone (281) 988-8648 **Fax** (281) 530-3590

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

JUSTINA O UZOWULU
11502 HORNBROOK DR
HOUSTON TX 77099
PHONE: (281) 988-8648 **FAX:** (281) 530-3590

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/30/2017

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000710

BRAESWOOD PERSONAL CARE HOMES INC
3519 S BRAESWOOD BLVD
HOUSTON **TX** 77025
Phone (713) 666-6545 **Fax** (713) 728-0322

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

BRAESWOOD PERSONAL CARE HOMES INC
3519 SOUTH BRAESWOOD BLVD
HOUSTON TX 77025
PHONE: (713) 240-5454 **FAX:** (346) 444-5678
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/12/2017

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000835

BRIARDALE TREATMENT CENTER
#4 BRIARDALE CT
HOUSTON **TX** 77027
Phone (713) 552-1124 **Fax** (713) 629-7038

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

Owner Information

TERRY SPILLER
8109 STERLINGSHIRE
HOUSTON TX 77078
PHONE: (713) 633-9206 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/01/2014

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 100220

BRIGHT STAR HEALTH NETWORK MANAGEMENT SERVICES INC
6711 WINDING TRACE
HOUSTON **TX** 77086
Phone (281) 445-9153 **Fax** (281) 397-7994

TOTAL Lic Capacity: 15 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 15 **TITLE 18/19:** 0

Owner Information

BRIGHT STAR HEALTH NETWORK MANAGEMENT SERVICES INC
6711 WINDING TRACE
HOUSTON TX 77086
PHONE: (281) 847-4241 **FAX:** (281) 397-7994
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/27/2013

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000824

BRIGHTWAY PERSONAL CARE
6730 WINDING TRACE
HOUSTON **TX** 77086
Phone (281) 405-0117 **Fax** (281) 397-7994

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

JIDECO SERVICES INC
14315 TORREY FOREST DR
HOUSTON TX 77014
PHONE: (281) 216-4073 **FAX:** (281) 397-7994
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/16/2017

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030036

BRIGHTWAY PERSONAL CARE I I
6519 VICKIE SPRINGS LN
HOUSTON **TX** 77086
Phone (281) 260-9053 **Fax** (281) 397-7994

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

JIDECO SERVICES INC
14315 TORREY FOREST DR
HOUSTON TX 77014
PHONE: (281) 216-4073 **FAX:** (281) 397-7994
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/25/2016

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000678

BROOKDALE CHAMPION OAKS
17705 RED OAK DR
HOUSTON **TX** 77090
Phone (281) 440-0966 **Fax** (281) 440-3636

TOTAL Lic Capacity: 90 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 90 **TITLE 18/19:** 0

Owner Information

ESC-NGH, LP
111 WESTWOOD PL ,STE 400
BRENTWOOD TN 37027
PHONE: (206) 298-2909 **FAX:** (206) 301-4500
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/01/2016

County **HARRIS** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 050729

BROOKDALE CHAMPIONS
14050 CUTTEN RD
HOUSTON **TX** 77069

Phone (281) 638-5499 **Fax** (281) 866-9938

TOTAL Lic Capacity: 103 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 33 **TITLE19:** 0
PRIVATE Beds: 103 **TITLE 18/19:** 0

Owner Information

HBP LEASECO LLC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214

PHONE: (414) 918-5000 **FAX:** (414) 918-5054

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/01/2017

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030275

BROOKDALE CY-FAIR
11500 FALLBROOK DR
HOUSTON **TX** 77065

Phone (281) 970-6688 **Fax** (281) 970-6455

TOTAL Lic Capacity: 135 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 60 **TITLE19:** 0
PRIVATE Beds: 135 **TITLE 18/19:** 0

Owner Information

SUMMERVILLE AT CY-FAIR ASSOCIATES, LP
3131 ELLIOTT AVE ,STE 500
SEATTLE WA 98121

PHONE: (206) 298-2909 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/14/2016

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030280

BROOKDALE CYPRESS STATION
303 LANTERN BEND DR
HOUSTON **TX** 77090

Phone (281) 880-7702 **Fax** (281) 880-7699

TOTAL Lic Capacity: 109 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 19 **TITLE19:** 0
PRIVATE Beds: 109 **TITLE 18/19:** 0

Owner Information

BROOKDALE CYPRESS STATION LLC
6737 W WASHINGTON ST ,STE 3200
MILWAUKEE WI 53214

PHONE: (414) 918-5000 **FAX:** (414) 918-5054

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/29/2017

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030147

BROOKDALE ELLINGTON FIELD
14101 BAY POINTE CT
HOUSTON **TX** 77062

Phone (281) 461-7600 **Fax** (281) 461-7700

TOTAL Lic Capacity: 120 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 120 **TITLE 18/19:** 0

Owner Information

EMERITUS CORPORATION
6737 W. WASHINGTON STREET ,SUITE 2300
MILWAUKEE WI 53214

PHONE: (414) 918-5000 **FAX:** (414) 918-5054

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/31/2016

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000797

BROOKDALE GALLERIA
2929 POST OAK BLVD
HOUSTON **TX** 77056

Phone (713) 993-9999 **Fax** (713) 993-0169

TOTAL Lic Capacity: 46 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 46 **TITLE 18/19:** 0

Owner Information

ARC POST OAK LP
111 WESTWOOD PL ,STE 400
BRENTWOOD TN 37027

PHONE: (414) 918-5441 **FAX:** (414) 918-6076

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/25/2016

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000794

BROOKDALE MEMORIAL OAKS
1414 SANDY SPRINGS RD
HOUSTON **TX** 77042

Phone (713) 782-3355 **Fax** (713) 782-3398

TOTAL Lic Capacity: 120 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 21 **TITLE19:** 0
PRIVATE Beds: 120 **TITLE 18/19:** 0

Owner Information

ESC-NGH, LP
111 WESTWOOD PL ,STE 400
BRENTWOOD TN 37027

PHONE: (206) 298-2909 **FAX:** (206) 301-4500

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/01/2016

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 010267

BROOKDALE SHADOWLAKE
2835 SHADOWBRIAR
HOUSTON **TX** 77077

Phone (281) 759-6700 **Fax** (281) 759-6999

TOTAL Lic Capacity: 195 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 195 **TITLE 18/19:** 0

Owner Information

ARC SHADOWLAKE LP
6737 W WASHINGTON ,STE 2300
MILWAUKEE WI 53214

PHONE: (414) 918-5000 **FAX:** (414) 918-5054

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/25/2016

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030372

BROOKDALE SHADOWLAKE
2835 SHADOWBRIAR
HOUSTON **TX** 77077

Phone (281) 759-6700 **Fax** (281) 759-6999

TOTAL Lic Capacity: 20 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 20 **TITLE19:** 0
PRIVATE Beds: 20 **TITLE 18/19:** 0

Owner Information

ARC SHADOWLAKE LP
6737 W WASHINGTON ,STE 2300
MILWAUKEE WI 53214

PHONE: (414) 918-5000 **FAX:** (414) 918-5054

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/25/2017

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030388

BROOKDALE SPRING SHADOWS
9889 KEMPWOOD DR
HOUSTON **TX** 77080

Phone (713) 934-8844 **Fax** (713) 934-7444

TOTAL Lic Capacity: 104 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 104 **TITLE 18/19:** 0

Owner Information

ARC SPRING SHADOW LP
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214

PHONE: (414) 918-5000 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/25/2017

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030389

BROOKDALE SPRING SHADOWS
9889 KEMPWOOD DR
HOUSTON **TX** 77080

Phone (713) 934-8844 **Fax** (713) 934-7444

TOTAL Lic Capacity: 25 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 25 **TITLE19:** 0
PRIVATE Beds: 25 **TITLE 18/19:** 0

Owner Information

ARC SPRING SHADOW LP
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214

PHONE: (414) 918-5000 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/25/2018

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030396

BROOKDALE TANGLEWOOD
505 BERING DR
HOUSTON **TX** 77057

Phone (713) 532-1718 **Fax** (713) 532-6118

TOTAL Lic Capacity: 140 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 44 **TITLE19:** 0
PRIVATE Beds: 140 **TITLE 18/19:** 0

Owner Information

TANGLEWOOD TENANT LLC
4500 DORR ST
TOLEDO OH 43615

PHONE: (419) 247-2800 **FAX:** (419) 247-2826

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/30/2016

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030169

BROOKDALE THE HEIGHTS
2121 PINEGATE DR
HOUSTON **TX** 77008

Phone (713) 861-9952 **Fax** (713) 861-9963

TOTAL Lic Capacity: 20 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 20 **TITLE19:** 0
PRIVATE Beds: 20 **TITLE 18/19:** 0

Owner Information

A R C PINEGATE L P
6737 W WASHINGTON STREET ,STE 2300
MILWAUKEE WI 53214

PHONE: (414) 918-5000 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/25/2018

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030162

BROOKDALE THE HEIGHTS
2121 PINEGATE DR
HOUSTON **TX** 77008
Phone (713) 861-9952 **Fax** (713) 861-9963

TOTAL Lic Capacity: 188 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 188 **TITLE 18/19:** 0

Owner Information

A R C PINEGATE L P
6737 W WASHINGTON STREET ,STE 2300
MILWAUKEE WI 53214
PHONE: (414) 918-5000 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/25/2017

County **HARRIS** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030376

BROOKDALE WILLOWBROOK PLACE
7450 WILLOWCHASE BLVD
HOUSTON **TX** 77070
Phone (281) 807-4744 **Fax** (281) 807-6626

TOTAL Lic Capacity: 104 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 104 **TITLE 18/19:** 0

Owner Information

ARC WILLOWBROOK LLC
111 WESTWOOD PLACE ,STE 400
BRENTWOOD TN 37027
PHONE: (414) 918-5000 **FAX:** (414) 918-5054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 06/11/2017

County **HARRIS** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 100460

BROOKDALE WILLOWBROOK PLACE
7450 WILLOWCHASE BLVD
HOUSTON **TX** 77070
Phone (281) 807-4744 **Fax** (281) 807-6626

TOTAL Lic Capacity: 40 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 40 **TITLE19:** 0
PRIVATE Beds: 40 **TITLE 18/19:** 0

Owner Information

ARC WILLOWBROOK LLC
111 WESTWOOD PLACE ,STE 400
BRENTWOOD TN 37027
PHONE: (414) 918-5000 **FAX:** (414) 918-5054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/11/2017

County **HARRIS** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000613

BROWNING ONE PERSONAL CARE FACILITY INC
13438 TOWNWOOD DR
HOUSTON **TX** 77045
Phone (713) 433-9800 **Fax** (979) 387-3164

TOTAL Lic Capacity: 15 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 15 **TITLE 18/19:** 0

Owner Information

BROWNING ONE PERSONAL CARE FACILITY INC
13438 TOWNWOOD DR
HOUSTON TX 77045
PHONE: (832) 794-0495 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/10/2017

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 106103

CANYON RIDGE PERSONAL CARE HOME LLC
6603 CANYON WAY DR.
HOUSTON **TX** 77068
Phone (281) 448-8993 **Fax** (281) 661-8186

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

CANYON RIDGE PERSONAL CARE HOME LLC
6603 CANYON WAY DR
HOUSTON TX 77086
PHONE: (281) 448-8893 **FAX:** (281) 661-8186
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/18/2018

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 050016

CARE MATTERS INC
4702 HIRSCH RD
HOUSTON **TX** 77026
Phone (713) 673-7318 **Fax** (713) 673-1524

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

CARE MATTERS INC
4702 HIRSCH RD
HOUSTON TX 77026
PHONE: (713) 673-7318 **FAX:** (713) 673-1524
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/17/2017

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000761

CARING ANGELS ASSISTED LIVING FACILITY
8627 VALLEY WEST CT
HOUSTON **TX** 77078
Phone (281) 536-1274 **Fax** (281) 459-1274

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

EVANGELA WILLIAMS
8627 VALLEY WEST CT
HOUSTON TX 77078
PHONE: (281) 536-1274 **FAX:** (832) 484-1738
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/20/2016

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 001051

CHAVEZ HOME
5208 BOICEWOOD
HOUSTON **TX** 77016
Phone (713) 631-9519 **Fax** (713) 633-5181

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

MARTHA CHAVEZ
5208 BOICEWOOD
HOUSTON TX 77016
PHONE: (713) 631-9519 **FAX:** (713) 633-5181
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE C
License Exp Dt: 07/10/2016

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000773

CLAREWOOD HOUSE INC
7400 CLAREWOOD DR
HOUSTON **TX** 77036
Phone (713) 774-5821 **Fax** (713) 778-8503

TOTAL Lic Capacity: 90 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 90 **TITLE 18/19:** 0

Owner Information

CLAREWOOD HOUSE INC
7400 CLAREWOOD DR
HOUSTON TX 77036
PHONE: (713) 774-5821 **FAX:** (713) 778-8503
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/20/2018

County **HARRIS** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030311

COLONIAL OAKS AT BRAESWOOD
7800 N STADIUM DR
HOUSTON **TX** 77030
Phone (713) 799-8200 **Fax** (713) 799-2343

TOTAL Lic Capacity: 64 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 64 **TITLE19:** 0
PRIVATE Beds: 64 **TITLE 18/19:** 0

Owner Information

BRAESWOOD AZ, LTD
510 BERING DR ,STE 210
HOUSTON TX 77057
PHONE: (713) 780-8100 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/27/2017

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 010308

COLONIAL OAKS AT WESTCHASE
11395 RICHMOND AVE
HOUSTON **TX** 77082
Phone (281) 759-2900 **Fax** (281) 759-2999

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 60 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

WESTCHASE AZ LTD
510 BERING DR ,STE 210
HOUSTON TX 77057
PHONE: (713) 780-8100 **FAX:** (713) 974-9341
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/27/2017

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030091

COM FOR CARE INC
7931 MARY BATES
HOUSTON **TX** 77036
Phone (713) 778-1839 **Fax** (713) 592-6359

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

COM FOR CARE INC
PO BOX 106
BELLAIRE TX 77402
PHONE: (713) 664-4677 **FAX:** (713) 592-6359
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/21/2016

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000940

COM FOR CARE INC
7106 LEADER
HOUSTON **TX** 77074

Phone (713) 271-4349 **Fax** (713) 592-6359

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

COM FOR CARE INC
PO BOX 106
BELLAIRE TX 77402

PHONE: (713) 664-4677 **FAX:** (713) 592-6359

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/16/2017

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105438

COMFORT CARE ASSISTED LIVING LLC
13106 BEXHILL DRIVE
HOUSTON **TX** 77065

Phone (281) 732-6625 **Fax** (281) 955-7404

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

COMFORT CARE ASSISTED LIVING LLC
13106 BEXHILL DRIVE
HOUSTON TX 77065

PHONE: (281) 732-6625 **FAX:** (281) 995-7404

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/27/2017

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105451

CONTINUING CARE AT EAGLE'S TRACE
14703 EAGLE VISTA DR BLDG 601
HOUSTON **TX** 77077

Phone (281) 249-7099 **Fax** (281) 249-7358

TOTAL Lic Capacity: 88 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 36 **TITLE19:** 0
PRIVATE Beds: 88 **TITLE 18/19:** 0

Owner Information

EAGLES TRACE INC
14703 EAGLE VISTA DRIVE
HOUSTON TX 77077

PHONE: (281) 249-7099 **FAX:** (281) 249-7358

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/04/2017

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103394

CULLEN RESIDENCE HALL
810 MARSTON DR
HOUSTON **TX** 77019

Phone (713) 525-8400 **Fax** (713) 525-8334

TOTAL Lic Capacity: 34 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 34 **TITLE 18/19:** 0

Owner Information

THE CENTER SERVING PERSONS WITH MENTAL RETARDATION
3550 WEST DALLAS
HOUSTON TX 77019

PHONE: (713) 525-8400 **FAX:** (713) 525-8334

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/04/2017

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103801

D DES IDEAL HOME CARE SERVICES
6703 ESCONDIDO DR
HOUSTON **TX** 77083

Phone (281) 568-5275 **Fax**

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

Owner Information

DAPHNE B LOCKE
6703 ESCONDIDO DR
HOUSTON TX 77083

PHONE: (281) 568-5275 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/08/2017

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102489

DIVINE LIVING CENTER LLC
12802 NEWBROOK DR
HOUSTON **TX** 77072

Phone (281) 933-3628 **Fax** (281) 495-5235

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

DIVINE LIVING CENTER LLC
12802 NEWBROOK DR
HOUSTON TX 77072

PHONE: (281) 799-5955 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/23/2016

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105985

DIVINE PURPOSE CARE HOME, LLC
5742 SCHEVERS
HOUSTON **TX** 77033
Phone (713) 505-1627 **Fax**

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

DIVINE PURPOSE CARE HOME LLC
5742 SCHEVERS
HOUSTON TX 77033
PHONE: (713) 505-1627 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/05/2017

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000912

DOCKAL ROAD PERSONAL CARE HOME
8211 DOCKAL RD
HOUSTON **TX** 77028
Phone (713) 635-4068 **Fax** (713) 635-1575

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

A & S COMMUNITY DEVELOPMENT CORPORATION
8211 DOCKAL RD
HOUSTON TX 77028
PHONE: (713) 635-4068 **FAX:** (713) 635-1575
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/01/2017

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105038

DOVE COMMUNITY
10640 OAK BROOK DR
HOUSTON **TX** 77013
Phone (281) 974-2181 **Fax** (281) 888-3388

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

ENER ARBED INC
11343 DOVEDALE
HOUSTON TX 77067
PHONE: (281) 914-3040 **FAX:** (281) 836-5999
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/19/2017

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102622

EFE ASSISTED LIVING CENTER INC
5922 KENILWOOD DR
HOUSTON **TX** 77033
Phone (832) 202-4100 **Fax** (281) 993-8183

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

EFE ASSISTED LIVING CENTER INC
10411 SAGEWICK DRIVE
HOUSTON TX 77089
PHONE: (281) 922-1690 **FAX:** (281) 993-8183
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/08/2017

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103862

EFE ASSISTED LIVING CENTER INC
10411 SAGEWICK DR
HOUSTON **TX** 77089
Phone (281) 922-1690 **Fax** (281) 993-8183

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

EFE ASSISTED LIVING CENTER INC
10411 SAGEWICK DRIVE
HOUSTON TX 77089
PHONE: (281) 922-1690 **FAX:** (281) 993-8183
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/06/2018

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030414

ELMCROFT OF BRAESWOOD
2555 S BRAESWOOD
HOUSTON **TX** 77025-2805
Phone (713) 839-8265 **Fax** (713) 664-9495

TOTAL Lic Capacity: 120 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 120 **TITLE 18/19:** 0

Owner Information

ESL BRAESWOOD OPERATIONS LLC
700 N HURSTBOURNE PKWY ,STE 200
LOUISVILLE KY 40222
PHONE: (502) 753-6004 **FAX:** (502) 753-6104
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/01/2017

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030099

ELMCROFT OF CY-FAIR
11246 FALLBROOK
HOUSTON **TX** 77065-4229
Phone (281) 890-3174 **Fax** (281) 890-8973

TOTAL Lic Capacity: 120 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 120 **TITLE 18/19:** 0

Owner Information

CY-FAIR OPERATIONS, LLC
700 N HURSTBOURNE PKWY ,STE 200
LOUISVILLE KY 40223
PHONE: (502) 753-6004 **FAX:** (502) 753-6104
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/10/2017

County **HARRIS** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 106525

FAIRBANKS COURT ASSISTED LIVING
7810 TRENTWAY STREET
HOUSTON **TX** 77040
Phone (713) 690-1344 **Fax**

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

FAIRBANKS COURT, LLC
7810 TRENTWAY STREET
HOUSTON TX 77040
PHONE: (713) 690-1344 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/04/2018

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105155

FAITH PERSONAL HOME CARE, LLC
6302 VISTA CAMINO DR
HOUSTON **TX** 77083
Phone (281) 762-3381 **Fax** (281) 750-0901

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

FAITH PERSONAL HOME CARE, LLC
6302 VISTA CAMINO DR
HOUSTON TX 77083
PHONE: (281) 762-3381 **FAX:** (281) 750-0901
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/04/2017

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105900

FIRST CLASS HOME SERVICES, INC.
10810 BRAES FOREST DR
HOUSTON **TX** 77071
Phone (713) 432-1877 **Fax** (713) 432-1877

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

FIRST CLASS HOME CARE SERVICES INC
10810 BRAES FOREST DR
HOUSTON TX 77071
PHONE: (713) 432-1877 **FAX:** (713) 432-1877
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/26/2018

County **HARRIS** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102554

FISHER HAVEN ASSISTED LIVING CENTER
5126 ENYART STREET
HOUSTON **TX** 77021
Phone (713) 742-4007 **Fax** (713) 741-4007

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

FISHER HAVEN, LLC
2440 TEXAS PARKWAY ,STE 140
MISSOURI CITY TX 77489
PHONE: (832) 668-0860 **FAX:** (281) 696-7587
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/18/2017

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105094

FOUNTAIN OF LIFE HOUSING
2319 PANNELL STREET
HOUSTON **TX** 77026
Phone (713) 320-2772 **Fax**

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

CARL D BROWN
2319 PANNELL STREET
HOUTON TX 77026
PHONE: (713) 320-2772 **FAX:** (713) 672-8454
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/14/2017

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105450

FREEMANS ASSISTED LIVING
2711 MCDANIEL
HOUSTON **TX** 77093
Phone (972) 310-8741 **Fax** (888) 817-8064

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

NOLAN FREEMAN
2711 MC DANIEL ST.
HOUSTON TX 77093
PHONE: (972) 310-8741 **FAX:** (888) 817-8064

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/13/2015

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030218

G WILLS ROOMING FACILITY
8113 WAY ST
HOUSTON **TX** 77028
Phone (713) 635-8881 **Fax** (713) 635-8881

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

Owner Information

GENE I WILLIAMS
8423 BIGWOOD
HOUSTON TX 77078
PHONE: (713) 631-1142 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/04/2016

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 104488

GALWAY MEADOWS CARE HOME
3607 GALWAY LANE
HOUSTON **TX** 77080
Phone (707) 703-9746 **Fax**

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

NERAK HOMES, LLC
3607 GALWAY LANE
HOUSTON TX 77080
PHONE: (707) 703-9746 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/25/2016

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030293

GLORIOUS DAYS PERSONAL CARE HOME
1706 GELLHORN
HOUSTON **TX** 77029
Phone (713) 674-1168 **Fax** (866) 527-5340

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

GLORIOUS DAYS PERSONAL CARE HOME INC
1706 GELLHORN
HOUSTON TX 77029
PHONE: (713) 674-1168 **FAX:** (713) 674-1168

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/16/2016

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 100115

GOOD LIVING COMMUNITY CARE INC #4
5719 DOLORES ST
HOUSTON **TX** 77057
Phone (713) 953-0848 **Fax** (713) 953-0652

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

GOOD LIVING COMMUNITY CARE INC
5719 DOLORES ST
HOUSTON TX 77057
PHONE: (713) 953-0848 **FAX:** (713) 953-0652

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/03/2017

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000983

GOOD LIVING COMMUNITY CARE INC III
5715 DOLORES ST
HOUSTON **TX** 77057-5711
Phone (713) 953-0848 **Fax** (713) 953-0652

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

GOOD LIVING COMMUNITY CARE INC
5719 DOLORES ST
HOUSTON TX 77057
PHONE: (713) 953-0848 **FAX:** (713) 953-0652

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/01/2018

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030093

GOODNESS AND MERCY HEALTH CARE
8502 WHITECASTLE LN
HOUSTON **TX** 77088
Phone (281) 820-3682 **Fax** (713) 691-5131

TOTAL Lic Capacity: 11 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 11 **TITLE 18/19:** 0

Owner Information

ANNE R SAWYER
639 FEAMSTER DR
HOUSTON TX 77022
PHONE: (713) 670-7346 **FAX:** (713) 691-5131
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/17/2015

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 106303

GRAYSTONE LIFE CARE LLC
1310 RIVERVIEW CIRCLE
HOUSTON **TX** 77077
Phone (281) 556-5993 **Fax** (281) 556-6440

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

GRAYSTONE LIFE CARE LLC
502 AUGUSTA ,STE 300
HOUSTON TX 77057
PHONE: (713) 973-8811 **FAX:** (713) 586-7110
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/05/2017

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000746

GREATER MORNING STAR PERSONAL CARE
8430 1/2 TIDWELL RD
HOUSTON **TX** 77028
Phone (713) 633-1803 **Fax** (713) 633-1803

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

GREATER MORNING STAR BAPTIST CHURCH
8430 1/2 TIDWELL RD
HOUSTON TX 77028
PHONE: (713) 633-1803 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/12/2017

County **HARRIS** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 010305

HALLS PERSONAL CARE
12402 RENWICK
HOUSTON **TX** 77035
Phone (713) 283-8799 **Fax** (713) 726-8901

TOTAL Lic Capacity: 11 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 11 **TITLE 18/19:** 0

Owner Information

BARBARA HALL
12402 RENWICK
HOUSTON TX 77035
PHONE: (713) 283-8799 **FAX:** (713) 726-8901
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/25/2018

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105536

HANDS TO LEND ASSISTED LIVING LLC
17346 CHESTNUT BLUFF DR
HOUSTON **TX** 77095
Phone (281) 855-0558 **Fax** (281) 345-8127

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

Owner Information

HANDS TO LEND ASSISTED LIVING LLC
17346 CHESTNUT BLUFF DR
HOUSTON TX 77095
PHONE: (281) 855-0558 **FAX:** (281) 345-8127
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/29/2017

County **HARRIS** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030124

HOLLY HALL
2000 HOLLY HALL ST
HOUSTON **TX** 77054-3096
Phone (713) 799-9031 **Fax** (713) 799-2702

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

HOLLY HALL
2000 HOLLY HALL ST
HOUSTON TX 77054-3906
PHONE: (713) 799-9031 **FAX:** (713) 799-2702
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/17/2017

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000741

HOME SWEET HOME R C F E
12142 7TH ST BLDG. #A
HOUSTON **TX** 77072
Phone (281) 704-1164 **Fax** (281) 531-0571

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 12 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

HOME SWEET HOME RESIDENTIAL CARE FACILITY FOR THE ELDERLY INC
P.O. BOX 983
FULSHEAR TX 77478
PHONE: (281) 704-1164 **FAX:** (281) 346-1163
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/01/2017

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 100848

HOME SWEET HOME RESIDENTIAL CARE FACILITY FOR THE ELDERLY #2
2814 STONEWAY DR
HOUSTON **TX** 77082
Phone (281) 704-1164 **Fax** (281) 531-0571

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

HOME SWEET HOME RESIDENTIAL CARE FACILITY FOR THE ELDERLY INC
P.O. BOX 983
FULSHEAR TX 77478
PHONE: (281) 704-1164 **FAX:** (281) 346-1163
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/21/2017

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102695

HOUSTON EXTRAORDINARY HOME CARE II INC
9616 BECKLEY ST
HOUSTON **TX** 77088
Phone (281) 405-9764 **Fax**

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

HOUSTON EXTRAORDINARY HOME CARE II INC
9616 BECKLEY ST
HOUSTON TX 77088
PHONE: (281) 405-9764 **FAX:** (281) 405-9764
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/09/2016

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030107

HUDSON HOUSE ASSISTED LIVING
914 DELLBROOK DR
HOUSTON **TX** 77038
Phone (281) 847-4569 **Fax**

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

KENDRA HUDSON
2020 BUSINESS CENTER DR.
PEARLAND TX 77584
PHONE: (713) 582-6030 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/22/2016

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030014

HUMAN SERVICES CENTER
8114 FURLONG LN
HOUSTON **TX** 77071
Phone (713) 778-1616 **Fax** (713) 778-1726

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

PAULINE I. IGWE
10101 FONDREN RD ,STE 532
HOUSTON TX 77096
PHONE: (713) 778-1616 **FAX:** (713) 778-1726
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/12/2016

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030184

ISLA CARROLL TURNER HEALTH CARE P C U
4141 S BRAESWOOD BLVD
HOUSTON **TX** 77025
Phone (713) 666-2651 **Fax** (713) 660-5048

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

BRAZOS PRESBYTERIAN HOMES INC
4141 S BRAESWOOD BLVD
HOUSTON TX 77025
PHONE: (713) 666-2651 **FAX:** (713) 660-5048
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/04/2016

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 101772

J & P HOME CARE ASSISTED LIVING
6431 GAMMAGE
HOUSTON **TX** 77087
Phone (713) 644-7391 **Fax** (713) 649-1325

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

RAYMOND LEWIS
6431 GAMMAGE
HOUSTON TX 77087
PHONE: (713) 644-7391 **FAX:** (713) 644-7391
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/29/2016

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102852

J H ADULT ASSISTED LIVING SERVICES LLC
10222 ALLWOOD ST
HOUSTON **TX** 77016
Phone (713) 491-8589 **Fax** (713) 631-5483

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

J H ADULT ASSISTED LIVING SERVICES LLC
10222 ALLWOOD ST
HOUSTON TX 77016
PHONE: (713) 491-8589 **FAX:** (713) 631-5483
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/12/2016

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 050698

J M J PERSONAL CARE
11435 BLACKHAWK
HOUSTON **TX** 77089
Phone (281) 481-1710 **Fax** (281) 922-1112

TOTAL Lic Capacity: 15 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 15 **TITLE 18/19:** 0

Owner Information

AUDREY M GRADNEY
11435 BLACKHAWK
HOUSTON TX 77089-6068
PHONE: (281) 481-1710 **FAX:** (281) 922-1112
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/17/2017

County **HARRIS** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 100290

JOLIVETTES CARE CENTER
6627 CALHOUN
HOUSTON **TX** 77021
Phone (713) 842-2899 **Fax** (713) 842-2896

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

MATILDA S JOLIVETTE
6743 PARIS
HOUSTON TX 77021
PHONE: (713) 748-5800 **FAX:** (713) 842-2896
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/05/2016

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103844

JONES HOUSE OF PEACE
6639 CRESTMONT ST
HOUSTON **TX** 77033
Phone (713) 649-3007 **Fax** (713) 649-3007

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

GERALDINE JONES
10926 SAGEYORK DR
HOUSTON TX 77089
PHONE: (713) 649-3007 **FAX:** (713) 649-3007
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/22/2017

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103025

JOYFUL HOMES IV
9239 MCAFEE DR
HOUSTON **TX** 77031
Phone (832) 582-7800 **Fax** (713) 771-1095

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

Owner Information

EDITH N UGWU
9427 VICKIJOHN DR
HOUSTON TX 77031
PHONE: (832) 368-7194 **FAX:** (713) 771-1095
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/19/2017

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102048

JOYFUL HOMES III
9427 VICKIJOHN DR
HOUSTON **TX** 77031
Phone (713) 776-1137 **Fax** (713) 771-1095

TOTAL Lic Capacity: 15 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 15 **TITLE 18/19:** 0

Owner Information

EDITH N UGWU
9427 VICKIJOHN DR
HOUSTON TX 77031
PHONE: (832) 368-7194 **FAX:** (713) 771-1095
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 06/15/2017

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102328

JUMER HOUSE
11431 SANDSTONE
HOUSTON **TX** 77072
Phone (281) 568-5091 **Fax** (281) 568-7123

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

Owner Information

JESSIE M OKON-EMECHETA
11431 SANDSTONE ST
HOUSTON TX 77072
PHONE: (713) 550-4718 **FAX:** (281) 568-7123
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/26/2015

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 050507

LAKEWOOD 24 HOUR P C 2
8833 OAK KNOLL LN
HOUSTON **TX** 77078
Phone (713) 633-3609 **Fax** (713) 631-8476

TOTAL Lic Capacity: 11 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 11 **TITLE 18/19:** 0

Owner Information

CHERYL WALLER
8416 MESA DR
HOUSTON TX 77028
PHONE: (713) 633-3609 **FAX:** (713) 631-8476
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/27/2017

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000884

LAKEWOOD 24 HR PERSONAL CARE
8416 MESA DR
HOUSTON **TX** 77028
Phone (713) 633-3609 **Fax** (713) 631-8476

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

CHERYL WALLER
8416 MESA DR
HOUSTON TX 77028
PHONE: (713) 633-3609 **FAX:** (713) 631-8476
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/30/2017

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030134

LEADER HOUSE
7103 LEADER
HOUSTON **TX** 77074
Phone (713) 774-7930 **Fax** (713) 592-6359

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

COM FOR CARE INC
PO BOX 106
BELLAIRE TX 77402
PHONE: (713) 664-4677 **FAX:** (713) 592-6359
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/13/2017

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000809

LIBERTY ISLAND PERSONAL CARE HOMES INC
9009 BOONE RD
HOUSTON **TX** 77099
Phone (281) 530-0000 **Fax** (281) 530-3735

TOTAL Lic Capacity: 74 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 74 **TITLE 18/19:** 0

Owner Information

LIBERTY ISLAND PERSONAL CARE HOMES INC
9009 BOONE RD
HOUSTON TX 77099
PHONE: (281) 530-0000 **FAX:** (281) 530-3735
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/20/2016

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000987

LIBERTY ISLAND PERSONAL CARE HOMES INC
9009 BOONE RD
HOUSTON **TX** 77099
Phone (281) 530-0000 **Fax** (281) 530-3735

TOTAL Lic Capacity: 135 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 135 **TITLE 18/19:** 0

Owner Information

LIBERTY ISLAND PERSONAL CARE HOMES INC
9009 BOONE RD
HOUSTON TX 77099
PHONE: (281) 530-0000 **FAX:** (281) 530-3735
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/29/2016

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 101164

LIGHT HEART MEMORY CARE
910 KINGSGATE LN
HOUSTON **TX** 77058-3236
Phone (281) 282-0770 **Fax** (281) 280-8048

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 8 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

PAT L MACK
910 KINGSGATE LN
HOUSTON TX 77058
PHONE: (281) 282-0770 **FAX:** (281) 280-8048
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/07/2017

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103340

LIGHT HEART MEMORY CARE - HOLLYDALE
15015 HOLLY DALE
HOUSTON **TX** 77062
Phone (281) 282-9599 **Fax** (281) 280-8048

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 8 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

PAT L MACK
910 KINGSGATE LN
HOUSTON TX 77058
PHONE: (281) 282-0770 **FAX:** (281) 280-8048
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/08/2017

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000332

LIMBE HOUSE
12115 CORONA LN
HOUSTON **TX** 77072
Phone (281) 983-0045 **Fax** (832) 617-7991

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

LIMBE HOUSE INC
PO BOX 773033
HOUSTON TX 77215
PHONE: (281) 983-0045 **FAX:** (832) 617-7991
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/01/2017

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103369

LOVE AND PEACE
7416 CURRY RD
HOUSTON **TX** 77093
Phone (713) 694-4800 **Fax**

TOTAL Lic Capacity: 3 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 3 **TITLE 18/19:** 0

Owner Information

TANNER PERRY INC
7416 CURRY RD
HOUSTON TX 77093
PHONE: (713) 842-4236 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/25/2018

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030046

LOVETT PLACE
808 LOVETT BLVD
HOUSTON **TX** 77006
Phone (713) 526-2233 **Fax** (713) 942-7831

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

TOTAL HEALTH SERVICES LIMITED LIABILITY COMPANY
PO BOX 66153
HOUSTON TX 77266
PHONE: (713) 526-2233 **FAX:** (713) 942-7831
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/09/2017

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102737

LOVING CARE ASSISTED LIVING HOME
8209 N. MAIN
HOUSTON **TX** 77022
Phone (713) 692-1414 **Fax**

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

JOHNNETTA NICHOLS
8209 N MAIN
HOUSTON TX 77022
PHONE: (713) 692-1414 **FAX:** (281) 409-4862
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/26/2017

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 104781

LOVING CARE COTTAGES INCORPORATED
17914 ROLLING CREEK
HOUSTON **TX** 77090
Phone (281) 537-7636 **Fax**

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

LOVING CARE COTTAGES INCORPORATED
17914 ROLLING CREEK
HOUSTON TX 77090
PHONE: (281) 910-4497 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/08/2016

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030080

LOVING CARE PERSONAL CARE HOME
2119 ISABELLA
HOUSTON **TX** 77004
Phone (713) 521-1082 **Fax** (713) 699-1572

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

LOVING CARE PERSONAL CARE HOME
3910 N FWY ,STE L
HOUSTON TX 77022
PHONE: (713) 691-7437 **FAX:** (713) 699-1572
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/28/2017

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030029

LOVING IN CARING ARMS
4542 HOLLYBROOK LN
HOUSTON **TX** 77039
Phone (281) 449-1353 **Fax** (281) 442-0123

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

ELERIA M BARBER
4542 HOLLYBROOK LN
HOUSTON TX 77039
PHONE: (281) 449-1353 **FAX:** (281) 442-0123
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/10/2017

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 100066

MALLOW PLACE
4305 MALLOW
HOUSTON **TX** 77033
Phone (713) 733-6900 **Fax** (713) 733-3695

TOTAL Lic Capacity: 26 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 26 **TITLE 18/19:** 0

Owner Information

LOVE & JOY PERSONAL CARE HOME
4305 MALLOW
HOUSTON TX 77051
PHONE: (713) 733-6900 **FAX:** (713) 733-3695
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 06/25/2017

County **HARRIS** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000725

MANORCARE HEALTH SERVICES - WILLOWBROOK
13631 ARDFIELD DR
HOUSTON **TX** 77070
Phone (281) 955-9572 **Fax** (281) 955-1597

TOTAL Lic Capacity: 66 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 66 **TITLE 18/19:** 0

Owner Information

HEARTLAND-WILLOWBROOK OF HOUSTON TX LLC
333 N SUMMIT ST
TOLEDO OH 43604
PHONE: (419) 252-5500 **FAX:** (877) 385-9446
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/18/2017

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030185

MARIGOLD COTTAGE PCH@ WALLER LLC
1802 MALLARD
HOUSTON **TX** 77043

Phone (713) 721-0226 **Fax** (713) 721-0226

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

MARIGOLD COTTAGE PCH @ WALLER LLC
1802 MALLARD
HOUSTON TX 77043

PHONE: (713) 721-0226 **FAX:** (713) 468-3293

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/28/2017

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 101892

MARLENA'S HOUSE
418 FELLOWS RD
HOUSTON **TX** 77047

Phone (713) 433-8819 **Fax** (713) 433-8819

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

MARLENE HARROW
2222 S FOUNTAIN VALLEY DR
MISSOURI CITY TX 77459

PHONE: (281) 450-7463 **FAX:** (281) 438-1401

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/30/2017

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000766

MARSH PERSONAL CARE HOME
10142 VALLEY BREEZE
HOUSTON **TX** 77078

Phone (281) 458-9321 **Fax** (281) 458-1860

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

VAL VERDES CARE CENTER INC
10142 VALLEY BREEZE
HOUSTON TX 77078

PHONE: (281) 458-9321 **FAX:** (281) 458-1860

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/29/2017

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 104921

MARSH PERSONAL CARE HOME LAKEWOOD
7223 LAKEWOOD DR
HOUSTON **TX** 77016

Phone (713) 631-3100 **Fax** (281) 458-1860

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 9 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

VAL VERDES CARE CENTER INC
10142 VALLEY BREEZE
HOUSTON TX 77078

PHONE: (281) 458-9321 **FAX:** (281) 458-1860

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/11/2016

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030335

MARTIN PRIVATE CARE
9315 BERINGWOOD
HOUSTON **TX** 77083

Phone (281) 561-7924 **Fax** (281) 561-5002

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

DORIS MARTIN
9315 BERINGWOOD
HOUSTON TX 77083

PHONE: (281) 561-7924 **FAX:** (281) 561-7924

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/25/2018

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 106488

MENOX CARE ASSISTED LIVING
6922 VIALINDA DRIVE
HOUSTON **TX** 77083

Phone (832) 314-1922 **Fax**

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 7 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

MENOX CARE LLC
6922 VIALINDA DRIVE
HOUSTON TX 77083

PHONE: (832) 314-1922 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/25/2018

County **HARRIS** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103275

MENTIS NEURO HOUSTON LLC
9551 FANNIN ST
HOUSTON **TX** 77045
Phone (713) 820-4211 **Fax** (713) 820-4220

TOTAL Lic Capacity: 24 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 24 **TITLE 18/19:** 0

Owner Information

MENTIS NEURO HOUSTON LLC
9551 FANNIN ST
HOUSTON TX 77045
PHONE: (713) 820-4211 **FAX:** (713) 331-0257
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/15/2017

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105854

MILESTONE PERSONAL CARE INC.
10602 CHAPEL HILL DRIVE
HOUSTON **TX** 77099
Phone (281) 564-4601 **Fax** (281) 498-6767

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

MILESTONE PERSONAL CARE INC.
10602 CHAPEL HILL DRIVE
HOUSTON TX 77099
PHONE: (832) 704-4100 **FAX:** (281) 498-6767
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/16/2016

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103505

MINGO'S PERSONAL CARE HOME INC
10538 BAINBRIDGE
HOUSTON **TX** 77016
Phone (713) 631-4049 **Fax** (713) 631-2906

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

MINGO'S PERSONAL CARE HOME INC
10538 BAINBRIDGE
HOUSTON TX 77016
PHONE: (713) 631-4049 **FAX:** (713) 631-2906
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/18/2016

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030179

NEW BEGINNINGS SENIOR ESTATES
9018 COVENT GARDEN
HOUSTON **TX** 77031
Phone (713) 988-2029 **Fax** (281) 261-1232

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

CELESTINE M WOODSON
13909 SKYVIEW DR
SUGARLAND TX 77498
PHONE: (281) 499-0976 **FAX:** (281) 261-1232
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/22/2018

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000419

NISSI HOME OF TEXAS
11107 STROUD DR.
HOUSTON **TX** 77072
Phone (281) 776-9413 **Fax** (281) 561-9341

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

TEXMAX COVENANT BUSINESS INC
7503 BARBERTON DRIVE
HOUSTON TX 77036
PHONE: (832) 661-8306 **FAX:** (281) 561-9341
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/26/2018

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 101896

NIXON ASSISTED LIVING OF HOUSTON
6800 BLEKER STREET
HOUSTON **TX** 77016
Phone (713) 633-4700 **Fax** (713) 633-6964

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

DAN GROUP, LLC
6800 BLEKER ST
HOUSTON TX 77016
PHONE: (713) 633-4700 **FAX:** (713) 633-6964
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/01/2017

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000994

OAK SHADOWS ALLENDALE 1 LTD
4801 ALLENDALE
HOUSTON **TX** 77017
Phone (713) 941-7700 **Fax** (713) 941-0173

TOTAL Lic Capacity: 100 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 100 **TITLE 18/19:** 0

Owner Information

OAK SHADOWS ALLENDALE 1 LIMITED
805 AVENUE L
BROOKLYN NY 11230
PHONE: (718) 535-3793 **FAX:** (718) 338-1019
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/18/2015

County **HARRIS** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 104966

OUR FATHER'S HOUSE
3214 KNOTTY OAKS
HOUSTON **TX** 77045
Phone (832) 380-4423 **Fax** (713) 429-5078

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

FERGUSON BUSINESS ASSOCIATES
3214 KNOTTY OAKS TRAIL
HOUSTON TX 77045
PHONE: (832) 380-4423 **FAX:** (713) 429-5078
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/22/2018

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 100958

OUTREACH ASSISTED LIVING FACILITY II
5010 RIDGEWAY
HOUSTON **TX** 77033
Phone (713) 731-0645 **Fax** (713) 988-5323

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

FAIR V CLARKE
PO BOX 450677
HOUSTON TX 77245
PHONE: (713) 731-0645 **FAX:** (713) 988-5323
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/30/2017

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000941

PARADISE LTC LIVING I
8223 BELLAIRE
HOUSTON **TX** 77036
Phone (713) 981-1527 **Fax** (832) 201-7126

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

SINO-AMERICAN INVESTMENT & DEVELOPMENT HOLDINGS INC
9630 CLAREWOOD DR ,STE A-2
HOUSTON TX 77036
PHONE: (713) 272-6688 **FAX:** (832) 201-7126
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/16/2017

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000483

PARADISE LTC LIVING II
11403 HIGH STAR
HOUSTON **TX** 77072
Phone (281) 879-0614 **Fax** (832) 201-7126

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

Owner Information

SINO-AMERICAN INVESTMENT & DEVELOPMENT HOLDINGS INC
9630 CLAREWOOD DR ,STE A-2
HOUSTON TX 77036
PHONE: (713) 272-6688 **FAX:** (832) 201-7126
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/31/2016

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000386

PARAGON SENIOR CARE AND SERVICES
15526 EMPANADA
HOUSTON **TX** 77083
Phone (281) 568-7927 **Fax** (281) 568-7927

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

PARAGON SENIOR CARE AND SERVICES LLC
15526 EMPANADA DR
HOUSTON TX 77083
PHONE: (281) 248-3708 **FAX:** (281) 568-7927
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/09/2018

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000407

PARKWAY PLACE
1321 PARK BAYOU DR
HOUSTON **TX** 77077

Phone (281) 556-9200 **Fax** (281) 556-9275

TOTAL Lic Capacity: 92 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 24 **TITLE19:** 0
PRIVATE Beds: 92 **TITLE 18/19:** 0

Owner Information

BUCKNER RETIREMENT SERVICES INC
700 N PEARL ST ,STE 1200
DALLAS TX 75201

PHONE: (214) 758-8000 **FAX:** (214) 758-8153

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/20/2018

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 101881

PINNACLE LIVING CENTER INC
3127 COLLINGSWORTH
HOUSTON **TX** 77026

Phone (281) 788-6954 **Fax** (713) 222-7953

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

PINNACLE LIVING CENTER INC
3127 COLLINGSWORTH
HOUSTON TX 77026

PHONE: (281) 788-6954 **FAX:** (713) 222-7953

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/29/2016

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 050711

PREMIER ASSISTED LIVING HOMES
10607 RAYDELL DR
HOUSTON **TX** 77031

Phone (713) 484-5244 **Fax** (281) 530-6266

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

SAMUEL ONWUHARONYE
PO BOX 721051
HOUSTON TX 77272

PHONE: (281) 827-1477 **FAX:** (713) 988-1660

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/23/2016

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 101444

PREMIER ASSISTED LIVING HOMES #1
11230 EVESBOROUGH
HOUSTON **TX** 77099

Phone (281) 564-4747 **Fax** (281) 530-6266

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

SAMUEL ONWUHARONYE
PO BOX 721051
HOUSTON TX 77272

PHONE: (281) 827-1477 **FAX:** (713) 988-1660

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/28/2017

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102617

PREMIER ASSISTED LIVING HOMES #3
9135 RENTUR DR
HOUSTON **TX** 77031

Phone (713) 271-1196 **Fax** (713) 988-1660

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

SAMUEL ONWUHARONYE
PO BOX 721051
HOUSTON TX 77272

PHONE: (281) 827-1477 **FAX:** (713) 988-1660

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/26/2017

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 100738

QUALITY LIVING
8302 BEECHNUT
HOUSTON **TX** 77036

Phone (713) 995-7237 **Fax** (281) 499-7145

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

HILDA L EAGLETON
8202 CANDLEGREEN CT
HOUSTON TX 77071

PHONE: (713) 771-8735 **FAX:** (281) 499-7145

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/18/2016

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000832

QUALITY LIVING PERSONAL CARE
8304 BEECHNUT
HOUSTON **TX** 77036
Phone (713) 995-7237 **Fax** (281) 499-7145

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

Owner Information

HILDA L EAGLETON
8202 CANDLEGREEN CT
HOUSTON TX 77071
PHONE: (713) 771-8735 **FAX:** (281) 499-7145
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/29/2017

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105059

RACHEL HOUSE MINISTRY
12119 CORONA LN
HOUSTON **TX** 77072
Phone (832) 617-7990 **Fax** (832) 617-7991

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

LIMBE HOUSE INC
PO BOX 773033
HOUSTON TX 77215
PHONE: (281) 983-0045 **FAX:** (832) 617-7991
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/19/2016

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000968

RAINBOW GARDENS CARE HOME
3110 LEBADIE
HOUSTON **TX** 77026
Phone (713) 678-8016 **Fax** (713) 678-7138

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

JESSIE H LEWIS
3110 LEBADIE
HOUSTON TX 77026
PHONE: (713) 678-8016 **FAX:** (713) 678-7138
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/05/2018

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000667

ROOMES PERSONAL CARE
6106 GRANDVALE
HOUSTON **TX** 77072
Phone (281) 568-3239 **Fax** (713) 272-8168

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

EVANGELINE ROOMES
8927 ROYAL CREST LN
RICHMOND TX 77469
PHONE: (713) 291-9529 **FAX:** (713) 272-8168
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/08/2018

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102239

ROOMES PERSONAL CARE #2
7247 ROOS
HOUSTON **TX** 77074
Phone (713) 484-7980 **Fax** (281) 545-2575

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

EVANGELINE ROOMES
8927 ROYAL CREST LN
RICHMOND TX 77469
PHONE: (713) 291-9529 **FAX:** (713) 272-8168
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/23/2016

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000535

ROSEMONT PERSONAL CARE HOME I
10927 MAYFIELD RD
HOUSTON **TX** 77043
Phone (713) 468-7673 **Fax** (713) 468-7374

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

ROSEMONT PERSONAL CARE HOME INC
10931 MAYFIELD RD
HOUSTON TX 77043
PHONE: (713) 468-7673 **FAX:** (713) 468-7374
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/01/2016

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030402

ROSES GUARDIAN ADULT CARE HOME
7216 PARKER RD
HOUSTON **TX** 77016
Phone (713) 491-2357 **Fax** (713) 491-3860

TOTAL Lic Capacity: 11 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 11 **TITLE 18/19:** 0

Owner Information

ROSES HEALTHCARE HOME INC
7225 PARKER RD
HOUSTON TX 77016
PHONE: (713) 491-2357 **FAX:** (713) 491-3860
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/02/2017

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 100314

ROYAL PERSONAL CARE
12922 BECKLIN LN
HOUSTON **TX** 77099
Phone (281) 564-3059 **Fax** (713) 778-1792

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

IFEOMA F DIKE
PO BOX 14286
HOUSTON TX 77221
PHONE: (713) 907-5717 **FAX:** (713) 778-1792
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/04/2017

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 101945

SAINT FRANCIS HEALTH CARE SERVICES
12127 HUNTINGTON PARK DR
HOUSTON **TX** 77099
Phone (713) 729-3970 **Fax** (281) 983-9262

TOTAL Lic Capacity: 15 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 15 **TITLE 18/19:** 0

Owner Information

DAVID O OPARA
6330 DAWNRIDGE DR
HOUSTON TX 77035
PHONE: (713) 240-3945 **FAX:** (281) 983-9262
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/11/2018

County **HARRIS** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 100969

SAINT FRANCIS HEALTH CARE SERVICES
6330 DAWNRIDGE DR
HOUSTON **TX** 77035
Phone (713) 729-3970 **Fax** (281) 983-9262

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

DAVID O OPARA
6330 DAWNRIDGE DR
HOUSTON TX 77035
PHONE: (713) 240-3945 **FAX:** (281) 983-9262
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/30/2016

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102491

SEVEN ACRES JEWISH SENIOR CARE SERVICES, INC
6262 NORTH BRAESWOOD BLVD.
HOUSTON **TX** 77074
Phone (713) 778-5790 **Fax** (713) 778-0823

TOTAL Lic Capacity: 90 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 90 **TITLE 18/19:** 0

Owner Information

SEVEN ACRES JEWISH SENIOR CARE SERVICES, INC
6200 N BRAESWOOD
HOUSTON TX 77074
PHONE: (713) 778-5700 **FAX:** (713) 778-0823
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/28/2018

County **HARRIS** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000989

SILVERADO SENIOR LIVING - CYPRESSWOOD
10225 CYPRESSWOOD DR
HOUSTON **TX** 77070
Phone (281) 955-0880 **Fax** (281) 955-1270

TOTAL Lic Capacity: 96 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 96 **TITLE19:** 0
PRIVATE Beds: 96 **TITLE 18/19:** 0

Owner Information

SUBTENANT 10225 CYPRESSWOOD DRIVE, LLC
4500 DORR ST
TOLEDO OH 43615
PHONE: (419) 247-2800 **FAX:** (419) 247-2826
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/11/2017

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000823

SPARROW ASSISTED LIVING
7414 JENSEN DR
HOUSTON **TX** 77093
Phone (713) 697-4600 **Fax** (713) 697-0030

TOTAL Lic Capacity: 65 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 65 **TITLE 18/19:** 0

Owner Information

SPARROW ADULT LIVING, LLC
P.O. BOX 21129
HOUSTON TX 77226
PHONE: (713) 697-4600 **FAX:** (713) 697-0030
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/25/2018

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000425

SPILLER PERSONAL CARE HOME
10323 MAYBERRY ST
HOUSTON **TX** 77078
Phone (713) 635-1231 **Fax** (713) 635-1231

TOTAL Lic Capacity: 15 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 15 **TITLE 18/19:** 0

Owner Information

SPILLER PERSONAL CARE HOME
10323 MAYBERRY ST
HOUSTON TX 77078
PHONE: (713) 635-1231 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/01/2017

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030294

SPRING BRANCH CARE HOME
9619 TRUSCON
HOUSTON **TX** 77080
Phone (713) 467-4444 **Fax** (409) 938-7154

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

SPRING BRANCH CARE HOMES INC
1304 BLUE HERON
HITCHCOCK TX 77563
PHONE: (713) 467-4444 **FAX:** (409) 995-0799
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/01/2017

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 010372

SPRING BRANCH CARE HOME II
3815 APRIL LN
HOUSTON **TX** 77092
Phone (713) 467-4444 **Fax** (409) 938-7154

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

SPRING BRANCH CARE HOMES INC
1304 BLUE HERON
HITCHCOCK TX 77563
PHONE: (713) 467-4444 **FAX:** (409) 995-0799
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/01/2017

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102527

SUBJECTIVE HOME CARE
6626 DEPRIEST ST
HOUSTON **TX** 77091
Phone (713) 742-9688 **Fax** (713) 742-8719

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

SUBJECTIVE HOME CARE
6626 DEPRIEST ST
HOUSTON TX 77091
PHONE: (713) 742-9688 **FAX:** (713) 742-8719
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/20/2017

County **HARRIS** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 101946

SUN ROSE ADULT HOME
10908 WILLOWISP
HOUSTON **TX** 77035
Phone (713) 729-6617 **Fax**

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

ELIZABETH M PICKNEY
7111 SHERMANRIDGE LN
HOUSTON TX 77083
PHONE: (281) 620-8721 **FAX:** (713) 729-6617
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/06/2016

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103856

SWEET HOME
13820 EAGLE PASS ST
HOUSTON **TX** 77015
Phone (713) 450-3222 **Fax** (712) 450-3376

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

RKM SOLID KIMISTRY INC
10911 CORNWALL LANE
MISSOURI TX 77459
PHONE: (832) 489-4552 **FAX:** (281) 778-7701
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/17/2017

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 101534

SYBILS IDEAL HOME CARE SERVICES
7214 LAS BRISAS
HOUSTON **TX** 77083
Phone (281) 879-7551 **Fax** (281) 232-6790

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

SYBIL M CONNORS
19514 PLANTATION ORCHARD
RICHMOND TX 77407
PHONE: (281) 232-1878 **FAX:** (281) 232-6790
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/29/2017

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 100607

TENDER CARE ASSISTED LIVING
7503 BARBERTON DR
HOUSTON **TX** 77036
Phone (832) 742-5287 **Fax** (832) 742-5287

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 10 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

TEXMAX COVENANT BUSINESS INC
7503 BARBERTON DRIVE
HOUSTON TX 77036
PHONE: (832) 661-8306 **FAX:** (281) 561-9341
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/01/2018

County **HARRIS** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102046

TEXAS COMMUNITY CARE CENTER
10719 HILLCROFT
HOUSTON **TX** 77096
Phone (713) 885-0781 **Fax**

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

TEXAS COMMUNITY CARE INC
7241 S GESSNER
HOUSTON TX 77036
PHONE: (713) 541-0996 **FAX:** (713) 779-5589
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/21/2016

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 104616

TEXAS COMMUNITY CARE COMPARTMENTS # 1
7103 S GESSNER
HOUSTON **TX** 77036
Phone (713) 771-7235 **Fax** (713) 779-5589

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

TEXAS COMMUNITY CARE INC
7241 S GESSNER
HOUSTON TX 77036
PHONE: (713) 541-0996 **FAX:** (713) 779-5589
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/14/2017

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 106006

TEXAS COMMUNITY CARE COMPARTMENTS #3
7241 S. GESSNER RD.
HOUSTON **TX** 77036
Phone (713) 541-0996 **Fax** (713) 779-5589

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

TEXAS COMMUNITY CARE INC
7241 S GESSNER
HOUSTON TX 77036
PHONE: (713) 541-0996 **FAX:** (713) 779-5589
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/22/2016

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 100984

TEXAS COMMUNITY CARE LIVING CENTRE
7314 BRENDAM LN
HOUSTON **TX** 77072
Phone (281) 568-5331 **Fax** (713) 779-5589

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information
TEXAS COMMUNITY CARE INC
7241 S GESSNER
HOUSTON TX 77036
PHONE: (713) 541-0996 **FAX:** (713) 779-5589
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/21/2017

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030283

TEXAS COMMUNITY CARE PERSONAL CARE HOME
12119 FAIRMEADOW DR
HOUSTON **TX** 77071
Phone (713) 729-4257 **Fax** (713) 729-6630

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

Owner Information
TEXAS COMMUNITY CARE INC
7241 S GESSNER
HOUSTON TX 77036
PHONE: (713) 541-0996 **FAX:** (713) 779-5589
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/30/2018

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105189

TEXAS COMMUNITY COMPARTMENTS #2
7025 S GESSNER DR
HOUSTON **TX** 77036
Phone (713) 271-0872 **Fax** (713) 779-5589

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information
TEXAS COMMUNITY CARE INC
7241 S GESSNER
HOUSTON TX 77036
PHONE: (713) 541-0996 **FAX:** (713) 779-5589
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/06/2016

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 100256

THE ABBEY AT WESTMINSTER PLAZA
2865 WESTMINSTER PLAZA DR
HOUSTON **TX** 77082
Phone (281) 556-6020 **Fax** (281) 556-0136

TOTAL Lic Capacity: 164 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 36 **TITLE19:** 0
PRIVATE Beds: 164 **TITLE 18/19:** 0

Owner Information
FOUNDER'S COMMERCIAL LTD
6101 S. BROADWAY AVE ,#550
TYLER TX 75703
PHONE: (903) 534-1242 **FAX:** (903) 534-0047
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/20/2017

County **HARRIS** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102584

THE ART OF LIVING ASSISTED LIVING FACILITY (A.L.F.)
14151 FLEETWELL
HOUSTON **TX** 77045
Phone (713) 485-5034 **Fax** (832) 553-7414

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information
2 SISTERS SUCCESS, LLC
14151 UPPER RIDGE DR
HOUSTON TX 77045
PHONE: (713) 320-2754 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/10/2017

County **HARRIS** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 100669

THE ASSISTED LIVING AT ST. DOMINIC VILLAGE
2401 A HOLCOMBE BLVD
HOUSTON **TX** 77021
Phone (713) 741-8700 **Fax** (713) 741-9811

TOTAL Lic Capacity: 48 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 48 **TITLE 18/19:** 0

Owner Information
ST DOMINIC VILLAGE
2401 E HOLCOMBE BLVD
HOUSTON TX 77021
PHONE: (713) 741-8700 **FAX:** (713) 741-9811
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/08/2018

County **HARRIS** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030206

THE BRINKLEY HOUSE
4604 BRINKLEY
HOUSTON **TX** 77051
Phone (713) 734-6507 **Fax** (713) 734-6507

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

ROSE PHILLIPS
3623 FLORINDA
HOUSTON TX 77021
PHONE: (713) 747-2136 **FAX:** (713) 747-8627

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/25/2016

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102410

THE BUCKINGHAM
8530 WOODWAY
HOUSTON **TX** 77063
Phone (713) 979-3100 **Fax** (713) 979-3099

TOTAL Lic Capacity: 59 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 59 **TITLE 18/19:** 0

Owner Information

BUCKINGHAM SENIOR LIVING COMMUNITY INC
8530 WOODWAY
HOUSTON TX 77063
PHONE: (713) 979-3100 **FAX:** (719) 979-3099

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/28/2017

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 101324

THE COTTAGE HEALTH CARE SERVICES
7639 BEECHNUT
HOUSTON **TX** 77074
Phone (713) 773-1297 **Fax** (713) 773-1739

TOTAL Lic Capacity: 45 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 45 **TITLE 18/19:** 0

Owner Information

PARADISE LIVING INC
5901 CYPRESS ST
HOUSTON TX 77074
PHONE: (713) 777-3114 **FAX:** (713) 773-1739

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/10/2016

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102872

THE COTTAGE OF SPRING BRANCH
1842 HOLLISTER RD
HOUSTON **TX** 77080
Phone (713) 461-1500 **Fax** (713) 461-1501

TOTAL Lic Capacity: 32 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 32 **TITLE19:** 0
PRIVATE Beds: 32 **TITLE 18/19:** 0

Owner Information

WINTER SERVICES LP
9900 WESTPART ,STE 100
HOUSTON TX 77063
PHONE: (713) 528-3030 **FAX:** (713) 654-7117

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/09/2017

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000757

THE FORUM AT MEMORIAL WOODS
801 N POST OAK RD
HOUSTON **TX** 77024
Phone (713) 956-0870 **Fax** (713) 956-0732

TOTAL Lic Capacity: 148 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 28 **TITLE19:** 0
PRIVATE Beds: 148 **TITLE 18/19:** 0

Owner Information

FIVE STAR MEMORIAL WOODS LLC
801 N POST OAK RD
HOUSTON TX 77024
PHONE: (713) 956-6407 **FAX:** (713) 956-5015

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/01/2018

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000677

THE HALLMARK ASSISTED LIVING - ALZHEIMER'S CENTER
4718 HALLMARK DR
HOUSTON **TX** 77056
Phone (713) 622-6633 **Fax** (713) 599-1324

TOTAL Lic Capacity: 22 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 10 **TITLE19:** 0
PRIVATE Beds: 22 **TITLE 18/19:** 0

Owner Information

BRAZOS PRESBYTERIAN HOMES INC
4141 S BRAESWOOD BLVD
HOUSTON TX 77025
PHONE: (713) 666-2651 **FAX:** (713) 660-5048

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/17/2018

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000780

THE HUMMINGBIRD CARE CENTER
8014 BEECHNUT ST
HOUSTON **TX** 77036
Phone (713) 988-1357 **Fax** (713) 771-8832

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

THE HUMMINGBIRD CENTER INC
P O BOX 36174
HOUSTON TX 77236
PHONE: (713) 988-1357 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/28/2017

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030187

THE LIGHTHOUSE OF HOUSTON GROUP HOME I
10643 HAZEN RD
HOUSTON **TX** 77072
Phone (281) 568-3091 **Fax** (713) 284-8451

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

Owner Information

LIGHTHOUSE FOR THE BLIND OF HOUSTON
PO BOX 130435
HOUSTON TX 77219-0435
PHONE: (713) 284-8490 **FAX:** (713) 284-8451

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/10/2017

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030188

THE LIGHTHOUSE OF HOUSTON GROUP HOME I I
10647 HAZEN RD
HOUSTON **TX** 77072
Phone (281) 495-6499 **Fax** (713) 284-8451

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

Owner Information

LIGHTHOUSE FOR THE BLIND OF HOUSTON
PO BOX 130435
HOUSTON TX 77219-0435
PHONE: (713) 284-8490 **FAX:** (713) 284-8451

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/10/2016

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000609

THE ROC PERSONAL CARE
12621 TICONDEROGA
HOUSTON **TX** 77044
Phone (281) 458-7277 **Fax** (281) 458-7277

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

Owner Information

RONALDA M STELLY-FRAIZER
12621 TICONDEROGA
HOUSTON TX 77044
PHONE: (281) 458-7277 **FAX:** (281) 458-7277

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/26/2018

County **HARRIS** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105383

THE SOLANA VINTAGE PARK
19929 CHASEWOOD PARK DRIVE
HOUSTON **TX** 77070
Phone (281) 320-9000 **Fax** (281) 320-9100

TOTAL Lic Capacity: 101 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 35 **TITLE19:** 0
PRIVATE Beds: 101 **TITLE 18/19:** 0

Owner Information

S-H OPCO VINTAGE PARK AL LLC
111 WESTWOOD PL ,STE 400
BRENTWOOD TN 37027
PHONE: (615) 221-2250 **FAX:** (414) 208-2119

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/19/2017

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 106191

THE VILLAGE OF THE HEIGHTS
1407 STUDEWOOD
HOUSTON **TX** 77008
Phone (281) 996-0101 **Fax** (281) 996-1141

TOTAL Lic Capacity: 136 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 21 **TITLE19:** 0
PRIVATE Beds: 136 **TITLE 18/19:** 0

Owner Information

BRIDGEWOOD HOUSTON HEIGHTS LLC
6363 WOODWAY ,STE 410
HOUSTON TX 77057
PHONE: (713) 623-6767 **FAX:** (713) 623-6772

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/07/2017

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103470

THE WORD HEALS SPRINGBROOK PERSONAL CARE FACILITY
9713 SPRINGBROOK DR
HOUSTON **TX** 77041
Phone (713) 939-0666 **Fax** (713) 939-0674

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

DR. ALEXANDER O. EZE
9713 SPRINGBROOK DR
HOUSTON TX 77041
PHONE: (713) 444-6365 **FAX:** (713) 939-0674
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/22/2014

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000954

TIFFS TENDER CARE
3803 CARLSON LN
HOUSTON **TX** 77047
Phone (713) 733-5607 **Fax** (713) 733-5607

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

TIFFS TENDER CARE INC
PO BOX 300896
HOUSTON TX 77030
PHONE: (713) 733-5607 **FAX:** (281) 835-1346
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/07/2017

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030153

TRANQUILITY PERSONAL CARE HOME INC
9006 POCO A
HOUSTON **TX** 77080
Phone (713) 783-2404 **Fax** (713) 467-0143

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

Owner Information

TRANQUILITY PERSONAL CARE HOME INC
12520 A-1 WESTHEIMER ,STE 265
HOUSTON TX 77077
PHONE: (713) 783-2404 **FAX:** (713) 467-0143
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/30/2016

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000444

TRANQUILITY PERSONAL CARE HOME INC
9006 POCO
HOUSTON **TX** 77080
Phone (713) 783-2404 **Fax** (713) 467-0143

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

TRANQUILITY PERSONAL CARE HOME INC
12520 A-1 WESTHEIMER ,STE 265
HOUSTON TX 77077
PHONE: (713) 783-2404 **FAX:** (713) 467-0143
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/30/2017

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000409

TREEMONT HEALTH CARE CENTER P C UNIT
2501 WESTERLAND DR
HOUSTON **TX** 77063
Phone (713) 783-4100 **Fax** (713) 783-0634

TOTAL Lic Capacity: 54 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 54 **TITLE 18/19:** 0

Owner Information

QUILTED CARE-HOUSTON LLC
5353 WYOMING BLVD ,NE
ALBUQUERQUE NM 87109
PHONE: (505) 797-8735 **FAX:** (505) 828-2111
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/29/2016

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105447

UNIVERSAL ASSISTED LIVING HOMES
15722 AMAPOLA DRIVE
HOUSTON **TX** 77083
Phone (281) 498-6670 **Fax** (281) 561-7592

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

BONIFACE O OJIAKU
6511 MARISOL DR
HOUSTON TX 77083
PHONE: (713) 291-1011 **FAX:** (281) 561-7592
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/31/2018

County **HARRIS** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 101894

UNIVERSAL ASSISTED LIVING HOMES
6511 MARISOL DR
HOUSTON **TX** 77083
Phone (281) 933-7804 **Fax** (281) 561-7592

TOTAL Lic Capacity: 11 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 11 **TITLE 18/19:** 0

Owner Information

BONIFACE O OJIAKU
6511 MARISOL DR
HOUSTON TX 77083
PHONE: (713) 291-1011 **FAX:** (281) 561-7592
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/24/2016

County **HARRIS** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105872

US MEMORY CARE - VINTAGE
10120 LOUETTA RD
HOUSTON **TX** 77070
Phone (832) 301-8188 **Fax** (832) 698-4760

TOTAL Lic Capacity: 90 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 90 **TITLE19:** 0
PRIVATE Beds: 90 **TITLE 18/19:** 0

Owner Information

USMC VINTAGE LLC
14881 QUORUM DR ,STE 250
PLANO TX 75254
PHONE: (214) 782-9994 **FAX:** (214) 782-9569
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/10/2016

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105335

VILLAGE OF MEYERLAND
4141 N BRAESWOOD BLVD
HOUSTON **TX** 77005
Phone (713) 665-4141 **Fax**

TOTAL Lic Capacity: 188 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 34 **TITLE19:** 0
PRIVATE Beds: 188 **TITLE 18/19:** 0

Owner Information

HSRE - BRIDGEWOOD TRS II, LLC
1502 AUGUSTA DRIVE
HOUSTON TX 77057
PHONE: (713) 623-6767 **FAX:** (713) 623-6772
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/07/2017

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105886

VILLAGE ON THE PARK-STEEPLECHASE
12102 STEEPLEWAY
HOUSTON **TX** 77065
Phone (281) 970-7979 **Fax** (281) 970-0323

TOTAL Lic Capacity: 52 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 20 **TITLE19:** 0
PRIVATE Beds: 52 **TITLE 18/19:** 0

Owner Information

CARDINAL BAY, INC
317 MARTINIQUE PASS
LAKEWAY TX 78734
PHONE: (972) 377-3309 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/26/2018

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 101707

VINTAGE PLACE
3402 VINTAGE
HOUSTON **TX** 77026
Phone (713) 673-8400 **Fax** (713) 673-8401

TOTAL Lic Capacity: 50 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 50 **TITLE 18/19:** 0

Owner Information

THE CARE GROUP INC
3402 VINTAGE
HOUSTON TX 77026
PHONE: (713) 673-8400 **FAX:** (713) 673-8401
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/07/2015

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 101200

VONN'S PERSONAL CARE
7970 ETHEL
HOUSTON **TX** 77028
Phone (713) 670-0061 **Fax** (713) 670-0061

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

MRS BRENDA GORDON
20702 TAWNY WOOD CT
HUMBLE TX 77338
PHONE: (281) 446-2705 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/03/2017

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 104449

AUTUMN GROVE - HEIGHTS
1405 WEST 24TH STREET
HOUSTON HEIGHTS **TX** 77008

Phone (713) 861-5757 **Fax** (713) 861-5760

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

GLEN HOPE HARBOR INC
101 FIREBIRD COVE
LAKEWAY TX 78734

PHONE: (469) 371-0445 **FAX:** (512) 761-3548

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/26/2017

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 100057

ATASCOCITA SENIORS CARE HOME INC
18007 LANDING BROOK DR
HUMBLE **TX** 77346

Phone (281) 812-4891 **Fax** (281) 812-4891

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

ATASCOCITA SENIORS CARE HOME INC
18007 LANDING BROOK DR
HUMBLE TX 77346

PHONE: (281) 812-4891 **FAX:** (281) 812-4891

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/18/2018

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 104020

AUTUMN GROVE - HUMBLE
5500 ATASCOCITA RD
HUMBLE **TX** 77346

Phone (281) 446-3421 **Fax** (281) 812-9395

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

GLEN HOPE HARBOR INC
101 FIREBIRD COVE
LAKEWAY TX 78734

PHONE: (469) 371-0445 **FAX:** (512) 761-3548

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/26/2017

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105300

ESTIA CARE LLC
18111 STONE ANGEL
HUMBLE **TX** 77346

Phone (281) 638-4363 **Fax** (832) 644-1255

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

ESTIA CARE LLC
18111 STONE ANGEL DR
HUMBLE TX 77346

PHONE: (281) 638-4363 **FAX:** (832) 644-1255

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/08/2018

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030393

FOREST COVE ASSISTED LIVING, INC
8426 OPALWOOD LN
HUMBLE **TX** 77338

Phone (281) 935-9005 **Fax** (281) 540-2279

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 10 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

FOREST COVE ASSISTED LIVING, INC.
8426 OPALWOOD LANE
HUMBLE TX 77338

PHONE: (281) 935-9005 **FAX:** (281) 540-2279

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/03/2017

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 106019

HERITAGE RETREAT ATASCA WOODS
7105 HOT CREEK TRACE
HUMBLE **TX** 77346

Phone (832) 445-2470 **Fax** (281) 354-1237

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 10 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

HERITAGE RETREAT MANAGEMENT GROUP INC
4321 KINGWOOD DRIVE
KINGWOOD TX 77339

PHONE: (281) 360-4724 **FAX:** (281) 254-1237

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/08/2017

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102090

LOVING CARE PERSONAL CARE HOME
20011 FOXWOOD FOREST BLVD
HUMBLE **TX** 77338

Phone (281) 446-6683 **Fax** (713) 699-1572

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

LOVING CARE PERSONAL CARE HOME
3910 N FWY ,STE L
HOUSTON TX 77022

PHONE: (713) 691-7437 **FAX:** (713) 699-1572

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/08/2017

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030220

THE ULTIMATE PERSONAL CARE HOME
20430 RUSTWOOD LN
HUMBLE **TX** 77338

Phone (281) 548-2668 **Fax** (281) 288-1704

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

FRANCISCA C OKONKWO
19215 CYPRESS ESTATES CT
SPRING TX 77388

PHONE: (281) 355-6862 **FAX:** (281) 288-1704

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/04/2015

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102463

AUTUMN GROVE - KATY
21803 OAK PARK TRAILS DR
KATY **TX** 77450

Phone (281) 398-6662 **Fax** (281) 398-4550

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

GLEN HOPE HARBOR INC
101 FIREBIRD COVE
LAKEWAY TX 78734

PHONE: (469) 371-0445 **FAX:** (512) 761-3548

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/26/2017

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105445

EVERGREEN COTTAGES
21715 BRIDGEWATER VILLAGE DR
KATY **TX** 77449

Phone (832) 321-5957 **Fax** (832) 321-3099

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

EVERGREEN COTTAGES, LP
1022 WIRT RD. ,SUITE 302
HOUSTON TX 77055

PHONE: (713) 688-2123 **FAX:** (713) 688-6806

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/14/2017

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103010

KATY ASSISTED LIVING LP
21601 PROVINCIAL BLVD
KATY **TX** 77450

Phone (281) 578-2222 **Fax** (281) 578-2420

TOTAL Lic Capacity: 106 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 19 **TITLE19:** 0
PRIVATE Beds: 106 **TITLE 18/19:** 0

Owner Information

KATY ASSISTED LIVING LP
510 BERING DR ,STE 210
HOUSTON TX 77057

PHONE: (713) 780-8100 **FAX:** (713) 780-8105

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/23/2017

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 106069

LEGACY AT FALCON POINT
1520 KATY GAP ROAD
KATY **TX** 77494

Phone (281) 394-0628 **Fax** (281) 769-1164

TOTAL Lic Capacity: 82 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 22 **TITLE19:** 0
PRIVATE Beds: 82 **TITLE 18/19:** 0

Owner Information

LAFP TENANT LLC
675 BERING DR
HOUSTON TX 77057

PHONE: (713) 425-5423 **FAX:** (713) 425-5402

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/01/2018

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103661

ROSE'S RETREAT
21643 PARK VILLA
KATY **TX** 77450
Phone (281) 646-8415 **Fax** (281) 646-8415

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

Owner Information

ROSE'S RETREAT LLC
21643 PARK VILLA DR
KATY TX 77450
PHONE: (281) 646-8415 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/06/2018

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102834

SUNRISE OF CINCO RANCH
21939 CINCO RANCH BLVD
KATY **TX** 77450
Phone (281) 240-0500 **Fax** (281) 240-0551

TOTAL Lic Capacity: 105 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 38 **TITLE19:** 0
PRIVATE Beds: 105 **TITLE 18/19:** 0

Owner Information

MS CINCO RANCH SH, LLC
10350 ORMSBY PARK PLACE ,SUITE 300
LOUISVILLE KS 40223
PHONE: (502) 357-9000 **FAX:** (502) 357-9441
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/09/2016

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 106066

THE ORCHARD ASSISTED LIVING, LP
24802 KINGSLAND BLVD.
KATY **TX** 77494
Phone (281) 371-3000 **Fax**

TOTAL Lic Capacity: 135 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 40 **TITLE19:** 0
PRIVATE Beds: 135 **TITLE 18/19:** 0

Owner Information

THE ORCHARD ASSISTED LIVING LP
5949 SHERRY LANE ,SUITE 600
DALLAS TX 75225
PHONE: (214) 463-2604 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/12/2017

County **HARRIS** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105724

VERANDA HOUSE
5129 E FIFTH ST
KATY **TX** 77493
Phone (281) 391-1900 **Fax** (281) 310-8689

TOTAL Lic Capacity: 56 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 56 **TITLE 18/19:** 0

Owner Information

LIVING CENTERS INC
5129 E. 5TH STREET
KATY TX 77493
PHONE: (281) 391-1900 **FAX:** (281) 310-8689
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/07/2016

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030329

ATRIA KINGWOOD
2401 GREEN OAK DR
KINGWOOD **TX** 77339
Phone (281) 359-8959 **Fax** (281) 359-1237

TOTAL Lic Capacity: 70 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 70 **TITLE 18/19:** 0

Owner Information

WG KINGWOOD SH LLC
10350 ORMSBY PARK PLACE ,SUITE 300
LOUISVILLE KY 40202
PHONE: (502) 779-4700 **FAX:** (502) 357-9441
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/12/2017

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 104945

HOUSTON EXTENDED CARE LLC
1210 MASTERS WAY
KINGWOOD **TX** 77339
Phone (281) 713-8786 **Fax** (281) 713-2251

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

DANIELA VANCIA
21555 LEXOR CT
PORTER TX 77365
PHONE: (832) 244-0685 **FAX:** (281) 713-2251
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/16/2017

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030268

THE ROSEMONT ASSISTED LIVING COMMUNITY OF KINGWOOD
6450 KINGS PKWY
KINGWOOD **TX** 77346
Phone (281) 812-4099 **Fax** (281) 821-4097

TOTAL Lic Capacity: 120 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 120 **TITLE 18/19:** 0

Owner Information

ROSEMONT ASSISTED LIVING COMMUNITY OF KINGWOOD LTD
25003 PITKIN RD ,SUITE G-100
SPRING TX 77386
PHONE: (281) 363-8705 **FAX:** (281) 367-9109
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/24/2017

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 101470

THE VILLAGE LEARNING CENTER INC DBA VILLAGE AT STONEY GLEN
2225 STONEY GLEN DR
KINGWOOD **TX** 77339
Phone (281) 358-4589 **Fax** (281) 358-0845

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

THE VILLAGE LEARNING CENTER, INC.
3819 PLUM VALLEY DR
KINGWOOD TX 77339
PHONE: (281) 358-6172 **FAX:** (281) 358-0845
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/22/2017

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 104574

UNLIMITED CARE ASSISTED LIVING COTTAGES
1714 CHESTNUT RIDGE RD
KINGWOOD **TX** 77339
Phone (281) 713-8556 **Fax** (936) 321-2795

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

GEL PARTNERSHIP INC
31 WINDFERN PL
SPRING TX 77382
PHONE: (713) 858-6821 **FAX:** (936) 321-2795
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/09/2017

County **HARRIS** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 100097

PARSONS HOUSE LA PORTE LP
8727 FAIRMONT PARKWAY
LA PORTE **TX** 77571
Phone (281) 478-0000 **Fax** (281) 478-6548

TOTAL Lic Capacity: 65 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 65 **TITLE 18/19:** 0

Owner Information

PARSONS HOUSE LA PORTE LP
1 NORTH CALLE CESAR CHAVEZ ,STE 200
SANTA BARBARA CA 93103
PHONE: (805) 564-3341 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/31/2017

County **HARRIS** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105495

CARING HANDS RESIDENTIAL CARE HOME
726 DUNWICK LN
PASADENA **TX** 77502
Phone (888) 672-2221 **Fax** (832) 202-2688

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

CARING HANDS ASSISTED LIVING, LLC
726 DUNWICK LN
PASADENA TX 77502
PHONE: (888) 672-2221 **FAX:** (832) 202-2688
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/14/2017

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000951

COLONIAL OAKS AT VISTA
4004 VISTA RD
PASADENA **TX** 77504
Phone (713) 941-4663 **Fax** (713) 941-4664

TOTAL Lic Capacity: 120 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 26 **TITLE19:** 0
PRIVATE Beds: 120 **TITLE 18/19:** 0

Owner Information

VISTA ACCOMODATED LIVING LTD
510 BERING DR ,STE 210
HOUSTON TX 77057
PHONE: (713) 780-8100 **FAX:** (713) 780-8105
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/27/2016

County **HARRIS** Reg Svcs: UNIT 14 Region 06 - HOUSTON

Facility Information: **Facility ID:** 106240

LAFFERTY ROAD ASSISTED LIVING
3123 LAFFERTY ROAD
PASADENA **TX** 77504
Phone (281) 998-8786 **Fax** (281) 998-8370

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

HERITAGE HOUSE ASSISTED LIVING LLC
3123 LAFFERTY RD.
PASADENA TX 77504
PHONE: (281) 998-8786 **FAX:** (281) 998-8370
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/17/2017

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030094

PINE TREE A AND D LP
2514 PANSY
PASADENA **TX** 77503
Phone (281) 487-3113 **Fax** (281) 487-5818

TOTAL Lic Capacity: 32 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 32 **TITLE19:** 0
PRIVATE Beds: 32 **TITLE 18/19:** 0

Owner Information

PINE TREE A & D LP
805 AVENUE L
BROOKLYN NY 11230
PHONE: (718) 535-4733 **FAX:** (718) 535-4733
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/29/2016

County **HARRIS** Reg Svcs: UNIT 13 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000563

PINE TREE ASSISTED LIVING LP
5128 PINE AVE
PASADENA **TX** 77503-3765
Phone (281) 487-3113 **Fax** (281) 487-5818

TOTAL Lic Capacity: 146 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 146 **TITLE 18/19:** 0

Owner Information

PINE TREE ASSISTED LIVING LP
805 AVENUE L
BROOKLYN NY 11230
PHONE: (718) 535-4733 **FAX:** (718) 338-1019
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/29/2015

County **HARRIS** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000487

ATRIA CYPRESSWOOD
6611 CYPRESSWOOD DR
SPRING **TX** 77379
Phone (281) 370-5444 **Fax** (281) 370-6956

TOTAL Lic Capacity: 78 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 15 **TITLE19:** 0
PRIVATE Beds: 78 **TITLE 18/19:** 0

Owner Information

WG CYPRESSWOOD SH LLC
10350 ORMSBY PARK PLACE ,STE 300
LOUISVILLE KY 40223
PHONE: (502) 779-4700 **FAX:** (502) 779-4701
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/12/2017

County **HARRIS** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103059

AUTUMN GROVE - CHAMPIONS
8733 EASTLOCH DR
SPRING **TX** 77379
Phone (281) 370-2555 **Fax** (281) 370-0210

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

GLEN HOPE HARBOR INC
101 FIREBIRD COVE
LAKEWAY TX 78734
PHONE: (469) 371-0445 **FAX:** (512) 761-3548
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/26/2017

County **HARRIS** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 104657

AUTUMN LEAVES OF CYPRESSWOOD
6327 CYPRESSWOOD DR
SPRING **TX** 77379
Phone (281) 374-1750 **Fax** (281) 374-1751

TOTAL Lic Capacity: 50 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 50 **TITLE19:** 0
PRIVATE Beds: 50 **TITLE 18/19:** 0

Owner Information

CYPRESSWOOD MEMORY CARE LLC
545 E JOHN CARPENTER FWY ,#500
IRVING TX 75062
PHONE: (214) 845-4500 **FAX:** (214) 845-4501
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/14/2017

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 050403

JUST DIVINE HANDS LLC
510 ENCHANTED HOLLOW DR
SPRING **TX** 77388
Phone (281) 528-9508 **Fax**

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

JUST DIVINE HANDS LLC
510 ENCHANTED HOLLOW DR
SPRING TX 77388
PHONE: (281) 528-9508 **FAX:** (281) 350-1863
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/14/2018

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102089

LOVING CARE PERSONAL CARE HOME
23027 BERRY PINES BLVD
SPRING **TX** 77373
Phone (281) 355-0789 **Fax** (713) 699-1572

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

LOVING CARE PERSONAL CARE HOME
3910 N FWY ,STE L
HOUSTON TX 77022
PHONE: (713) 691-7437 **FAX:** (713) 699-1572
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/08/2016

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105168

MERCY ELDERLY ASSISTED LIVING INC
19002 MIRROR LAKE DR
SPRING **TX** 77388
Phone (832) 364-2273 **Fax** (281) 919-1706

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

MERCY ELDERLY ASSISTED LIVING INC
19002 MIRROR LAKE DR
SPRING TX 77388
PHONE: (832) 364-2273 **FAX:** (281) 919-1706
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/13/2016

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105499

PRECIOUS LIVING SPRING TEXAS CORPORATION
1324 LEMM #2 ROAD
SPRING **TX** 77373
Phone (832) 332-7235 **Fax**

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

PRECIOOUS LIVING SPRING TEXAS CORPORATION
1324 LEMM #2 ROAD
SPRING TX 77373
PHONE: (832) 299-6999 **FAX:** (888) 767-6398
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/22/2016

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105559

SPRING CREEK VILLAGE ASSISTED LIVING AND MEMORY CARE
20305 HOLZWARTH ROAD
SPRING **TX** 77388
Phone (281) 257-2299 **Fax** (214) 635-4766

TOTAL Lic Capacity: 128 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 48 **TITLE19:** 0
PRIVATE Beds: 128 **TITLE 18/19:** 0

Owner Information

BRIDGEWOOD VILLAGE ON SC TRS LLC
20305 HOLZWARTH RD
SPRING TX 77388
PHONE: (281) 996-0101 **FAX:** (281) 996-1141
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/09/2017

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000925

TENDER LIVING CARE
23922 LENZE RD
SPRING **TX** 77389-3507
Phone (281) 370-3720 **Fax** (281) 370-3720

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

ALEXE REVUTCHI AND PETRUTA REVUTCHI
23922 LENZE RD
SPRING TX 77389-3507
PHONE: (281) 370-3720 **FAX:** (281) 370-3720
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/16/2017

County **HARRIS** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103737

THE VILLAGE AT GLEANNLOCH FARMS
9505 NORTHPOINT BLVD
SPRING **TX** 77379
Phone (281) 430-4900 **Fax** (281) 430-4907

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 20 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

CCRC OPCO-GLEANNLOCH FARMS LLC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214
PHONE: (414) 918-5332 **FAX:** (414) 208-2118
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/17/2017

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102984

U C G P LLC
21050 NORMANDY FOREST
SPRING **TX** 77388
Phone (281) 924-7173 **Fax** (936) 588-1512

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

Owner Information

U C G P LLC
21050 NORMANDY FOREST DR
SPRING TX 77388
PHONE: (281) 924-7173 **FAX:** (936) 588-1512
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/05/2016

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 100748

UCGS LLC
231 RIDGEWOOD DR
SPRING **TX** 77386
Phone (281) 924-7173 **Fax** (936) 588-1512

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

Owner Information

UCGS LLC
231 RIDGEWOOD DR
SPRING TX 77386
PHONE: (281) 924-7173 **FAX:** (936) 588-1512
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/20/2016

County **HARRIS** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103794

UNLIMITED CARE... ASSISTED LIVING COTTAGES
515 ENCHANTED RIVER DR
SPRING **TX** 77388
Phone (713) 419-2609 **Fax** (936) 321-2795

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

GEL PARTNERSHIP INC
31 WINDFERN PL
SPRING TX 77382
PHONE: (713) 858-6821 **FAX:** (936) 321-2795
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/11/2017

County **HARRIS** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 106002

WOOD GLEN COURT ASSISTED LIVING
5000 CYPRESSWOOD DR
SPRING **TX** 77379
Phone (832) 639-8540 **Fax** (832) 693-8556

TOTAL Lic Capacity: 78 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 78 **TITLE 18/19:** 0

Owner Information

CYPRESSWOOD SENIOR LIVING LLC
5910 N CENTRAL EXPRESSWAY ,STE 1000
DALLAS TX 75206
PHONE: (214) 953-1722 **FAX:** (214) 953-0278
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/26/2017

County **HARRIS** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030231

DOWN HOME PERSONAL CARE
27521 CALVERT RD
TOMBALL **TX** 77377
Phone (281) 351-0124 **Fax** (281) 290-8593

TOTAL Lic Capacity: 15 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 15 **TITLE 18/19:** 0

Owner Information

ELLEN MANTLE
27521 CALVERT RD
TOMBALL TX 77377
PHONE: (281) 351-0124 **FAX:** (281) 290-8452
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/07/2016

County **HARRIS** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 104711

FOREVER YOUNG SENIOR LIVING LLC
609 SOUTH PINE ST
TOMBALL **TX** 77375
Phone (832) 559-8356 **Fax** (832) 559-8358

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

FOREVER YOUNG SENIOR LIVING LLC
609 SOUTH PINE ST
TOMBALL TX 77375
PHONE: (832) 559-8356 **FAX:** (832) 559-8358
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/10/2017

County **HARRIS** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000392

HARVEST HOME
520 BAKER DR
TOMBALL **TX** 77375
Phone (281) 357-5775 **Fax** (281) 351-4923

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

BAKER SENIOR CARE, LLC
1000 LEGION PLACE ,STE. 1750
ORLANDO FL 32801
PHONE: (407) 999-2400 **FAX:** (407) 999-7759
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/21/2017

County **HARRIS** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102096

INWOOD CROSSING
808 INWOOD
TOMBALL **TX** 77375
Phone (281) 475-0161 **Fax** (281) 516-9210

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 60 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

INWOOD SENIOR CARE LLC
1000 LEGION PLACE ,STE 1750
ORLANDO FL 32801
PHONE: (407) 999-2400 **FAX:** (407) 999-7759
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/21/2017

County **HARRIS** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103130

SERENITY'S HAVEN ASSISTED LIVING INC
8727 SEBER LN
TOMBALL **TX** 77375
Phone (281) 357-0827 **Fax** (281) 357-0827

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

SERENITY'S HAVEN ASSISTED LIVING INC
8911 WEST LANE
MAGNOLIA TX 77354
PHONE: (281) 732-6937 **FAX:** (281) 357-0827
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/12/2016

County **HARRIS** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 010328

SOUTHERN KNIGHTS SENIOR LIVING COMMUNITY
27919 JOHNSON RD
TOMBALL **TX** 77375
Phone (281) 351-8575 **Fax** (281) 351-1129

TOTAL Lic Capacity: 40 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 40 **TITLE 18/19:** 0

Owner Information

TOMBALL SENIOR HOUSING PARTNERS LLC
4848 LEMMON AVE #134
HIGHLAND PARK TX 75219
PHONE: (214) 219-7160 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/25/2016

County **HARRIS** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 100721

TCG TOMBALL CAMPUS LLC
1221 GRAHAM DR
TOMBALL **TX** 77375
Phone (281) 401-5415 **Fax** (281) 401-5493

TOTAL Lic Capacity: 147 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 22 **TITLE19:** 0
PRIVATE Beds: 147 **TITLE 18/19:** 0

Owner Information

TCG TOMBALL CAMPUS LLC
1200 SUMMIT AVE STE 444
FORT WORTH TX 76102
PHONE: (817) 446-4792 **FAX:** (817) 446-0923
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/25/2017

County **HARRIS** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000638

TOMBALL RETIREMENT CENTER
13415 MEDICAL COMPLEX DR
TOMBALL **TX** 77375

Phone (281) 357-4843 **Fax** (281) 357-5808

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

HSMTX/STALLONES-TOMBALL LLC
13415 MEDICAL COMPLEX DR
TOMBALL TX 77375

PHONE: (615) 896-1191 **FAX:** (615) 890-7978

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/01/2016

County **HARRISON** Reg Svcs: TYLER NW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 102204

CASCE HOUSE
2500 KARNACK HWY
MARSHALL **TX** 75672

Phone (903) 927-1191 **Fax**

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

JANICE HAYNES
2500 KARNACK HWY
MARSHALL TX 75692

PHONE: (903) 927-1191 **FAX:** (903) 927-1191

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/18/2017

County **HARRISON** Reg Svcs: TYLER SE TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 030355

MSHC REUNION INN ASSISTED LIVING LLC
2801 E TRAVIS ST
MARSHALL **TX** 75670

Phone (903) 927-2242 **Fax** (903) 927-1499

TOTAL Lic Capacity: 51 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 51 **TITLE 18/19:** 0

Owner Information

MSHC REUNION INN OF MARSHALL LLC
4939 ELIZABETH
TEXARKANA TX 75503

PHONE: (903) 832-0429 **FAX:** (903) 255-0385

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/01/2018

County **HARRISON** Reg Svcs: TYLER SE TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 000956

OAKWOOD HOUSE
2907 VICTORY DR
MARSHALL **TX** 75670

Phone (903) 935-6263 **Fax** (903) 935-6288

TOTAL Lic Capacity: 51 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 51 **TITLE 18/19:** 0

Owner Information

VERITAS INCARE, LLC
6933 CRUMPLER BLVD ,STE A
OLIVE BRANCH MS 38654

PHONE: (662) 895-1801 **FAX:** (662) 895-1804

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/01/2017

County **HARTLEY** Reg Svcs: HIGH PLAINS GERI 1 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 102470

LEGACY ASSISTED LIVING COMMUNITY
301 TEXAS BLVD
DALHART **TX** 79022

Phone (806) 244-1450 **Fax** (806) 244-1665

TOTAL Lic Capacity: 40 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 40 **TITLE 18/19:** 0

Owner Information

DALLAM-HARTLEY COUNTIES HOSPITAL DISTRICT
1411 DENVER
DALHART TX 79022

PHONE: (806) 244-8555 **FAX:** (806) 244-1665

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/07/2017

County **HAYS** Reg Svcs: TEAM V Region 07 - AUSTIN

Facility Information: **Facility ID:** 103686

PROVIDENT MEMORY CARE
645 FM 967
BUDA **TX** 78610

Phone (512) 295-5600 **Fax** (512) 296-5633

TOTAL Lic Capacity: 22 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 22 **TITLE19:** 0
PRIVATE Beds: 22 **TITLE 18/19:** 0

Owner Information

SODALIS BUDA,LLC
195 S. ACADEMY
NEW BRAUNFELS TX 78130

PHONE: (830) 624-1044 **FAX:** (830) 629-4884

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/01/2018

County **HAYS** Reg Svcs: TEAM V Region 07 - AUSTIN

Facility Information: **Facility ID:** 000573

CORE HEALTH CARE
3035 HWY 290 W
DRIPPING SPRINGS **TX** 78620
Phone (512) 894-0701 **Fax** (512) 858-5104

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information
E & J HEALTH CARE LLC
3035 US 290 W
DRIPPING SPRINGS TX 78620
PHONE: (512) 894-0801 **FAX:** (512) 858-4627
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/01/2018

County **HAYS** Reg Svcs: TEAM V Region 07 - AUSTIN

Facility Information: **Facility ID:** 103256

CORE HEALTH CARE DRAPER EXTENSION PROGRAM
400 OLD HWY 290
DRIPPING SPRINGS **TX** 78620
Phone (512) 894-0440 **Fax** (512) 858-7118

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

Owner Information
E & J HEALTH CARE LLC
3035 US 290 W
DRIPPING SPRINGS TX 78620
PHONE: (512) 894-0801 **FAX:** (512) 858-4627
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/01/2018

County **HAYS** Reg Svcs: TEAM V Region 07 - AUSTIN

Facility Information: **Facility ID:** 100976

CORE: CENTER OF REHABILITATIVE EXCELLENCE
400 OLD HWY 290
DRIPPING SPRINGS **TX** 78620
Phone (512) 894-0901 **Fax** (512) 858-1081

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information
E & J HEALTH CARE LLC
3035 US 290 W
DRIPPING SPRINGS TX 78620
PHONE: (512) 894-0801 **FAX:** (512) 858-4627
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/01/2018

County **HAYS** Reg Svcs: TEAM V Region 07 - AUSTIN

Facility Information: **Facility ID:** 000575

MENTIS NEURO HEALTH
3035 HWY 290 W
DRIPPING SPRINGS **TX** 78620
Phone (512) 894-0701 **Fax** (512) 858-5104

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information
E & J HEALTH CARE LLC
3035 US 290 W
DRIPPING SPRINGS TX 78620
PHONE: (512) 894-0801 **FAX:** (512) 858-4627
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/01/2018

County **HAYS** Reg Svcs: TEAM V Region 07 - AUSTIN

Facility Information: **Facility ID:** 105977

NEW HAVEN ASSISTED LIVING AND MEMORY CARE OF KYLE, LLC
107 CREEKSIDE TRAIL - BUILDING B
KYLE **TX** 78640
Phone (888) 774-2836 **Fax**

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information
NEW HAVEN ASSISTED LIVING OF KYLE, LLC
1919 SHIELD DR
NEW BRAUNFELS TX 78130
PHONE: (847) 976-1609 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/25/2016

County **HAYS** Reg Svcs: TEAM V Region 07 - AUSTIN

Facility Information: **Facility ID:** 105976

NEW HAVEN ASSISTED LIVING AND MEMORY CARE OF KYLE, LLC
107 CREEKSIDE TRAIL - BUILDING A
KYLE **TX** 78640
Phone (888) 774-2836 **Fax**

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information
NEW HAVEN ASSISTED LIVING OF KYLE, LLC
1919 SHIELD DR
NEW BRAUNFELS TX 78130
PHONE: (847) 976-1609 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/25/2018

County **HAYS** Reg Svcs: TEAM V Region 07 - AUSTIN

Facility Information: **Facility ID:** 105695

ORCHARD PARK OF KYLE
4701 RATCLIFFE DRIVE
KYLE **TX** 78640

Phone (512) 920-6400 **Fax** (512) 268-5304

TOTAL Lic Capacity: 141 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 80 **TITLE19:** 0
PRIVATE Beds: 141 **TITLE 18/19:** 0

Owner Information

RATCLIFF SENIOR CARE LLC
1000 LEGION PLACE ,STE 1750
ORLANDO FL 32801

PHONE: (407) 999-2400 **FAX:** (407) 999-7759

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/02/2017

County **HAYS** Reg Svcs: TEAM W Region 07 - AUSTIN

Facility Information: **Facility ID:** 050255

BROOKDALE SAN MARCOS NORTH
1720 RANCH ROAD 12
SAN MARCOS **TX** 78666

Phone (512) 392-7200 **Fax** (512) 396-3652

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 12 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

CSH SAN MARCOS LLC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214

PHONE: (414) 918-5000 **FAX:** (414) 918-6076

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/30/2016

County **HAYS** Reg Svcs: TEAM W Region 07 - AUSTIN

Facility Information: **Facility ID:** 050254

BROOKDALE SAN MARCOS NORTH
1720 RANCH ROAD 12
SAN MARCOS **TX** 78666

Phone (512) 392-7200 **Fax** (512) 396-3652

TOTAL Lic Capacity: 65 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 65 **TITLE 18/19:** 0

Owner Information

CSH SAN MARCOS LLC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214

PHONE: (414) 918-5000 **FAX:** (414) 918-6076

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/30/2017

County **HAYS** Reg Svcs: TEAM Z Region 07 - AUSTIN

Facility Information: **Facility ID:** 000743

BROOKDALE SAN MARCOS SOUTH
1401 WONDER WORLD DR
SAN MARCOS **TX** 78666

Phone (512) 396-8271 **Fax** (512) 396-8273

TOTAL Lic Capacity: 90 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 90 **TITLE 18/19:** 0

Owner Information

ESC III LP
6737 W WASHINGTON STREET ,SUITE 2300
MILWAUKEE WI 53214

PHONE: (206) 298-2909 **FAX:** (206) 301-4510

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/01/2016

County **HAYS** Reg Svcs: TEAM Z Region 07 - AUSTIN

Facility Information: **Facility ID:** 000924

BROOKDALE SAN MARCOS SOUTH
1401 WONDER WORLD DR
SAN MARCOS **TX** 78666

Phone (512) 396-8271 **Fax** (512) 396-8273

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

ESC III LP
6737 W WASHINGTON STREET ,SUITE 2300
MILWAUKEE WI 53214

PHONE: (206) 298-2909 **FAX:** (206) 301-4510

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/01/2017

County **HAYS** Reg Svcs: TEAM X Region 07 - AUSTIN

Facility Information: **Facility ID:** 000635

RESCARE PREMIER TOWN
618 W HUTCHISON
SAN MARCOS **TX** 78666

Phone (512) 396-1305 **Fax** (512) 396-1707

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

TANGRAM REHABILITATION NETWORK INC
9901 LINN STATION ROAD
LOUISVILLE KY 40223-3808

PHONE: (512) 396-1200 **FAX:** (512) 396-2024

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/15/2017

County **HAYS** Reg Svcs: TEAM X Region 07 - AUSTIN

Facility Information: **Facility ID:** 104086

SMITH HOUSE - SAN MARCOS COMMUNITY LIVING PROGRAM
119 SMITH LN
SAN MARCOS **TX** 78666
Phone (512) 878-8755 **Fax** (512) 878-0391

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

THERAPEUTIC COMMUNITIES LLC
PO BOX 705
SAN MARCOS TX 78667
PHONE: (512) 567-1704 **FAX:** (512) 357-4025
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/04/2018

County **HAYS** Reg Svcs: TEAM V Region 07 - AUSTIN

Facility Information: **Facility ID:** 103585

SODALIS ELDER LIVING SAN MARCOS I
1001 CREPE MYRTLE DR
SAN MARCOS **TX** 78666
Phone (830) 624-1044 **Fax** (830) 629-4884

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

ALZCARE SAN MARCOS LLC
195 S ACADEMY
NEW BRAUNFELS TX 78130
PHONE: (830) 624-1044 **FAX:** (830) 629-4884
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/01/2017

County **HAYS** Reg Svcs: TEAM W Region 07 - AUSTIN

Facility Information: **Facility ID:** 000974

WIMBERLEY LIFE CARE
845 E SUMMIT DR
WIMBERLEY **TX** 78676
Phone (512) 847-5676 **Fax** (512) 847-6577

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

JANICE M BREEZE
P O BOX 307
WIMBERLEY TX 78676
PHONE: (512) 847-5676 **FAX:** (512) 847-6577
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/01/2016

County **HEMPHILL** Reg Svcs: HIGH PLAINS GERI 1 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 105612

MESA VIEW
1 TEAS CIRCLE
CANADIAN **TX** 79014
Phone (806) 323-6422 **Fax** (806) 323-8109

TOTAL Lic Capacity: 40 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 40 **TITLE 18/19:** 0

Owner Information

HEMPHILL COUNTY HOSPITAL DISTRICT
1020 S 4TH ST
CANADIAN TX 79014
PHONE: (806) 323-6422 **FAX:** (806) 323-8061
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/18/2017

County **HENDERSON** Reg Svcs: TYLER SW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 000984

LAKELAND HOUSE
213 CAYUGA DR
ATHENS **TX** 75751
Phone (903) 677-1272 **Fax** (903) 677-4824

TOTAL Lic Capacity: 52 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 52 **TITLE 18/19:** 0

Owner Information

VERITAS INCARE, LLC
6933 CRUMPLER BLVD ,STE A
OLIVE BRANCH MS 38654
PHONE: (662) 895-1801 **FAX:** (662) 895-1804
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/01/2017

County **HENDERSON** Reg Svcs: TYLER SW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 100049

OAK WOOD PLACE
603 WOOD ST
ATHENS **TX** 75751
Phone (903) 675-2002 **Fax** (903) 675-5223

TOTAL Lic Capacity: 100 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 100 **TITLE 18/19:** 0

Owner Information

M H P PARTNERSHIP LTD
607 E TYLER ,STE 113
ATHENS TX 75751
PHONE: (903) 677-2043 **FAX:** (903) 677-2933
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/01/2017

County **HENDERSON** Reg Svcs: TYLER SW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 105253

OAK WOOD PLACE - B
603 WOOD STREET
ATHENS **TX** 75751

Phone (903) 675-2002 **Fax** (903) 677-2933

TOTAL Lic Capacity: 50 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 50 **TITLE 18/19:** 0

Owner Information

OWP - B, L.P.
607 E. TYLER STREET ,SUITE 113
ATHENS TX 75751

PHONE: (903) 677-2043 **FAX:** (903) 677-2933

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/29/2017

County **HENDERSON** Reg Svcs: TYLER SW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 000975

CEDARVIEW PLACE
322 E MAIN ST
GUN BARREL CITY **TX** 75147

Phone (903) 887-0236 **Fax** (903) 887-7619

TOTAL Lic Capacity: 51 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 51 **TITLE 18/19:** 0

Owner Information

CEDARVIEW AID OPCO LLC
301 COMMERCE STREET ,STE 3300
FORT WORT TX 76102

PHONE: (415) 995-5135 **FAX:** (415) 995-3478

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/11/2017

County **HENDERSON** Reg Svcs: TYLER SW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 105777

ARABELLA OF ATHENS ASSISTED LIVING AND MEMORY CARE
413 GIBSON RD
WALTON **TX** 75751

Phone (903) 675-1995 **Fax** (903) 566-8506

TOTAL Lic Capacity: 66 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 24 **TITLE19:** 0
PRIVATE Beds: 66 **TITLE 18/19:** 0

Owner Information

ARABELLA RETIREMENT OF ATHENS LLC
413 GIBSON RD
ATHENS TX 75751

PHONE: (903) 675-1995 **FAX:** (903) 566-8506

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/24/2017

County **HIDALGO** Reg Svcs: CORPUS CHRISTI 12 Region 11 - CORPUS CHRISTI

Facility Information: **Facility ID:** 106093

DONNA ASSISTED LIVING
522 N. MAIN STREET
DONNA **TX** 78537

Phone (956) 461-2240 **Fax** (844) 270-6033

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

DONNA ASSISTED LIVING INC
522 N MAIN ST
DONNA TX 78537

PHONE: (956) 472-5420 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/26/2017

County **HIDALGO** Reg Svcs: CORPUS CHRISTI 10 Region 11 - CORPUS CHRISTI

Facility Information: **Facility ID:** 106165

NEW LIFE ASSISTED LIVING
302 NORTH D. SALINAS BLVD
DONNA **TX** 78537

Phone (956) 377-5465 **Fax** (956) 377-5673

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

ELUGO LLC
2115 LOTT ROAD
DONNA TX 78537

PHONE: (956) 464-7741 **FAX:** (956) 464-0007

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/01/2017

County **HIDALGO** Reg Svcs: CORPUS CHRISTI 12 Region 11 - CORPUS CHRISTI

Facility Information: **Facility ID:** 030074

THE BRIDGES AT EDINBURG
5208 S SUGAR RD
EDINBURG **TX** 78539

Phone (956) 782-9906 **Fax** (956) 782-2070

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

ASSISTED LIVING PARTNERSHIP I LTD
5208 S SUGAR RD
EDINBURG TX 78539

PHONE: (956) 782-9882 **FAX:** (956) 782-2070

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/06/2017

County **HIDALGO** Reg Svcs: CORPUS CHRISTI 12 Region 11 - CORPUS CHRISTI

Facility Information: **Facility ID:** 010225

THE BRIDGES AT EDINBURG BLDG B
5208 S SUGAR RD
EDINBURG **TX** 78539

Phone (956) 782-9882 **Fax** (956) 782-2070

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

ASSISTED LIVING PARTNERSHIP I LTD
5208 S SUGAR RD
EDINBURG TX 78539

PHONE: (956) 782-9882 **FAX:** (956) 782-2070

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/10/2017

County **HIDALGO** Reg Svcs: CORPUS CHRISTI 12 Region 11 - CORPUS CHRISTI

Facility Information: **Facility ID:** 104700

THE GOOD LIFE ASSISTED LIVING
521 S 12TH AVE.
EDINBURG **TX** 78539

Phone (956) 380-0461 **Fax** (956) 287-4744

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

GABRIELA AGUILLON
422 E SAMANO
EDINBURG TX 78539

PHONE: (956) 380-0461 **FAX:** (956) 287-4744

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/14/2017

County **HIDALGO** Reg Svcs: CORPUS CHRISTI 12 Region 11 - CORPUS CHRISTI

Facility Information: **Facility ID:** 105027

BARCELONA ASSISTED LIVING
712 E JACKSON AVENUE
MCALLEN **TX** 78501

Phone (956) 682-8886 **Fax** (956) 682-8886

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

MARIO SAN ROMAN
2304 SILVERADO NORTH
PALMHURST TX 78573

PHONE: (956) 571-7465 **FAX:** (956) 682-8886

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/05/2018

County **HIDALGO** Reg Svcs: CORPUS CHRISTI 12 Region 11 - CORPUS CHRISTI

Facility Information: **Facility ID:** 030409

BILTMORE ASSISTED LIVING
700 E JACKSON AVE
MCALLEN **TX** 78501

Phone (956) 682-5659 **Fax** (956) 682-3985

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

MARIO SAN ROMAN
700 E JACKSON AVE
MCALLEN TX 78501

PHONE: (956) 682-3985 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/01/2018

County **HIDALGO** Reg Svcs: CORPUS CHRISTI 12 Region 11 - CORPUS CHRISTI

Facility Information: **Facility ID:** 104654

MJA ASSITED LIVING LLC
4721 BUDDY OWENS BLVD # F
MCALLEN **TX** 78504

Phone (956) 994-0025 **Fax** (956) 994-0114

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

Owner Information

MJA ASSISTED LIVING LLC
4721 BUDDY OWENS BLVD #F
MCALLEN TX 78504

PHONE: (956) 994-0025 **FAX:** (956) 994-0114

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/14/2017

County **HIDALGO** Reg Svcs: CORPUS CHRISTI 12 Region 11 - CORPUS CHRISTI

Facility Information: **Facility ID:** 102866

CROSSROADS ASSISTED LIVING
9500 HWY 107
MISSION **TX** 78574

Phone (956) 583-8013 **Fax** (956) 583-5120

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

RGV ELDER HEALTH SYSTEMS INC
PO BOX 1136
MISSION TX 78573

PHONE: (956) 583-8013 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/01/2017

County **HIDALGO** Reg Svcs: CORPUS CHRISTI 12 Region 11 - CORPUS CHRISTI

Facility Information: **Facility ID:** 100787

THE BRIDGES AT MISSION
1201 ST CLAIRE BLVD
MISSION **TX** 78572
Phone (956) 519-9800 **Fax** (956) 519-7766

TOTAL Lic Capacity: 40 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 40 **TITLE19:** 0
PRIVATE Beds: 40 **TITLE 18/19:** 0

Owner Information

ASSISTED LIVING PARTNERSHIP II LTD
1201 ST CLAIRE BLVD
MISSION TX 78572
PHONE: (956) 519-9800 **FAX:** (956) 519-7766
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/20/2017

County **HIDALGO** Reg Svcs: CORPUS CHRISTI 12 Region 11 - CORPUS CHRISTI

Facility Information: **Facility ID:** 104822

THE BUNGALOWS AT WATERFORD GARDENS LLC
1522 E GRIFFIN PARKWAY
MISSION **TX** 78572
Phone (956) 584-5565 **Fax** (956) 585-7314

TOTAL Lic Capacity: 15 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 15 **TITLE 18/19:** 0

Owner Information

THE BUNGALOWS AT WATERFORD GARDENS LLC
1522 E GRIFFIN PARKWAY
MISSION TX 78572
PHONE: (956) 584-5565 **FAX:** (956) 585-7314
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/28/2017

County **HIDALGO** Reg Svcs: CORPUS CHRISTI 12 Region 11 - CORPUS CHRISTI

Facility Information: **Facility ID:** 101938

WATERFORD GARDENS GUEST HOUSE
1522 E GRIFFIN PKWY
MISSION **TX** 78572
Phone (956) 519-9064 **Fax**

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

MISSION GUEST HOUSE LLC
1522 E GRIFFIN PKWY
MISSION TX 78572
PHONE: (956) 519-9064 **FAX:** (956) 583-7314
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/28/2017

County **HIDALGO** Reg Svcs: CORPUS CHRISTI 12 Region 11 - CORPUS CHRISTI

Facility Information: **Facility ID:** 100526

WATERFORD GARDENS ON GRIFFIN PARKWAY
1522 E GRIFFIN PKWY
MISSION **TX** 78572
Phone (956) 584-1984 **Fax** (956) 585-7314

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

SENIOR GARDENS LLC
1522 E GRIFFIN PKWY
MISSION TX 78572
PHONE: (956) 584-1964 **FAX:** (956) 585-7314
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/24/2017

County **HIDALGO** Reg Svcs: CORPUS CHRISTI 12 Region 11 - CORPUS CHRISTI

Facility Information: **Facility ID:** 105962

THE GARDENS AT BROOK RIDGE
1201 W RIDGE RD
PHARR **TX** 78577
Phone (956) 685-1520 **Fax** (956) 961-4620

TOTAL Lic Capacity: 65 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 30 **TITLE19:** 0
PRIVATE Beds: 65 **TITLE 18/19:** 0

Owner Information

BROOK RIDGE GARDENS LP
807 SW INDUSTRIAL WAY
BEND OR 97702
PHONE: (541) 323-3456 **FAX:** (541) 323-3457
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/26/2017

County **HIDALGO** Reg Svcs: CORPUS CHRISTI 12 Region 11 - CORPUS CHRISTI

Facility Information: **Facility ID:** 000703

JOHN KNOX VILLAGE PERSONAL CARE
1300 S BORDER
WESLACO **TX** 78596
Phone (956) 968-4575 **Fax** (956) 968-4570

TOTAL Lic Capacity: 32 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 32 **TITLE 18/19:** 0

Owner Information

JOHN KNOX VILLAGES OF THE LOWER RIO GRANDE VALLEY INC
1300 S BORDER
WESLACO TX 78596
PHONE: (956) 968-4575 **FAX:** (956) 968-4570
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/04/2018

County **HILL** Reg Svcs: WACO Region 07 - AUSTIN

Facility Information: **Facility ID:** 010269

WESLEY HOUSE
110 OUTLET DR
HILLSBORO **TX** 76645

Phone (254) 582-0030 **Fax** (254) 580-1608

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

WESLEY PARTNERS SENIOR LIVING, LLC
110 DALLAS ST
MT. VERNON TX 75457

PHONE: (903) 537-4116 **FAX:** (903) 270-6227

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/02/2017

County **HILL** Reg Svcs: WACO Region 07 - AUSTIN

Facility Information: **Facility ID:** 103976

CCRC ASSISTED LIVING, LLC
4773 FM 933 N
WHITNEY **TX** 76692

Phone (254) 694-2272 **Fax** (254) 694-4253

TOTAL Lic Capacity: 50 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 50 **TITLE 18/19:** 0

Owner Information

CCRC ASSISTED LIVING LLC
4773 FM 933 N
WHITNEY TX 76692

PHONE: (254) 694-2272 **FAX:** (254) 694-4253

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 06/29/2017

County **HOCKLEY** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 102916

BEEHIVE HOMES OF LEVELLAND
140 COUNTY ROAD
LEVELLAND **TX** 79336

Phone (806) 543-9852 **Fax** (806) 894-3987

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 14 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

LEVELLAND HIVE LLC
140 COUNTY ROAD
LEVELLAND TX 79336

PHONE: (806) 543-9852 **FAX:** (806) 894-3987

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/22/2018

County **HOCKLEY** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 000511

HICKORY PLACE
717 SOUTH ALAMO RD
LEVELLAND **TX** 79336

Phone (806) 894-1722 **Fax** (806) 894-3330

TOTAL Lic Capacity: 36 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 36 **TITLE 18/19:** 0

Owner Information

HICKORY AID OPCO LLC
330 N WABASH AVE ,STE 3700
CHICAGO IL 60611

PHONE: (312) 725-7050 **FAX:** (312) 332-5902

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/11/2017

County **HOOD** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102889

ARBOR HOUSE OF GRANBURY
900 AUTUMN RIDGE DR
GRANBURY **TX** 76048

Phone (817) 573-7720 **Fax**

TOTAL Lic Capacity: 52 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 52 **TITLE19:** 0
PRIVATE Beds: 52 **TITLE 18/19:** 0

Owner Information

GRANBURY TX ARBOR HOUSE LP
2401 TEE CIRCLE ,STE 103
NORMAN OK 73069

PHONE: (405) 801-2879 **FAX:** (405) 360-3301

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/06/2018

County **HOOD** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102291

COURTYARDS AT LAKE GRANBURY
801 CALINCO DR
GRANBURY **TX** 76048

Phone (817) 736-4300 **Fax** (817) 736-4299

TOTAL Lic Capacity: 107 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 14 **TITLE19:** 0
PRIVATE Beds: 107 **TITLE 18/19:** 0

Owner Information

CSL GRANBURY LLC
14160 DALLAS PKWY ,STE 300
DALLAS TX 75254

PHONE: (972) 308-8366 **FAX:** (972) 387-8216

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/21/2016

County **HOOD** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101783

QUAIL PARK ASSISTED LIVING
2310 PALUXY HWY
GRANBURY **TX** 76048
Phone (817) 279-9259 **Fax** (817) 579-7073

TOTAL Lic Capacity: 22 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 22 **TITLE19:** 0
PRIVATE Beds: 22 **TITLE 18/19:** 0

Owner Information

LIVING CARE GRANBURY LP
146 N CANAL ST ,STE 220
SEATTLE WA 98103
PHONE: (206) 441-1770 **FAX:** (206) 441-1977
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/01/2018

County **HOOD** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106013

QUAIL PARK RETIREMENT VILLAGE OF GRANBURY
2310 PALUXY HWY
GRANBURY **TX** 76048
Phone (817) 279-9259 **Fax** (817) 579-7073

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

LIVING CARE GRANBURY LP
146 N CANAL ST ,STE 220
SEATTLE WA 98103
PHONE: (206) 441-1770 **FAX:** (206) 441-1977
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/19/2016

County **HOOD** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104024

TCG GRANBURY CAMPUS LLC
101 WATERMARK BLVD
GRANBURY **TX** 76048
Phone (817) 573-9505 **Fax** (817) 579-6147

TOTAL Lic Capacity: 55 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 20 **TITLE19:** 0
PRIVATE Beds: 55 **TITLE 18/19:** 0

Owner Information

TCG GRANBURY CAMPUS LLC
1200 SUMMIT AVE ,SUITE 444
FORT WORTH TX 76102
PHONE: (817) 446-4792 **FAX:** (817) 446-0923
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/31/2017

County **HOOD** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104023

TCG GRANBURY CAMPUS LLC
101 WATERMARK BLVD
GRANBURY **TX** 76048
Phone (817) 573-3434 **Fax** (817) 573-3430

TOTAL Lic Capacity: 44 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 44 **TITLE 18/19:** 0

Owner Information

TCG GRANBURY CAMPUS LLC
1200 SUMMIT AVE ,SUITE 444
FORT WORTH TX 76102
PHONE: (817) 446-4792 **FAX:** (817) 446-0923
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/15/2017

County **HOOD** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000569

THE OAKS OF GRANBURY
1017 LIPAN HWY
GRANBURY **TX** 76048
Phone (817) 279-8885 **Fax** (817) 579-1908

TOTAL Lic Capacity: 48 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 48 **TITLE 18/19:** 0

Owner Information

GRANBURY II ENTERPRISES LLC
1701 RIVER RUN ,STE 304
FORT WORTH TX 76107
PHONE: (817) 348-8841 **FAX:** (817) 348-0466
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/01/2016

County **HOPKINS** Reg Svcs: TYLER NW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 000996

HOPKINS PLACE
890 CAMP ST
SULPHUR SPRINGS **TX** 75482
Phone (903) 439-1202 **Fax** (903) 885-6697

TOTAL Lic Capacity: 63 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 63 **TITLE 18/19:** 0

Owner Information

HOPKINS AID OPCO LLC
301 COMMERCE ST ,STE 3300
FORT WORTH TX 76102
PHONE: (817) 871-4000 **FAX:** (817) 871-4001
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/11/2017

County **HOPKINS** Reg Svcs: TYLER NW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 000950

WESLEY HOUSE
1044 CHURCH ST
SULPHUR SPRINGS **TX** 75482
Phone (903) 439-0529 **Fax** (903) 439-0549

TOTAL Lic Capacity: 42 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 42 **TITLE 18/19:** 0

Owner Information

WESLEY PARTNERS LTD
PO BOX 612
MOUNT VERNON TX 75457
PHONE: (903) 537-4116 **FAX:** (903) 270-6227
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/01/2016

County **HOPKINS** Reg Svcs: TYLER NW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 105208

WESLEY HOUSE
1044 CHURCH STREET
SULPHUR SPRINGS **TX** 75482
Phone (903) 439-0529 **Fax** (903) 439-0549

TOTAL Lic Capacity: 28 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 28 **TITLE19:** 0
PRIVATE Beds: 28 **TITLE 18/19:** 0

Owner Information

WESLEY PARTNERS LTD
PO BOX 612
MOUNT VERNON TX 75457
PHONE: (903) 537-4116 **FAX:** (903) 270-6227
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/12/2018

County **HOUSTON** Reg Svcs: NACOGDOCHES GERIATRIC Region 05 - BEAUMONT

Facility Information: **Facility ID:** 000617

ENCHANTED PINES
1154 E LOOP 304
CROCKETT **TX** 75835
Phone (936) 544-5065 **Fax** (936) 546-2694

TOTAL Lic Capacity: 36 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 36 **TITLE 18/19:** 0

Owner Information

ENCHANTED PINES INC
1154 E LOOP 304
CROCKETT TX 75835
PHONE: (936) 544-5065 **FAX:** (936) 546-5674
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/04/2018

County **HOWARD** Reg Svcs: MIDLAND GERIATRIC Region 09 - ABILENE

Facility Information: **Facility ID:** 000490

MARCY PLACE
2301 WASSON
BIG SPRING **TX** 79720
Phone (432) 268-9041 **Fax** (432) 268-9092

TOTAL Lic Capacity: 44 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 44 **TITLE 18/19:** 0

Owner Information

MARCY AID OPCO LLC
330 N WABASH ,STE 3700
CHICAGO IL 60611
PHONE: (312) 725-7000 **FAX:** (312) 332-5300
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/11/2017

County **HUNT** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000952

COUNTRY HOME ESTATES
2927 MONROE
COMMERCE **TX** 75428
Phone (903) 886-7754 **Fax** (903) 886-8395

TOTAL Lic Capacity: 55 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 55 **TITLE 18/19:** 0

Owner Information

DRAUGHN & SONS LC
PO BOX 130
COMMERCE TX 75428
PHONE: (903) 886-7754 **FAX:** (903) 886-8395
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/24/2017

County **HUNT** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000826

COLONIAL LODGE
3600 STANFORD ST
GREENVILLE **TX** 75401
Phone (903) 454-6636 **Fax** (903) 454-8182

TOTAL Lic Capacity: 55 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 55 **TITLE 18/19:** 0

Owner Information

SHAMOR INC
3600 STANFORD ST
GREENVILLE TX 75401
PHONE: (903) 454-6636 **FAX:** (903) 454-8182
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/17/2016

County **HUNT** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000986

HARRISON HOUSE
6400 JACK FINNEY BLVD
GREENVILLE **TX** 75401
Phone (903) 455-0440 **Fax** (903) 455-4090
TOTAL Lic Capacity: 51 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 51 **TITLE 18/19:** 0

Owner Information

VERITAS INCARE, LLC
6933 CRUMPLER BLVD ,STE A
OLIVE BRANCH MS 38654
PHONE: (662) 895-1801 **FAX:** (662) 895-1804
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/01/2017

County **HUNT** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101527

THE LODGE OF COLONIAL
3590 STANFORD ST
GREENVILLE **TX** 75401
Phone (903) 454-6636 **Fax** (903) 454-8182
TOTAL Lic Capacity: 59 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 31 **TITLE19:** 0
PRIVATE Beds: 59 **TITLE 18/19:** 0

Owner Information

SHAMOR INC
3600 STANFORD ST
GREENVILLE TX 75401
PHONE: (903) 454-6636 **FAX:** (903) 454-8182
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/13/2018

County **HUNT** Reg Svcs: TEAM 1 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000650

INDIVIDUAL CARE OF TEXAS INC
1655 PRIVATE RD 2530
QUINLAN **TX** 75474-1810
Phone (903) 356-4526 **Fax** (903) 356-4544
TOTAL Lic Capacity: 100 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 100 **TITLE 18/19:** 0

Owner Information

INDIVIDUAL CARE OF TEXAS INC
1655 PRIVATE RD
QUINLAN TX 75474-1810
PHONE: (903) 356-4526 **FAX:** (972) 771-4860
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/30/2016

County **HUTCHINSON** Reg Svcs: HIGH PLAINS GERI 1 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 000957

GOLDEN YEARS ASSISTED LIVING CENTER INC
100 N BRYAN ST
BORGER **TX** 79007
Phone (806) 274-5994 **Fax** (806) 274-5992
TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

GOLDEN YEARS ASSISTED LIVING CENTER INC
100 N BRYAN ST
BORGER TX 79007
PHONE: (806) 274-5994 **FAX:** (806) 274-5992
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/22/2017

County **JACK** Reg Svcs: WICHITA FALLS GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 000811

GREYSTONE PARK RETIREMENT & ASSISTED LIVING
1116 STATE HWY 148
JACKSBORO **TX** 76458
Phone (940) 567-3057 **Fax** (940) 567-5782
TOTAL Lic Capacity: 45 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 45 **TITLE 18/19:** 0

Owner Information

JACKSBORO ASSISTED LIVING INC
1116 STATE HWY 148
JACKSBORO TX 76458
PHONE: (940) 567-3057 **FAX:** (940) 567-5782
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/16/2017

County **JACKSON** Reg Svcs: TEAM V Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 030178

THE DUGGER HOUSE
309 S PUMPHREY
EDNA **TX** 77957
Phone (361) 782-3540 **Fax** (361) 782-0882
TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

THE DUGGER HOUSE INC
309 S PUMPHREY
EDNA TX 77957
PHONE: (361) 782-8834 **FAX:** (361) 578-6695
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/18/2017

County **JACKSON** Reg Svcs: TEAM V Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 000764

THE HOME PLACE
105 S SIXTH ST
GANADO **TX** 77962
Phone (361) 771-2228 **Fax** (361) 782-0882
TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

THE DUGGER HOUSE INC
309 S PUMPHREY
EDNA TX 77957
PHONE: (361) 782-8834 **FAX:** (361) 578-6695
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/01/2016

County **JASPER** Reg Svcs: BEAUMONT GERIATRIC Region 05 - BEAUMONT

Facility Information: **Facility ID:** 100966

ROSEWOOD ASSISTED LIVING CENTER II
8670 HWY 96 S
JASPER **TX** 75951
Phone (409) 489-1402 **Fax** (409) 383-0584
TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

ROSEWOOD ASSISTED-LIVING CENTER INC
1010 HWY 87 S
NEWTON TX 75966
PHONE: (409) 379-2047 **FAX:** (409) 379-2048
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/08/2017

County **JASPER** Reg Svcs: BEAUMONT GERIATRIC Region 05 - BEAUMONT

Facility Information: **Facility ID:** 030235

ROSEWOOD ASSISTED LIVING CENTER INC
41 CHESTNUT CIR
JASPER **TX** 75951
Phone (409) 384-4533 **Fax** (409) 381-8862
TOTAL Lic Capacity: 11 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 11 **TITLE 18/19:** 0

Owner Information

ROSEWOOD ASSISTED-LIVING CENTER INC
1010 HWY 87 S
NEWTON TX 75966
PHONE: (409) 379-2047 **FAX:** (409) 379-2048
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/20/2018

County **JEFFERSON** Reg Svcs: BEAUMONT GERIATRIC Region 05 - BEAUMONT

Facility Information: **Facility ID:** 000636

ATRIA COLLIER PARK
4650 COLLIER ST
BEAUMONT **TX** 77706
Phone (409) 899-4800 **Fax** (409) 899-3030
TOTAL Lic Capacity: 71 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 71 **TITLE 18/19:** 0

Owner Information

ATRIA COLLIER PARK LLC
10350 ORMSBY PARK PL ,STE 300
LOUISVILLE KY 40223
PHONE: (502) 779-4700 **FAX:** (502) 779-4749
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/29/2017

County **JEFFERSON** Reg Svcs: BEAUMONT GERIATRIC Region 05 - BEAUMONT

Facility Information: **Facility ID:** 000325

BROOKDALE DOWLEN OAKS
2250 N DOWLEN RD
BEAUMONT **TX** 77706
Phone (409) 866-8090 **Fax** (409) 866-2929
TOTAL Lic Capacity: 99 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 32 **TITLE19:** 0
PRIVATE Beds: 99 **TITLE 18/19:** 0

Owner Information

ESC IV LP
111 WESTWOOD PL ,STE 400
BRENTWOOD TN 37027
PHONE: (414) 918-5441 **FAX:** (414) 918-5054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/30/2017

County **JEFFERSON** Reg Svcs: BEAUMONT GERIATRIC Region 05 - BEAUMONT

Facility Information: **Facility ID:** 100189

CALDER WOODS
7080 CALDER
BEAUMONT **TX** 77706
Phone (409) 861-1123 **Fax** (409) 861-1002
TOTAL Lic Capacity: 54 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 54 **TITLE 18/19:** 0

Owner Information

BUCKNER RETIREMENT SERVICES INC
700 N PEARL ST ,STE 1200
DALLAS TX 75201
PHONE: (214) 758-8000 **FAX:** (214) 758-8153
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/27/2018

County **JEFFERSON** Reg Svcs: BEAUMONT GERIATRIC Region 05 - BEAUMONT

Facility Information: **Facility ID:** 100980

LENROSE PLACE
5395 ROSE LN
BEAUMONT **TX** 77708

Phone (409) 347-2497 **Fax** (409) 347-2497

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

REYNALDO C. MEDINA
6209 SHERIDAN OAKS DR
BEAUMONT TX 77706

PHONE: (409) 363-4171 **FAX:** (409) 225-5408

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/09/2017

County **JEFFERSON** Reg Svcs: BEAUMONT GERIATRIC Region 05 - BEAUMONT

Facility Information: **Facility ID:** 000477

LUCAS PLACE
2910 TOCCOA RD
BEAUMONT **TX** 77703

Phone (409) 896-2332 **Fax** (409) 896-2539

TOTAL Lic Capacity: 58 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 58 **TITLE 18/19:** 0

Owner Information

LUCAS AID OPCO LLC
330 N. WABASH ,SUITE 3700
CHICAGO IL 60611

PHONE: (312) 725-7000 **FAX:** (312) 332-5300

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/11/2017

County **JEFFERSON** Reg Svcs: BEAUMONT GERIATRIC Region 05 - BEAUMONT

Facility Information: **Facility ID:** 105185

PELICAN BAY
2501 S MAJOR DR
BEAUMONT **TX** 77707

Phone (409) 962-4450 **Fax** (409) 962-9253

TOTAL Lic Capacity: 107 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 28 **TITLE19:** 0
PRIVATE Beds: 107 **TITLE 18/19:** 0

Owner Information

PELICAN ASSISTED LIVING, LLC
4500 MAIN AVE
GROVES TN 77619

PHONE: (409) 962-0910 **FAX:** (409) 962-9253

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/12/2016

County **JEFFERSON** Reg Svcs: BEAUMONT GERIATRIC Region 05 - BEAUMONT

Facility Information: **Facility ID:** 000418

SERENITY ASSISTED CARE LIVING
1945 PENNSYLVANIA AVE
BEAUMONT **TX** 77701

Phone (409) 833-1989 **Fax** (409) 835-3499

TOTAL Lic Capacity: 25 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 25 **TITLE 18/19:** 0

Owner Information

SERENITY ASSISTED CARE LIVING LLC
3449 PLATL AVE P
PORT ARTHUR TX 77640

PHONE: (409) 985-2427 **FAX:** (409) 984-9226

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/01/2016

County **JEFFERSON** Reg Svcs: BEAUMONT GERIATRIC Region 05 - BEAUMONT

Facility Information: **Facility ID:** 105237

HOLLAND PLACE SENIOR LIVING LLC
109 7TH AVENUE
NEDERLAND **TX** 77627

Phone (409) 719-1004 **Fax** (409) 724-1930

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

HOLLAND PLACE SENIOR LIVING LLC
109 7TH AVENUE
NEDERLAND TX 77627

PHONE: (409) 719-1004 **FAX:** (409) 724-1930

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/28/2016

County **JEFFERSON** Reg Svcs: BEAUMONT GERIATRIC Region 05 - BEAUMONT

Facility Information: **Facility ID:** 000480

ROSE PLACE
8214 ANCHOR DR
PORT ARTHUR **TX** 77642

Phone (409) 722-3423 **Fax** (409) 722-4796

TOTAL Lic Capacity: 58 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 58 **TITLE 18/19:** 0

Owner Information

ROSE AID OPCO LLC
330 N WABASH ,STE 3700
CHICAGO IL 60611

PHONE: (312) 725-7000 **FAX:** (312) 332-5300

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/11/2017

County **JOHNSON** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106182

HEARTIS CLEBURNE
902 WALTER HOLIDAY DRIVE
CLEBURNE **TX** 76033
Phone (817) 645-8000 **Fax**

TOTAL Lic Capacity: 94 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 35 **TITLE19:** 0
PRIVATE Beds: 94 **TITLE 18/19:** 0

Owner Information

CLEBURNE AL PARTNERS LP
5910 N CENTRAL EXPRESSWAY ,SUITE 200
DALLAS TX 75206
PHONE: (214) 916-5750 **FAX:** (469) 547-5422
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/29/2017

County **JOHNSON** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102894

SANTA FE TRAILS ASSISTED LIVING AND MEMORY CARE COMMUNITY
402 COLONIAL DR
CLEBURNE **TX** 76033
Phone (817) 645-0785 **Fax** (817) 645-3237

TOTAL Lic Capacity: 70 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 70 **TITLE 18/19:** 0

Owner Information

CSL S CLEBURNE LLC
14160 DALLAS PKWY ,STE 300
DALLAS TX 75254
PHONE: (972) 308-8366 **FAX:** (972) 387-8216
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/10/2016

County **JOHNSON** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000664

WREN HOUSE
814 WOODARD AVE
CLEBURNE **TX** 76031
Phone (817) 517-6170 **Fax** (817) 645-0290

TOTAL Lic Capacity: 53 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 53 **TITLE 18/19:** 0

Owner Information

WREN AID OPCO LLC
330 N WABASH ,STE 3700
CHICAGO IL 60611
PHONE: (312) 725-7000 **FAX:** (312) 332-5300
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/11/2017

County **JOHNSON** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101822

THE GARDENS AT CHISHOLM TRAIL
513 OLD BETSY RD.
KEENE **TX** 76059
Phone (817) 556-9100 **Fax** (817) 556-0742

TOTAL Lic Capacity: 36 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 36 **TITLE19:** 0
PRIVATE Beds: 36 **TITLE 18/19:** 0

Owner Information

CHISHOLM TRAIL ESTATES INC.
513 OLD BETSY RD.
KEENE TX 76059
PHONE: (817) 556-9100 **FAX:** (817) 556-0742
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/17/2017

County **JONES** Reg Svcs: ABILENE GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 103374

COUNTRY ELEGANCE
1700 COLUMBIA STREET
STAMFORD **TX** 79553
Phone (325) 773-5511 **Fax** (325) 773-5522

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

JONES COUNTY REGIONAL HEALTHCARE SYSTEM
1601 COLUMBIA STREET
STAMFORD TX 79553
PHONE: (325) 773-4711 **FAX:** (325) 773-3781
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/09/2018

County **KAUFMAN** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105514

THREE FORKS SENIOR LIVING OF FORNEY
335 FM 548
FORNEY **TX** 75126
Phone (972) 552-3426 **Fax**

TOTAL Lic Capacity: 76 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 32 **TITLE19:** 0
PRIVATE Beds: 76 **TITLE 18/19:** 0

Owner Information

FORNEY SENIOR LIVING, LLC
5910 N CENTRAL EXPRESSWAY ,STE1000
DALLAS TX 75206
PHONE: (214) 953-1722 **FAX:** (214) 953-0278
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/08/2017

County **KAUFMAN** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103527

HICKORY SQUARE RETIREMENT CENTER
108 W HICKORY
KAUFMAN **TX** 75142
Phone (972) 962-3359 **Fax** (972) 486-4880

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

ROSEHAVEN RETIREMENT RESIDENCES INC
108 W HICKORY STREET 9TH ST
KAUFMAN TX 75142
PHONE: (214) 288-5887 **FAX:** (972) 486-4880
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/29/2017

County **KAUFMAN** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 010341

ROSEHAVEN RETIREMENT INN
102 E 9TH ST
KAUFMAN **TX** 75142
Phone (972) 932-5882 **Fax** (972) 486-4880

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

ROSEHAVEN RETIREMENT RESIDENCES INC
108 W HICKORY STREET 9TH ST
KAUFMAN TX 75142
PHONE: (214) 288-5887 **FAX:** (972) 486-4880
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/01/2018

County **KAUFMAN** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 100136

LIFE OPEN HEART OPEN HOME, INC
9422 E US HWY 80
TERRELL **TX** 75161
Phone (972) 551-3155 **Fax** (972) 551-3155

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

Owner Information

LIFE OPEN HEART OPEN HOME INC
9422 E US HWY 80
TERRELL TX 75161
PHONE: (972) 551-3155 **FAX:** (972) 551-3155
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/30/2016

County **KAUFMAN** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101009

MORNING DOVE INC DBA COLONIAL LODGE
202 WEST BRITISH FLYING SCHOOL BLVD
TERRELL **TX** 75160
Phone (972) 563-1043 **Fax** (972) 563-9036

TOTAL Lic Capacity: 80 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 80 **TITLE 18/19:** 0

Owner Information

MORNING DOVE INC
PO BOX 4
PARIS TX 75461
PHONE: (903) 785-4152 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/03/2016

County **KAUFMAN** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030406

ROSEHAVEN RETIREMENT INN
1010 ROSEHILL RD
TERRELL **TX** 75160
Phone (972) 563-2399 **Fax** (972) 486-4880

TOTAL Lic Capacity: 30 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 30 **TITLE 18/19:** 0

Owner Information

ROSEHAVEN RETIREMENT RESIDENCES INC
108 W HICKORY STREET 9TH ST
KAUFMAN TX 75142
PHONE: (214) 288-5887 **FAX:** (972) 486-4880
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/06/2016

County **KAUFMAN** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 100719

PREMIER COUNTRY HAVEN ASSISTED LIVING, INC.
13812 HIRAM RD
WILLS POINT **TX** 75169
Phone (972) 524-9884 **Fax** (972) 563-9887

TOTAL Lic Capacity: 40 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 40 **TITLE 18/19:** 0

Owner Information

PREMIER COUNTRY HAVEN ASSISTED LIVING, INC.
13812 HIRAM RD
WILLS POINTS TX 75169
PHONE: (972) 524-9884 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/08/2018

County **KENDALL** Reg Svcs: TEAM X Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 010340

HERITAGE PLACE
120 CROSSPOINT DR
BOERNE **TX** 78006

Phone (830) 249-9817 **Fax** (830) 249-0576

TOTAL Lic Capacity: 56 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 56 **TITLE 18/19:** 0

Owner Information

FSQC-TX LLC
400 CENTRE ST
NEWTON MA 02458

PHONE: (617) 796-8387 **FAX:** (617) 219-1435

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/07/2017

County **KENDALL** Reg Svcs: TEAM V Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 101799

MORNINGSIDE MINISTRIES AT MENGER SPRINGS-THE CIBOLO HOUSE
1000 GRAND BLVD
BOERNE **TX** 78006

Phone (830) 816-4900 **Fax** (830) 816-4901

TOTAL Lic Capacity: 112 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 52 **TITLE19:** 0
PRIVATE Beds: 112 **TITLE 18/19:** 0

Owner Information

MORNINGSIDE MINISTRIES
700 BABCOCK RD
SAN ANTONIO TX 78201-2600

PHONE: (210) 734-1000 **FAX:** (210) 734-1111

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/15/2018

County **KENDALL** Reg Svcs: TEAM X Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 103401

NEW HOPE ASSISTED LIVING
112 BUCKSKIN DRIVE
BOERNE **TX** 78006

Phone (830) 755-4673 **Fax** (830) 755-8069

TOTAL Lic Capacity: 15 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 15 **TITLE 18/19:** 0

Owner Information

ELENA DORCA AND MIHAELA DORCA GENERAL PARTNERSHIP
112 BUCKSKIN DR
BOERNE TX 78006

PHONE: (830) 755-4673 **FAX:** (830) 755-8069

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/09/2018

County **KERR** Reg Svcs: TEAM W Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 030017

220 HARPER L L C
220 HARPER RD
KERRVILLE **TX** 78028

Phone (830) 895-4600 **Fax** (830) 895-4601

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

220 HARPER LLC
220 HARPER RD
KERRVILLE TX 78028

PHONE: (830) 895-4600 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/18/2017

County **KERR** Reg Svcs: TEAM V Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 000411

ALPINE TERRACE RETIREMENT & CONVALESCENT CENTER PC UNIT
746 ALPINE DR
KERRVILLE **TX** 78028

Phone (830) 896-2323 **Fax** (830) 896-2331

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

UVALDE COUNTY HOSPITAL AUTHORITY
1025 GARNER FIELD RD
UVALDE TX 78801

PHONE: (830) 278-6251 **FAX:** (830) 278-8529

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/28/2017

County **KERR** Reg Svcs: TEAM Z Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 000769

BROOKDALE GUADALUPE RIVER PLAZA
135 PLAZA DRIVE
KERRVILLE **TX** 78028

Phone (830) 895-2626 **Fax** (830) 895-3927

TOTAL Lic Capacity: 45 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 45 **TITLE 18/19:** 0

Owner Information

EMERITUS CORPORATION
6737 W. WASHINGTON STREET ,SUITE 2300
MILWAUKEE WI 53214

PHONE: (414) 918-5000 **FAX:** (414) 918-5054

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/05/2016

County **KERR** Reg Svcs: TEAM W Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 000306

BROOKDALE KERRVILLE
725 LESLIE DR
KERRVILLE **TX** 78028
Phone (830) 257-6769 **Fax** (830) 257-6761

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

BROOKDALE SENIOR LIVING COMMUNITIES INC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214
PHONE: (414) 918-5441 **FAX:** (414) 918-6076
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/01/2016

County **KERR** Reg Svcs: TEAM X Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 000590

HILL COUNTRY OUTREACH INC
600 LESLIE DR
KERRVILLE **TX** 78028
Phone (830) 792-6964 **Fax** (830) 792-6965

TOTAL Lic Capacity: 70 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 70 **TITLE 18/19:** 0

Owner Information

HILL COUNTRY OUTREACH INC
600 LESLIE DRIVE
KERRVILLE TX 78029
PHONE: (830) 792-6964 **FAX:** (830) 792-6965
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/01/2017

County **KERR** Reg Svcs: TEAM X Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 102640

MOUNTAIN VILLA AT KERRVILLE
2201 JUNCTION HWY
KERRVILLE **TX** 78028
Phone (830) 792-4001 **Fax** (830) 792-4999

TOTAL Lic Capacity: 50 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 50 **TITLE 18/19:** 0

Owner Information

MAHARLIKA RESOURCES INC
11913 PASEO DORADO CIR
EL PASO TX 79936
PHONE: (915) 329-1039 **FAX:** (915) 562-6611
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/11/2015

County **KERR** Reg Svcs: TEAM Y Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 105114

RIVER POINT OF KERRVILLE
1441 BANDERA HWY
KERRVILLE **TX** 78028
Phone (830) 258-4150 **Fax** (830) 792-6348

TOTAL Lic Capacity: 70 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 32 **TITLE19:** 0
PRIVATE Beds: 70 **TITLE 18/19:** 0

Owner Information

BANDERA SENIOR CARE, LLC
1000 LEGIONPLACE ,SUITE 1750
ORLANDO FL 32801
PHONE: (407) 999-2400 **FAX:** (407) 999-7759
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/17/2016

County **KERR** Reg Svcs: TEAM V Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 100504

VILLAGIO OF KERRVILLE
747 ALPINE DR
KERRVILLE **TX** 78028
Phone (830) 896-6555 **Fax** (830) 896-5717

TOTAL Lic Capacity: 48 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 48 **TITLE19:** 0
PRIVATE Beds: 48 **TITLE 18/19:** 0

Owner Information

SELECT OPERATIONS OF KERRVILLE LLC
2956 VIA ESPERANZA
EDMOND OK 73013
PHONE: (405) 822-7328 **FAX:** (888) 753-6262
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/26/2018

County **LAMAR** Reg Svcs: TYLER NW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 000593

BROOKDALE PARIS
2410 STILLHOUSE RD
PARIS **TX** 75462
Phone (903) 784-8800 **Fax** (930) 737-2964

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

BROOKDALE SENIOR LIVING COMMUNITIES INC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214
PHONE: (414) 918-5441 **FAX:** (414) 918-6076
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/01/2017

County **LAMAR** Reg Svcs: TYLER NW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 000913

LAMAR PLACE
2905 N MAIN ST
PARIS **TX** 75460
Phone (903) 784-3243 **Fax** (903) 784-7662

TOTAL Lic Capacity: 68 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 68 **TITLE 18/19:** 0

Owner Information

PARIS OAKS AID OPCO, LLC
301 COMMERCE STREET ,STE 3300
FORT WORTH TX 76102
PHONE: (817) 871-4000 **FAX:** (817) 871-4001
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/11/2017

County **LAMAR** Reg Svcs: TYLER NW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 000806

LAMAR PLACE
2905 N MAIN ST
PARIS **TX** 75460
Phone (903) 784-3243 **Fax** (903) 784-7662

TOTAL Lic Capacity: 52 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 20 **TITLE19:** 0
PRIVATE Beds: 52 **TITLE 18/19:** 0

Owner Information

PARIS OAKS AID OPCO, LLC
330 N WABASH AVE ,STE 3700
FORT WORTH TX 76102
PHONE: (312) 725-7000 **FAX:** (312) 332-5300
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/11/2017

County **LAMAR** Reg Svcs: TYLER NW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 104876

LOVE HOUSE OF PARIS
1555 NE 17ST
PARIS **TX** 75460
Phone (903) 739-9845 **Fax** (903) 737-8652

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

Owner Information

WILLIEJOYCE LOVE
5020 SUNSET VIEW
PARIS TX 75462
PHONE: (903) 739-9845 **FAX:** (903) 737-8652
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/15/2017

County **LAMAR** Reg Svcs: TYLER NW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 102034

PINE TREE RANCH
2990 PINE MILL RD
PARIS **TX** 75460
Phone (903) 783-0652 **Fax** (903) 783-0643

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

REEDER PARKER CROCKETT ASSET HOLDINGS LLC
4301 LAKE HILL DR
ROWLETT TX 75089
PHONE: **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/01/2017

County **LAMAR** Reg Svcs: TYLER NW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 102683

SPRING LAKE ASSISTED LIVING AND MEMORY CARE COMMUNITY
750 N COLLEGIATE DRIVE
PARIS **TX** 75460-3465
Phone (903) 785-1110 **Fax** (903) 785-1112

TOTAL Lic Capacity: 70 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 70 **TITLE 18/19:** 0

Owner Information

CSL S PARIS LLC
14160 DALLAS PKWY ,STE 300
DALLAS TX 75254
PHONE: (972) 308-8366 **FAX:** (972) 387-8216
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/10/2016

County **LAMAR** Reg Svcs: TYLER NW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 103873

THE HOME PLACE
115 NE 27TH ST
PARIS **TX** 75460
Phone (903) 739-9450 **Fax** (903) 783-9294

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

JANA AND CODY SANDERS INC
5569 FM 1499
PARIS TX 75462
PHONE: (903) 739-2805 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/21/2017

County **LAMB** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 100381

LIBRARY OF LEGACIES LITTLEFIELD LLC
1303 MARSHALL HOWARD BLVD
LITTLEFIELD **TX** 79339
Phone (806) 385-0364 **Fax** (806) 892-3224

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

LIBRARY OF LEGACIES LITTLEFIELD LLC
1303 MARSHALL HOWARD BLVD
LITTLEFIELD TX 79339
PHONE: (806) 828-4200 **FAX:** (806) 828-6641
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/15/2017

County **LAMB** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 030256

SANDHILLS VILLAGE
1200 AVE I
OLTON **TX** 79064
Phone (806) 285-3356 **Fax** (806) 285-2506

TOTAL Lic Capacity: 20 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 20 **TITLE 18/19:** 0

Owner Information

RUNNINGWATER DRAW CARE CENTER INC
PO BOX 409
OLTON TX 79064
PHONE: (806) 285-2677 **FAX:** (806) 285-2506
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/09/2017

County **LAMPASAS** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 102468

SILVER CREEK ASSISTED LIVING LAMPASAS
1802 HWY 281 S
LAMPASAS **TX** 76550
Phone (512) 556-8990 **Fax** (512) 556-8994

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

SCAL LAMPASAS LLC
1802 HWY 281 S
LAMPASAS TX 76550
PHONE: (832) 385-2295 **FAX:** (855) 557-2835
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/31/2017

County **LAVACA** Reg Svcs: TEAM Z Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 100437

THE WILLIAMSBURG HOUSE INC
4656 US HWY 77 S
HALLETTSVILLE **TX** 77964
Phone (361) 798-2345 **Fax** (361) 798-5367

TOTAL Lic Capacity: 15 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 15 **TITLE 18/19:** 0

Owner Information

THE WILLIAMSBURG HOUSE INC
PO BOX F
HALLETTSVILLE TX 77964
PHONE: (361) 798-2345 **FAX:** (361) 798-5994
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/20/2016

County **LAVACA** Reg Svcs: TEAM X Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 030325

PERSONALIZED CARE INC
122 N AVE E
SHINER **TX** 77984
Phone (361) 594-2728 **Fax** (361) 594-2273

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

PERSONALIZED CARE INC
122 N AVE E
SHINER TX 77984
PHONE: (361) 594-2728 **FAX:** (361) 594-2273
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/01/2018

County **LAVACA** Reg Svcs: TEAM W Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 101780

TODAYS ASSISTED LIVING
210 HUBBARD ST
YOAKUM **TX** 77995
Phone (361) 293-2526 **Fax**

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

TODAYS SENIOR CONCEPTS, INC
210 HUBBARD ST
YOAKUM TX 77995
PHONE: (361) 293-2526 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/22/2017

County **LAVACA** Reg Svcs: TEAM W Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 104470

TODAY'S ASSISTED LIVING 206
206 HUBBARD STREET
YOAKUM **TX** 77995
Phone (361) 293-7722 **Fax**

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

TODAYS SENIOR CONCEPTS, INC
210 HUBBARD ST
YOAKUM TX 77995
PHONE: (361) 293-2526 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/02/2016

County **LIBERTY** Reg Svcs: BEAUMONT GERIATRIC Region 06 - HOUSTON

Facility Information: **Facility ID:** 102595

COUNTRY HAVEN SENIOR CARE
304 ROAD 3430
CLEVELAND **TX** 77327
Phone (281) 689-6501 **Fax** (281) 689-6501

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

JANICE M SHILLING
304 ROAD 3430
CLEVELAND TX 77327
PHONE: (281) 689-6501 **FAX:** (281) 689-6501
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/24/2017

County **LIBERTY** Reg Svcs: BEAUMONT GERIATRIC Region 06 - HOUSTON

Facility Information: **Facility ID:** 100270

FEELS JUST LIKE HOME LLC
701 E HOUSTON
CLEVELAND **TX** 77327
Phone (281) 592-3952 **Fax** (281) 592-3952

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

FEELS JUST LIKE HOME LLC
701 E HOUSTON ST
CLEVELAND TX 77327
PHONE: (281) 592-3952 **FAX:** (281) 592-3952
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/09/2017

County **LIBERTY** Reg Svcs: BEAUMONT GERIATRIC Region 06 - HOUSTON

Facility Information: **Facility ID:** 105734

BRIGHTER DAYS ASSISTED LIVING LLC
406 E. CLAYTON
DAYTON **TX** 77535
Phone (832) 279-8532 **Fax** (936) 257-5028

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

BRIGHTER DAYS ASSISTED LIVING LLC
406 E CLAYTON
DAYTON TX 77535
PHONE: (832) 279-8532 **FAX:** (936) 257-5028
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/17/2017

County **LIBERTY** Reg Svcs: BEAUMONT GERIATRIC Region 06 - HOUSTON

Facility Information: **Facility ID:** 104967

DAYTON-TARKINGTON CARE CENTER
17019 HWY 321
DAYTON **TX** 77535
Phone (713) 592-1225 **Fax** (713) 592-1225

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

DAYTON-TARKINGTON CARE CENTER
7710 MOONMIST DRIVE
HOUSTON TX 77036
PHONE: (832) 654-6588 **FAX:** (713) 330-4406
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/01/2016

County **LIBERTY** Reg Svcs: BEAUMONT GERIATRIC Region 06 - HOUSTON

Facility Information: **Facility ID:** 101423

FAIRYS LANDING RESIDENTIAL PERSONAL CARE CENTER
4837 FM 770 N
HULL **TX** 77564
Phone (936) 536-1651 **Fax** (936) 536-1792

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

JAMES M ANDERSON
PO BOX 410
HULL TX 77564
PHONE: (936) 536-6193 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/15/2016

County **LIMESTONE** Reg Svcs: WACO Region 07 - AUSTIN

Facility Information: **Facility ID:** 000403

CONNIES ASSISTED LIVING HOME OF BEN HUR
980 FM 339 S
GROESBECK **TX** 76642-3446
Phone (254) 789-2296 **Fax** (254) 789-2001

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

CONNIE L HAMPTON
980 FM 339 S
GROESBECK TX 76642
PHONE: (254) 789-2296 **FAX:** (254) 789-2001
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/21/2017

County **LIMESTONE** Reg Svcs: WACO Region 07 - AUSTIN

Facility Information: **Facility ID:** 000410

HAMPTONS ASSISTED LIVING HOME
1099 FM 339 S
GROESBECK **TX** 76642-5521
Phone (254) 789-2285 **Fax** (254) 789-2001

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

NORMA I HAMPTON
1099 FM 339 S
GROESBECK TX 76642-5521
PHONE: **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/21/2016

County **LIMESTONE** Reg Svcs: WACO Region 07 - AUSTIN

Facility Information: **Facility ID:** 000550

VINCENT PERSONAL CARE HOME
458 LCR 635
GROESBECK **TX** 76642
Phone (254) 729-3157 **Fax**

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

JOHN A VINCENT
458 LCR 635
GROESBECK TX 76642
PHONE: (254) 729-3157 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/18/2016

County **LIMESTONE** Reg Svcs: WACO Region 07 - AUSTIN

Facility Information: **Facility ID:** 000422

HOLLISTERS ASSISTED LIVING HOME
1579 LCR 310
MART **TX** 76664
Phone (254) 344-2472 **Fax** (254) 344-2472

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

VIVIAN ELAINE HOLLISTER
1579 LCR 310
MART TX 76664
PHONE: (254) 344-2472 **FAX:** (254) 344-2472
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/21/2016

County **LLANO** Reg Svcs: TEAM Z Region 07 - AUSTIN

Facility Information: **Facility ID:** 104874

SPANISH TRAIL ASSISTED LIVING OF HORSESHOE BAY
26409 E HWY 71
HORSESHOE BAY **TX** 78657
Phone (830) 220-2288 **Fax**

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

HSB SENIOR CARE 1 LLC
12400 HWY 71 W ,STE 350-391
AUSTIN TX 78738
PHONE: (512) 761-3377 **FAX:** (512) 532-7515
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/01/2017

County **LLANO** Reg Svcs: TEAM V Region 07 - AUSTIN

Facility Information: **Facility ID:** 106255

SPANISH TRAIL MEMORY CARE OF HORSESHOE BAY
26409 HWY 71 BLDG B
HORSESHOE BAY **TX** 78657
Phone (830) 596-1710 **Fax**

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

HSB SENIOR CARE 1 LLC
12400 HWY 71 W ,STE 350-391
AUSTIN TX 78738
PHONE: (512) 761-3377 **FAX:** (512) 532-7515
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/02/2017

County **LLANO** Reg Svcs: TEAM Z Region 07 - AUSTIN

Facility Information: **Facility ID:** 000359

WINDCHIME AT THE VILLAGE
216 COVENANT LN
KINGSLAND **TX** 78639

Phone (325) 388-3502 **Fax** (325) 388-0742

TOTAL Lic Capacity: 72 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 72 **TITLE 18/19:** 0

Owner Information

PINNACLE HEALTH FACILITIES XXVIII LP
5420 W PLANO PARKWAY
PLANO TX 75093

PHONE: (972) 931-3800 **FAX:** (972) 767-6210

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/18/2017

County **LLANO** Reg Svcs: TEAM Z Region 07 - AUSTIN

Facility Information: **Facility ID:** 103674

WALDEN COURT ASSISTED LIVING
701 E YOUNG
LLANO **TX** 78643

Phone (325) 247-5470 **Fax** (325) 247-3470

TOTAL Lic Capacity: 36 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 36 **TITLE 18/19:** 0

Owner Information

BETHANY ASSISTED LIVING INC
701 E YOUNG
LLANO TX 78643

PHONE: (512) 853-0645 **FAX:** (325) 247-3470

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/08/2017

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 030068

LIBRARY OF LEGACIES IDALOU LLC
910 FRONTAGE RD
IDALOU **TX** 79329

Phone (806) 892-3456 **Fax** (806) 892-3224

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

LIBRARY OF LEGACIES IDALOU LLC
910 FRONTAGE RD
IDALOU TX 79329

PHONE: (806) 828-4200 **FAX:** (806) 828-6641

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/15/2017

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 001250

ABIDING CARE
5720 79TH ST
LUBBOCK **TX** 79424

Phone (806) 698-9105 **Fax** (806) 698-9105

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

ABRAM RODRIGUEZ INC
5720 79TH ST
LUBBOCK TX 79424

PHONE: (806) 698-9105 **FAX:** (806) 698-9105

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/01/2017

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 102208

ANGEL'S ARMS ASSISTED LIVING
3305 38TH STREET
LUBBOCK **TX** 79413

Phone (806) 785-0021 **Fax** (806) 785-0024

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

SDMC ENTERPRISES, LLC
3305 38TH STREET
LUBBOCK TX 79413

PHONE: (806) 765-0021 **FAX:** (806) 785-0024

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/16/2017

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 101630

ASHTON OF SOUTHHAVEN INC
4611 66TH
LUBBOCK **TX** 79414

Phone (806) 799-6363 **Fax** (806) 281-9969

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

SOUTHHAVEN INC
4613 66TH
LUBBOCK TX 79414

PHONE: (806) 799-6363 **FAX:** (806) 281-9969

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/03/2017

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 102482

BEEHIVE HOMES
2105 W LOOP 289
LUBBOCK **TX** 79407
Phone (806) 793-4483 **Fax** (806) 793-4482
TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

POTTER PEOPLE LLC
12316 N FM 179
SHALLOWATER TX 79363
PHONE: (806) 746-6733 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/13/2017

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 100762

BELLECOURT SOUTH
1717 NORFOLK AVE
LUBBOCK **TX** 79416
Phone (806) 281-6000 **Fax** (806) 281-6043
TOTAL Lic Capacity: 37 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 37 **TITLE 18/19:** 0

Owner Information

CARILLON INC
1717 NORFOLK AVE
LUBBOCK TX 79416
PHONE: (806) 281-6000 **FAX:** (806) 281-6041
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/16/2017

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 101948

BETHANY HOUSE
14711 FM 1730
LUBBOCK **TX** 79424
Phone (806) 863-2605 **Fax** (806) 863-2617
TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

LUBBOCK HOUSE OF LAZARUS, LTD
14711 FM 1730
LUBBOCK TX 79427
PHONE: **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/08/2016

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 030161

BROOKDALE MONTEREY
5204 ELGIN AVE
LUBBOCK **TX** 79413
Phone (806) 788-1919 **Fax** (806) 785-7088
TOTAL Lic Capacity: 56 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 56 **TITLE19:** 0
PRIVATE Beds: 56 **TITLE 18/19:** 0

Owner Information

ESC IV LP
111 WESTWOOD PL ,STE 400
BRENTWOOD TN 37027
PHONE: (414) 918-5441 **FAX:** (414) 918-5054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/01/2018

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 000311

BROOKDALE REMINGTON PARK
5301 66TH ST
LUBBOCK **TX** 79424
Phone (806) 798-9871 **Fax** (806) 798-1120
TOTAL Lic Capacity: 117 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 117 **TITLE 18/19:** 0

Owner Information

TEXAS ESC LUBBOCK LP
6737 W. WASHINGTON STREET ,STE 2300
MILWAUKEE WI 53214
PHONE: (414) 918-5000 **FAX:** (414) 918-5054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/30/2017

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 000471

BROOKDALE SHADOW HILLS
110 FRANKFORD AVE
LUBBOCK **TX** 79416
Phone (806) 799-4225 **Fax** (806) 799-4597
TOTAL Lic Capacity: 48 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 48 **TITLE 18/19:** 0

Owner Information

S-H OPCO COTTAGE VILLAGE, LLC
1920 MAIN ST ,STE 1200
IRVINE CA 92614
PHONE: (949) 918-5441 **FAX:** (414) 918-6076
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/29/2016

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 030382

CARILLON ASSISTED LIVING
1717 NORFOLK AVE
LUBBOCK **TX** 79416
Phone (806) 281-6000 **Fax** (806) 281-6039

TOTAL Lic Capacity: 50 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 50 **TITLE 18/19:** 0

Owner Information

CARILLON INC
1717 NORFOLK AVE
LUBBOCK TX 79416
PHONE: (806) 281-6000 **FAX:** (806) 281-6041
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/26/2017

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 000801

HEARTLAND HOUSE INC
2605 N COUNTY RD 1700
LUBBOCK **TX** 79416
Phone (806) 765-6480 **Fax** (806) 771-3603

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

HEARTLAND HOUSE INC
2605 N COUNTY RD 1700
LUBBOCK TX 79416
PHONE: (806) 765-6480 **FAX:** (806) 771-3603
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/02/2018

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 100571

IVY HOUSE
1701 30TH ST
LUBBOCK **TX** 79411
Phone (806) 368-7438 **Fax** (806) 368-8512

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

SENIOR SOLACE LLC
2510 SLIDE RD
LUBBOCK TX 79407
PHONE: (806) 781-3268 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/16/2018

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 000820

MACKENZIE PLACE
8609 BOSTON AVE
LUBBOCK **TX** 79423
Phone (806) 745-7770 **Fax** (806) 745-8117

TOTAL Lic Capacity: 58 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 58 **TITLE 18/19:** 0

Owner Information

MACKENZIE AID OPCO LLC
330 N. WABASH AVE. ,STE. 3700
CHICAGO IL 60611
PHONE: (312) 725-7000 **FAX:** (312) 332-5300
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/11/2017

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 000655

MANNA ACRES
2510 SLIDE RD
LUBBOCK **TX** 79407
Phone (806) 799-7911 **Fax**

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

SENIOR SOLACE LLC
2510 SLIDE RD
LUBBOCK TX 79407
PHONE: (806) 781-3268 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/01/2018

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 100750

MARY LUGO ADULT FOSTER CARE
7012 SANTE FE DR
LUBBOCK **TX** 79407
Phone (806) 796-0463 **Fax**

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

MARY R LUGO
7012 SANTE FE DR
LUBBOCK TX 79407
PHONE: (806) 796-0463 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE C
License Exp Dt: 09/04/2016

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 101518

PROMISELAND ASSISTED LIVING
3314 40TH ST
LUBBOCK **TX** 79413
Phone (806) 687-5118 **Fax** (806) 771-1844

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

PROMISELAND ASSISTED LIVING LP
3314 40TH
LUBBOCK TX 79413
PHONE: (806) 777-4167 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/08/2017

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 105603

PROMISELAND ASSISTED LIVING - KINGSGATE
4003 - 87TH STREET
LUBBOCK **TX** 79423
Phone (806) 698-0064 **Fax** (806) 771-1844

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

Owner Information

PROMISELAND ASSISTED LIVING-KINGSGATE LLC
4003-87TH STREET
LUBBOCK TX 79423
PHONE: (806) 698-0064 **FAX:** (806) 771-1844
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/20/2017

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 104026

PROMISELAND ASSISTED LIVING II LLC
3416 43RD STREET
LUBBOCK **TX** 79413
Phone (806) 368-0840 **Fax** (806) 368-0840

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

Owner Information

PROMISELAND ASSISTED LIVING II LLC
3416 43 RD STREET
LUBBOCK TX 79413
PHONE: (806) 368-0830 **FAX:** (806) 368-0830
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/24/2017

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 104941

PROMISELAND ASSISTED LIVING III, LLC
3012 81ST ST
LUBBOCK **TX** 79423
Phone (806) 445-0039 **Fax** (806) 445-0049

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

Owner Information

PROMISELAND ASSISTED LIVING III, LLC
3012 81ST ST
LUBBOCK TX 79423
PHONE: (806) 445-0039 **FAX:** (806) 445-0049
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/07/2017

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 103688

SERENDIPITY SUITES
5321 19TH STREET
LUBBOCK **TX** 79407
Phone (806) 239-1593 **Fax**

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

SENIOR SOLACE LLC
2510 SLIDE RD
LUBBOCK TX 79407
PHONE: (806) 781-3268 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/06/2017

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 000844

SISTERS LOVING ARMS
4713 22ND ST
LUBBOCK **TX** 79407
Phone (806) 799-7944 **Fax** (806) 799-5173

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

SENIOR SOLACE LLC
2510 SLIDE RD
LUBBOCK TX 79407
PHONE: (806) 781-3268 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/14/2016

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 030060

SOUTHHAVEN
4613 66TH ST
LUBBOCK **TX** 79414
Phone (806) 799-6363 **Fax** (806) 281-9969

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

SOUTHHAVEN INC
4613 66TH
LUBBOCK TX 79414
PHONE: (806) 799-6363 **FAX:** (806) 281-9969
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/01/2017

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 102566

TANGLEWOOD ESTATE
4505 20TH ST
LUBBOCK **TX** 79407
Phone (806) 239-3800 **Fax** (806) 687-3069

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

TRACY W CLECKLER
5807 88TH PLACE
LUBBOCK TX 79424
PHONE: (806) 239-3800 **FAX:** (806) 687-3069
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/28/2017

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 000816

TANGLEWOOD VILLAGE
5501 34TH
LUBBOCK **TX** 79407
Phone (806) 791-5851 **Fax** (806) 791-5851

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

TRACY W CLECKLER
5807 88TH PLACE
LUBBOCK TX 79424
PHONE: (806) 239-3800 **FAX:** (806) 687-3069
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/15/2016

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 104551

THE CALLANDER HOUSE LLC
4524 77TH ST
LUBBOCK **TX** 79424
Phone (806) 771-1777 **Fax**

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

Owner Information

THE CALLANDER HOUSE LLC
4524 77TH ST
LUBBOCK TX 79424
PHONE: (806) 789-4615 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/09/2017

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 000595

THE CALLANDER HOUSE-SOUTH
11902 FRANKFORD AVENUE
LUBBOCK **TX** 79424
Phone (806) 794-7603 **Fax**

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

CALLANDER HOUSE LLC
2314 58TH
LUBBOCK TX 79412
PHONE: (806) 789-4615 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/01/2018

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 103812

THE ISLE AT RAIDER RANCH
6806 43RD ST
LUBBOCK **TX** 79407
Phone (806) 368-6565 **Fax** (806) 797-0200

TOTAL Lic Capacity: 160 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 47 **TITLE19:** 0
PRIVATE Beds: 160 **TITLE 18/19:** 0

Owner Information

CHP RAIDER RANCH TX TENANT CORP
450 S ORANGE AVE
ORLANDO FL 32801
PHONE: (407) 540-7500 **FAX:** (407) 540-2544
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/29/2017

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 000376

THE PHOENIX HOUSE
3319 35TH ST
LUBBOCK **TX** 79413
Phone (806) 792-9091 **Fax** (806) 784-0603

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

THE SPHINX SUNRUNNERS INC
2302 34TH ST
LUBBOCK TX 79411
PHONE: (806) 784-0033 **FAX:** (806) 784-0603
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/31/2016

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 103456

TRANSITIONAL LEARNING CENTER AT LUBBOCK
4000 22ND PLACE 3RD FLR
LUBBOCK **TX** 79410
Phone (806) 281-5400 **Fax** (806) 281-5436

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

TRANSITIONAL LEARNING CENTER AT GALVESTON
1528 POSTOFFICE ST
GALVESTON TX 77550
PHONE: (409) 762-6661 **FAX:** (409) 762-9961
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/31/2016

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 030086

WEDGEWOOD SOUTH
9812 VINTON AVE
LUBBOCK **TX** 79424
Phone (806) 798-1011 **Fax** (806) 794-0234

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

LUBBOCK PRIME LIFE, LLC
9812 VINTON AVE
LUBBOCK TX 79424
PHONE: (806) 790-1008 **FAX:** (806) 589-4986
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/31/2017

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 100083

WEDGEWOOD SOUTH
9812 VINTON AVE
LUBBOCK **TX** 79424
Phone (806) 798-1011 **Fax** (806) 794-0234

TOTAL Lic Capacity: 26 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 26 **TITLE 18/19:** 0

Owner Information

LUBBOCK PRIME LIFE, LLC
9812 VINTON AVE
LUBBOCK TX 79424
PHONE: (806) 790-1008 **FAX:** (806) 589-4986
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/31/2017

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 030081

WEDGEWOOD SOUTH
9812 VINTON AVE
LUBBOCK **TX** 79424
Phone (806) 798-1011 **Fax** (806) 794-0234

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

LUBBOCK PRIME LIFE, LLC
9812 VINTON AVE
LUBBOCK TX 79424
PHONE: (806) 790-1008 **FAX:** (806) 589-4986
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/31/2017

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 030082

WEDGEWOOD SOUTH
9812 VINTON AVE
LUBBOCK **TX** 79424
Phone (806) 798-1011 **Fax** (806) 794-0234

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

LUBBOCK PRIME LIFE, LLC
9812 VINTON AVE
LUBBOCK TX 79424
PHONE: (806) 790-1008 **FAX:** (806) 589-4986
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/31/2017

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 050716

WILSHIRE ON 4TH
6514 4TH ST
LUBBOCK **TX** 79416
Phone (806) 791-0002 **Fax** (806) 791-3627

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

WILSHIRE ON 4TH LLC
6410 ERSKINE
LUBBOCK TX 79416
PHONE: (806) 793-1616 **FAX:** (806) 589-4986
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/30/2016

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 000930

WILSHIRE ON 4TH LLC
6502 4TH ST
LUBBOCK **TX** 79416
Phone (806) 791-0002 **Fax** (806) 791-3627

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

WILSHIRE ON 4TH LLC
6410 ERSKINE
LUBBOCK TX 79416
PHONE: (806) 793-1616 **FAX:** (806) 589-4986
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/31/2018

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 030040

WILSHIRE ON 4TH LLC
6508 4TH ST
LUBBOCK **TX** 79416
Phone (806) 791-0002 **Fax** (806) 791-3627

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

WILSHIRE ON 4TH LLC
6410 ERSKINE
LUBBOCK TX 79416
PHONE: (806) 793-1616 **FAX:** (806) 589-4986
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/30/2016

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 103433

WILSHIRE PLACE SENIOR LIVING
6410 ERSKINE
LUBBOCK **TX** 79416
Phone (806) 793-1616 **Fax** (806) 589-4986

TOTAL Lic Capacity: 66 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 66 **TITLE 18/19:** 0

Owner Information

WILSHIRE PLACE, LLC
6410 ERSKINE
LUBBOCK TX 79416
PHONE: (806) 793-1616 **FAX:** (806) 589-4986
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/20/2018

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 104342

WILSHIRE PLACE SENIOR LIVING
6410 ERSKINE
LUBBOCK **TX** 79416
Phone (806) 793-1616 **Fax** (806) 589-4986

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

WILSHIRE PLACE, LLC
6410 ERSKINE
LUBBOCK TX 79416
PHONE: (806) 793-1616 **FAX:** (806) 589-4986
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/20/2018

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 104807

LIBRARY OF LEGACIES II
1420 WOODROW RD
SLATON **TX** 79364
Phone (806) 828-4200 **Fax** (806) 828-6641

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

LIBRARY OF LEGACIES LLC
1420 WOODROW RD
SLATON TX 79364
PHONE: (806) 828-4200 **FAX:** (806) 828-6641
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/07/2017

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 103867

LIBRARY OF LEGACIES LLC
1420 WOODROW RD
SLATON **TX** 79364
Phone (806) 828-4200 **Fax** (806) 828-6641

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

LIBRARY OF LEGACIES LLC
1420 WOODROW RD
SLATON TX 79364
PHONE: (806) 828-4200 **FAX:** (806) 828-6641
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/10/2017

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 000568

ADAMS ASSISTED LIVING COMMUNITY
8824 FM 1585
WOLFFORTH **TX** 79382
Phone (806) 863-3663 **Fax** (806) 863-3951

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

3TA LTD
6825 84TH
LUBBOCK TX 79424
PHONE: (806) 778-5508 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/01/2018

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 000784

VILLA RESIDENTIAL CARE OF WOLFFORTH I
301 E 5TH ST
WOLFFORTH **TX** 79382
Phone (806) 866-4666 **Fax** (806) 866-4111

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

WOLFFORTH I ENTERPRISES, LLC
1701 RIVER RUN ,STE 304
FORT WORTH TX 76107
PHONE: (817) 348-8959 **FAX:** (817) 348-0466
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/01/2016

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 000625

VILLA RESIDENTIAL CARE OF WOLFFORTH II
301 E 5TH ST
WOLFFORTH **TX** 79382
Phone (806) 866-4666 **Fax** (806) 866-4111

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

WOLFFORTH I ENTERPRISES, LLC
1701 RIVER RUN ,STE 304
FORT WORTH TX 76107
PHONE: (817) 348-8959 **FAX:** (817) 348-0466
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/01/2016

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 000628

VILLA RESIDENTIAL CARE OF WOLFFORTH III
301 E 5TH ST
WOLFFORTH **TX** 79382
Phone (806) 866-4666 **Fax** (806) 866-4111

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

WOLFFORTH I ENTERPRISES, LLC
1701 RIVER RUN ,STE 304
FORT WORTH TX 76107
PHONE: (817) 348-8959 **FAX:** (817) 348-0466
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/01/2016

County **LUBBOCK** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 106044

YOUNG AT HEART ASSISTED LIVING
808 MAIN ST.
WOLFFORTH **TX** 79382
Phone (806) 855-4699 **Fax** (806) 855-4622

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

LECLEAR ELDERLY SERVICES, LLC
808 MAIN ST
WOLFFORTH TX 79382
PHONE: (806) 855-4699 **FAX:** (806) 855-4622
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/03/2016

County **LYNN** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 100713

LYNNWOOD
1801 COUNTRY CLUB ROAD
TAHOKA **TX** 79373

Phone (806) 998-1226 **Fax** (806) 561-4049

TOTAL Lic Capacity: 40 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 40 **TITLE 18/19:** 0

Owner Information

LYNN COUNTY HOSPITAL DISTRICT
2600 LOCKWOOD
TAHOKA TX 79373

PHONE: (806) 998-4533 **FAX:** (806) 561-4049

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/22/2018

County **MADISON** Reg Svcs: BRENHAM Region 07 - AUSTIN

Facility Information: **Facility ID:** 101027

MADISONVILLE ASSISTED LIVING
410 E COLLARD ST
MADISONVILLE **TX** 77864

Phone (936) 348-3985 **Fax** (936) 348-6401

TOTAL Lic Capacity: 30 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 30 **TITLE 18/19:** 0

Owner Information

MADISONVILLE III ENTERPRISES LLC
1701 RIVER RUN ,STE 304
FORT WORTH TX 76107

PHONE: (817) 348-8959 **FAX:** (817) 348-0466

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/01/2016

County **MARION** Reg Svcs: TYLER SE TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 030353

CYPRESS PLACE
100 W DOUGLAS ST
JEFFERSON **TX** 75657-1506

Phone (903) 665-9855 **Fax** (903) 665-6809

TOTAL Lic Capacity: 42 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 22 **TITLE19:** 0
PRIVATE Beds: 42 **TITLE 18/19:** 0

Owner Information

CYPRESS PLACE RE 2015, LLC
3801 HULEN STREET ,SUITE 202
FORT WORTH TX 76107

PHONE: (817) 386-8888 **FAX:** (817) 386-8324

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/15/2017

County **MATAGORDA** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 100120

LEGACY ASSISTED LIVING
720 12TH ST
BAY CITY **TX** 77414

Phone (979) 245-7891 **Fax** (979) 245-1245

TOTAL Lic Capacity: 44 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 44 **TITLE 18/19:** 0

Owner Information

PINNACLE HEALTH FACILITIES OF TEXAS XII LP
5420 W PLANO PKWY
PLANO TX 75093

PHONE: (972) 931-3800 **FAX:** (972) 931-3801

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/01/2017

County **MCCULLOCH** Reg Svcs: SAN ANGLEO GERIATRIC Region 09 - ABILENE

Facility Information: **Facility ID:** 101609

TEXAS JUBILEE HOUSE OF BRADY
104 E 5TH
BRADY **TX** 76825

Phone (325) 597-2662 **Fax** (325) 597-2664

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

TEXAS JUBILEE HOUSE LLC
104 E 5TH ST
BRADY TX 76825

PHONE: (325) 597-2662 **FAX:** (325) 597-2664

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/30/2017

County **MCLENNAN** Reg Svcs: WACO Region 07 - AUSTIN

Facility Information: **Facility ID:** 000450

SCARBOROUGH I
8808 N HWY 6
CRAWFORD **TX** 76638

Phone (254) 754-4902 **Fax**

TOTAL Lic Capacity: 15 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 15 **TITLE 18/19:** 0

Owner Information

J SCARBOROUGH INC
5508 FLAT ROCK RD
WACO TX 76708

PHONE: (254) 754-4902 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/01/2016

County **MCLENNAN** Reg Svcs: WACO Region 07 - AUSTIN

Facility Information: **Facility ID:** 104810

STONEY BROOK OF HEWITT
151 ROYAL LANE
HEWITT **TX** 76643
Phone (254) 933-3800 **Fax** (254) 933-2550

TOTAL Lic Capacity: 56 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 56 **TITLE 18/19:** 0

Owner Information

HEWITT A.L., LLC
151 ROYAL LANE
HEWITT TX 76643
PHONE: **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/24/2017

County **MCLENNAN** Reg Svcs: WACO Region 07 - AUSTIN

Facility Information: **Facility ID:** 104809

STONEY BROOK OF HEWITT
151 ROYAL LANE
HEWITT **TX** 76643
Phone (254) 420-1400 **Fax** (254) 420-1401

TOTAL Lic Capacity: 46 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 28 **TITLE19:** 0
PRIVATE Beds: 46 **TITLE 18/19:** 0

Owner Information

HEWITT A.L., LLC
151 ROYAL LANE
HEWITT TX 76643
PHONE: **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/24/2017

County **MCLENNAN** Reg Svcs: WACO Region 07 - AUSTIN

Facility Information: **Facility ID:** 000598

CRYSTAL MANOR ASSISTED LIVING
6016 W LAKE CREEK RD
RIESEL **TX** 76682
Phone (254) 875-9525 **Fax** (254) 875-9526

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

JEANNETTE R BLACK
6016 W LAKE CREEK RD
RIESEL TX 76682
PHONE: (254) 875-9525 **FAX:** (254) 875-9526

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/23/2017

County **MCLENNAN** Reg Svcs: WACO Region 07 - AUSTIN

Facility Information: **Facility ID:** 000379

BROOKDALE LAKE BRAZOS
3801 MARTIN LUTHER KING JR BLVD
WACO **TX** 76708
Phone (254) 714-2222 **Fax** (254) 752-7952

TOTAL Lic Capacity: 101 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 20 **TITLE19:** 0
PRIVATE Beds: 101 **TITLE 18/19:** 0

Owner Information

ESC IV LP
111 WESTWOOD PL ,STE 400
BRENTWOOD TN 37027
PHONE: (414) 918-5441 **FAX:** (414) 918-5054

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/01/2017

County **MCLENNAN** Reg Svcs: WACO Region 07 - AUSTIN

Facility Information: **Facility ID:** 000349

BROOKDALE LAKESHORE
1700 LAKESHORE DRIVE
WACO **TX** 76708
Phone (254) 754-7900 **Fax** (254) 754-1047

TOTAL Lic Capacity: 50 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 50 **TITLE 18/19:** 0

Owner Information

BROOKDALE SENIOR LIVING COMMUNITIES INC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214
PHONE: (414) 918-5441 **FAX:** (414) 918-6076

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/01/2017

County **MCLENNAN** Reg Svcs: WACO Region 07 - AUSTIN

Facility Information: **Facility ID:** 000689

DONNA BERRY COMMUNITY HOME
514 CONCORN WAY
WACO **TX** 76705
Phone (254) 799-1849 **Fax**

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

LADONNA BERRY
514 CONCORN WAY
WACO TX 76705
PHONE: (254) 799-1849 **FAX:** (254) 752-0300

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/17/2017

County **MCLENNAN** Reg Svcs: WACO Region 07 - AUSTIN

Facility Information: **Facility ID:** 106458

HEARTIS WACO
5317 SPEEGLEVILLE RD
WACO **TX** 76712
Phone (254) 848-9090 **Fax**

TOTAL Lic Capacity: 156 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 34 **TITLE19:** 0
PRIVATE Beds: 156 **TITLE 18/19:** 0

Owner Information

HEARTIS WACO PARTNERS, LP
5910 N CENTRAL EXPWY ,STE 200
DALLAS TX 75206
PHONE: (214) 916-5750 **FAX:** (469) 547-5422
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/19/2018

County **MCLENNAN** Reg Svcs: WACO Region 07 - AUSTIN

Facility Information: **Facility ID:** 030137

MABELLS PLACE
1115 N 12TH ST
WACO **TX** 76707
Phone (254) 752-5434 **Fax** (254) 752-4478

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

Owner Information

MABELLS PLACE
1115 N 12TH ST
WACO TX 76707
PHONE: (254) 742-5434 **FAX:** (254) 752-4478
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/26/2018

County **MCLENNAN** Reg Svcs: WACO Region 07 - AUSTIN

Facility Information: **Facility ID:** 000640

RIDGECREST RETIREMENT AND HEALTHCARE COMMUNITY
1900 HWY 6 W
WACO **TX** 76712
Phone (254) 776-9681 **Fax** (254) 776-7960

TOTAL Lic Capacity: 120 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 120 **TITLE 18/19:** 0

Owner Information

DHC OPCO-WACO LLC
1900 W STATE HWY 6
WACO TX 76712
PHONE: (254) 776-9681 **FAX:** (254) 776-7960
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/01/2017

County **MCLENNAN** Reg Svcs: WACO Region 07 - AUSTIN

Facility Information: **Facility ID:** 103795

SODALIS ELDER LIVING WACO I
4308 N 19TH ST
WACO **TX** 76708
Phone (830) 624-1044 **Fax** (830) 629-4884

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

ALZCARE WACO LLC
195 S ACADEMY
NEW BRAUNFELS TX 78130
PHONE: (830) 624-1044 **FAX:** (830) 629-4884
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/28/2017

County **MCLENNAN** Reg Svcs: WACO Region 07 - AUSTIN

Facility Information: **Facility ID:** 000639

ST. ELIZABETH PLACE
300 W HWY 6
WACO **TX** 76712
Phone (254) 761-8500 **Fax** (254) 761-8050

TOTAL Lic Capacity: 50 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 50 **TITLE 18/19:** 0

Owner Information

PROVIDENCE PARK, INC.
300 WEST HWY 6
WACO TX 76712
PHONE: (254) 761-8500 **FAX:** (254) 761-8050
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/01/2017

County **MCLENNAN** Reg Svcs: WACO Region 07 - AUSTIN

Facility Information: **Facility ID:** 000907

THOMPSON HOME
484 MANCHACA PL
WACO **TX** 76705
Phone (254) 875-2531 **Fax** (254) 875-2413

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

EDWARD C THOMPSON
484 MANCHACA PL
WACO TX 76705
PHONE: (254) 875-2531 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/18/2017

County **MCLENNAN** Reg Svcs: WACO Region 07 - AUSTIN

Facility Information: **Facility ID:** 000436

TIMMY MOORE PERSONAL CARE HOME
1112 ROSE ST
WACO **TX** 76704
Phone (254) 752-9115 **Fax** (254) 755-6917

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

PHYLLIS D BRADY
1112 ROSE ST
WACO TX 76704
PHONE: (254) 752-9115 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/22/2017

County **MCLENNAN** Reg Svcs: WACO Region 07 - AUSTIN

Facility Information: **Facility ID:** 106334

LIVING SPRINGS VILLAGE
8601 OLD MCGREGOR ROAD
WOODWAY **TX** 76712
Phone (254) 374-0015 **Fax** (888) 726-4686

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

LIVING SPRINGS ALZHEIMER'S VILLAGE, INC.
8601 OLD MCGREGOR ROAD
WACO TX 76712
PHONE: (254) 374-0015 **FAX:** (888) 726-4686
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/14/2018

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

Facility Information: **Facility ID:** 050639

BRENDAS RESIDENTIAL ASSISTED LIVING
309 BRISCOE AVE
DEVINE **TX** 78016
Phone (830) 663-2832 **Fax** (830) 665-3494

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

BRENDA'S DEVINE HERITAGE RESIDENTIAL INC
PO BOX 570
DEVINE TX 78016
PHONE: (830) 665-2000 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/22/2018

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

Facility Information: **Facility ID:** 000578

CHAPA RESIDENTIAL CARE HOME
216 WEST C R 5719
DEVINE **TX** 78016
Phone (830) 709-4420 **Fax** (830) 709-5038

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

CHAPA RESIDENTIAL CARE HOME LLC
216 W CR 5719
DEVINE TX 78016
PHONE: (830) 709-4420 **FAX:** (830) 709-5038
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/21/2018

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

Facility Information: **Facility ID:** 000599

CRUZ PERSONAL CARE HOME
730 CR 664
DEVINE **TX** 78016
Phone (830) 665-4801 **Fax** (830) 665-4801

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

MELISSA CRUZ RODRIGUEZ
730 CR 664
DEVINE TX 78016
PHONE: (830) 665-4801 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/01/2018

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

Facility Information: **Facility ID:** 100900

DEVINE ASSISTED LIVING
405 E HONDO
DEVINE **TX** 78016
Phone (830) 663-9200 **Fax** (830) 665-3494

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

BRENDA BURFORD
PO BOX 570
DEVINE TX 78016
PHONE: (830) 665-2000 **FAX:** (830) 665-3494
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/26/2017

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

Facility Information: **Facility ID:** 000413

HERITAGE RESIDENTIAL
307 BRISCOE AVE
DEVINE **TX** 78016
Phone (830) 665-2000 **Fax** (830) 663-2832

TOTAL Lic Capacity: 50 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 50 **TITLE 18/19:** 0

Owner Information

BRENDA'S DEVINE HERITAGE RESIDENTIAL INC
PO BOX 570
DEVINE TX 78016
PHONE: (830) 665-2000 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/01/2017

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

Facility Information: **Facility ID:** 000605

MARTIN DUNCAN PERSONAL CARE HOME
266 W CR 5719
DEVINE **TX** 78016-4028
Phone (830) 709-3544 **Fax** (830) 709-5417

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

MARTIN DUNCAN
266 W CR 5719
DEVINE TX 78016-4028
PHONE: (830) 709-3544 **FAX:** (830) 709-5417
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/10/2017

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

Facility Information: **Facility ID:** 050475

RALPH AND LEONOR GARZA RESIDENT CARE HOME
265 COUNTY RD 6611
DEVINE **TX** 78016-4629
Phone (830) 665-2559 **Fax** (830) 665-2846

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

RALPH GARZA
265 COUNTY RD 6611
DEVINE TX 78016
PHONE: (830) 665-2559 **FAX:** (830) 665-2846
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/27/2018

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

Facility Information: **Facility ID:** 000602

RAMIREZ PERSONAL CARE HOME I
1024 CR 664
DEVINE **TX** 78016
Phone (830) 665-5829 **Fax** (830) 665-5829

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

RONALD D RAMIREZ
1024 CR 664
DEVINE TX 78016
PHONE: (830) 665-5829 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 06/25/2017

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

Facility Information: **Facility ID:** 000615

RAMIREZ PERSONAL CARE HOME I I
1024 CR 664
DEVINE **TX** 78016
Phone (830) 665-5829 **Fax** (830) 665-5829

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

RONALD D RAMIREZ
1024 CR 664
DEVINE TX 78016
PHONE: (830) 665-5829 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/01/2016

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

Facility Information: **Facility ID:** 000604

RAMIREZ RESIDENTIAL CARE HOME
1034 CR 664
DEVINE **TX** 78016
Phone (830) 665-9725 **Fax** (830) 665-2787

TOTAL Lic Capacity: 15 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 15 **TITLE 18/19:** 0

Owner Information

ROBERT B RAMIREZ
1034 CR 664
DEVINE TX 78016
PHONE: (830) 665-9725 **FAX:** (830) 665-2787
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/24/2016

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

Facility Information: **Facility ID:** 000571

REDMANS BOARDING HOME
850 C R 6612
DEVINE **TX** 78016
Phone (830) 665-9678 **Fax** (830) 665-9678

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

IRMA REDMAN LEE
850 CR 6612
DEVINE TX 78016
PHONE: (830) 665-9678 **FAX:** (830) 665-9678
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/17/2016

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

Facility Information: **Facility ID:** 000603

REDMANS PERSONAL CARE HOME
850 CR 6612
DEVINE **TX** 78016
Phone (830) 665-9678 **Fax** (830) 665-9678

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

IRMA REDMAN LEE
850 CR 6612
DEVINE TX 78016
PHONE: (830) 665-9678 **FAX:** (830) 665-9678
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/06/2017

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

Facility Information: **Facility ID:** 030233

M A ASSISTED LIVING FACILITY
185 C R 679
NATALIA **TX** 78059
Phone (830) 709-4519 **Fax** (830) 709-0247

TOTAL Lic Capacity: 24 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 24 **TITLE 18/19:** 0

Owner Information

MARY A PERALTA
185 CR 679
NATALIA TX 78059
PHONE: (830) 709-4519 **FAX:** (830) 709-0247
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/22/2018

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

Facility Information: **Facility ID:** 101730

REAGAN MANOR
229 E CR 5718
NATALIA **TX** 78059
Phone (210) 365-7799 **Fax** (830) 709-0459

TOTAL Lic Capacity: 20 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 20 **TITLE 18/19:** 0

Owner Information

REAGAN MANOR INC
286 W CR 5719
DEVINE TX 78016
PHONE: (210) 365-7799 **FAX:** (830) 709-5247
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/21/2017

County **MIDLAND** Reg Svcs: MIDLAND GERIATRIC Region 09 - ABILENE

Facility Information: **Facility ID:** 000323

BROOKDALE MIDLAND
1808 W LOOP 250 N
MIDLAND **TX** 79705
Phone (432) 687-0460 **Fax** (432) 687-0355

TOTAL Lic Capacity: 87 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 87 **TITLE 18/19:** 0

Owner Information

ESC IV LP
111 WESTWOOD PL ,STE 400
BRENTWOOD TN 37027
PHONE: (414) 918-5441 **FAX:** (414) 918-5054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/01/2017

County **MIDLAND** Reg Svcs: MIDLAND GERIATRIC Region 09 - ABILENE

Facility Information: **Facility ID:** 000802

CIMARRON PLACE
3400 CALDERA BLVD
MIDLAND **TX** 79707
Phone (432) 689-2717 **Fax** (432) 689-0203

TOTAL Lic Capacity: 58 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 58 **TITLE 18/19:** 0

Owner Information

CIMARRON AID OPCO LLC
330 N. WABASH ,STE 3700
CHICAGO IL 60611
PHONE: (312) 725-7000 **FAX:** (312) 332-5300
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/11/2017

County **MIDLAND** Reg Svcs: MIDLAND GERIATRIC Region 09 - ABILENE

Facility Information: **Facility ID:** 000699

HELEN GREATHOUSE MANOR
401 HELEN GREATHOUSE CIRCLE
MIDLAND **TX** 79707

Phone (432) 694-1691 **Fax** (432) 699-0369

TOTAL Lic Capacity: 233 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 58 **TITLE19:** 0
PRIVATE Beds: 233 **TITLE 18/19:** 0

Owner Information

MANOR PARK INC
2208 N LOOP 250 W
MIDLAND TX 79707

PHONE: (432) 689-9898 **FAX:** (432) 694-8769

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/15/2017

County **MIDLAND** Reg Svcs: MIDLAND GERIATRIC Region 09 - ABILENE

Facility Information: **Facility ID:** 104879

LEGACY RANCH
4800 BRAIRWOOD AVE
MIDLAND **TX** 79707

Phone (432) 694-5600 **Fax**

TOTAL Lic Capacity: 66 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 66 **TITLE19:** 0
PRIVATE Beds: 66 **TITLE 18/19:** 0

Owner Information

CHP LEGACY RANCH TX TENANT CORP
5310 HARVEST HILL RD ,SUITE 280
DALLAS TX 75230

PHONE: (214) 871-2155 **FAX:** (214) 368-7341

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/28/2018

County **MONTAGUE** Reg Svcs: WICHITA FALLS GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 010323

INDEPENDENCE HALL
1210 JACKSON ST
BOWIE **TX** 76230

Phone (940) 872-9718 **Fax** (940) 872-8590

TOTAL Lic Capacity: 36 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 36 **TITLE 18/19:** 0

Owner Information

IND HALL LLC
1210 JACKSON ST
BOWIE TX 76230

PHONE: (940) 872-9718 **FAX:** (940) 872-8590

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/17/2017

County **MONTAGUE** Reg Svcs: WICHITA FALLS GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 100415

CHERRY STREET VILLAGE
200 E CHERRY ST
NOCONA **TX** 76255

Phone (940) 825-5085 **Fax** (940) 825-1032

TOTAL Lic Capacity: 36 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 36 **TITLE 18/19:** 0

Owner Information

LYNN V ADAMS
208 CLARK ST
NOCONA TX 76255

PHONE: (940) 825-6820 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/10/2016

County **MONTAGUE** Reg Svcs: WICHITA FALLS GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 104492

YESTER YEAR HOME, LLC
914 FAYETTE
NOCONA **TX** 76255

Phone (940) 825-4913 **Fax** (940) 825-3048

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 5 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

YESTER YEAR HOME, LLC
914 FAYETTE
NOCONA TX 76255

PHONE: (940) 825-4913 **FAX:** (940) 825-3048

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/22/2016

County **MONTAGUE** Reg Svcs: WICHITA FALLS GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 000673

TK RANCH DORM 1
406 PRIVATE RD 156
SUNSET **TX** 76270-6106

Phone (940) 872-2027 **Fax** (940) 872-3222

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

THE JAMES BRUNER TK RANCH, INC.
PO BOX 879
BOWIE TX 76230

PHONE: (940) 872-5581 **FAX:** (940) 872-3222

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/01/2018

County **MONTAGUE** Reg Svcs: WICHITA FALLS GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 000674

TK RANCH DORM 2
364 PRIVATE ROAD 156
SUNSET **TX** 76270
Phone (940) 872-3623 **Fax** (940) 872-3222

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

THE JAMES BRUNER TK RANCH, INC.
PO BOX 879
BOWIE TX 76230
PHONE: (940) 872-5581 **FAX:** (940) 872-3222
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/15/2017

County **MONTAGUE** Reg Svcs: WICHITA FALLS GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 000839

TK RANCH DORM 3
899 HUDDLESTON RD
SUNSET **TX** 76270
Phone (940) 872-3360 **Fax** (940) 872-3222

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

THE JAMES BRUNER TK RANCH, INC.
PO BOX 879
BOWIE TX 76230
PHONE: (940) 872-5581 **FAX:** (940) 872-3222
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/08/2017

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103728

ABOVE & BEYOND ASSISTED LIVING #2
101 S WOODSWAY W
CONROE **TX** 77301
Phone (936) 494-2210 **Fax** (936) 647-2526

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

ABOVE AND BEYOND ASSISTED LIVING INC
145 PARK WAY
MONTGOMERY TX 77356
PHONE: (936) 449-1214 **FAX:** (936) 449-1214
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/02/2017

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 104479

ABOVE AND BEYOND ASSISTED LIVING # 3
204 W DALLAS ST
CONROE **TX** 77301
Phone (936) 494-2250 **Fax** (936) 828-2331

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

ABOVE AND BEYOND ASSISTED LIVING INC
145 PARK WAY
MONTGOMERY TX 77356
PHONE: (936) 449-1214 **FAX:** (936) 449-1214
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/27/2017

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103081

ABUNDANT LIFE ASSISTED LIVING INC
15245 SADDLEWOOD DR
CONROE **TX** 77384
Phone (281) 221-3040 **Fax** (281) 789-4207

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

ABUNDANT LIFE ASSISTED LIVING INC
15245 SADDLEWOOD DR
CONROE TX 77384
PHONE: (281) 221-3040 **FAX:** (936) 273-6337
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/12/2017

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102005

AVID CARE COTTAGES
206 W DALLAS
CONROE **TX** 77301
Phone (713) 419-7357 **Fax** (936) 321-7516

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

ACCESS HARMONY GROUP LLC
3611 GLENPINE DR
HOUSTON TX 77068
PHONE: (281) 692-0093 **FAX:** (281) 812-3756
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/01/2016

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103147

CHATEAU WOODLANDS
327 TALLOW
CONROE **TX** 77385
Phone (281) 296-8825 **Fax** (281) 296-0066

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

JED INC
327 TALLOW
CONROE TX 77385
PHONE: (281) 296-8825 **FAX:** (281) 296-0066
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/25/2017

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000915

CHURCHILL
9297 WAHRENBERGER RD
CONROE **TX** 77304
Phone (936) 788-7770 **Fax** (936) 788-7785

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

NEUROBEHAVIORAL RESOURCES LTD
PO BOX 929
CONROE TX 77305
PHONE: (936) 788-7770 **FAX:** (936) 788-7785
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/11/2018

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 104028

COMPASSIONATE CARE SENIOR
607 JEB STUART LN
CONROE **TX** 77302
Phone (936) 232-9144 **Fax**

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

NICOLE WILSON
607 JEB STUART
CONROE TX 77302
PHONE: (936) 232-9144 **FAX:** (936) 271-9413
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/21/2017

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105119

COMPASSIONATE CARE SENIOR LIVING
94 PANORAMA DR
CONROE **TX** 77304
Phone (936) 228-2572 **Fax** (936) 271-9413

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

Owner Information

NICOLE WILSON
607 JEB STUART
CONROE TX 77302
PHONE: (936) 232-9144 **FAX:** (936) 271-9413
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/03/2017

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 104566

COMPASSIONATE CARE SENIOR LIVING
933 RIVERSHIRE
CONROE **TX** 77304
Phone (936) 828-3059 **Fax** (936) 828-3059

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

NICOLE WILSON
621 SPRING FOREST CT
CONROE TX 77302
PHONE: (936) 232-9144 **FAX:** (936) 271-9413
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/02/2017

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000322

ELMCROFT OF RIVERSHIRE
450 N RIVERSHIRE
CONROE **TX** 77304
Phone (936) 788-2626 **Fax** (936) 441-5874

TOTAL Lic Capacity: 138 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 38 **TITLE19:** 0
PRIVATE Beds: 138 **TITLE 18/19:** 0

Owner Information

RIVERSHIRE OPERATIONS, LLC
9510 ORMSBY STATION ROAD ,STE 101
LOUISVILLE KY 40223
PHONE: (502) 753-6004 **FAX:** (502) 753-6104
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/01/2017

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105942

FAITHFUL SENIOR CARE
209 BYBEE DR.
CONROE **TX** 77301
Phone (936) 202-8640 **Fax** (936) 202-8638

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

FAITHFUL SENIOR CARE LLC
209 BYBEE DR.
CONROE TX 77301
PHONE: (936) 202-8640 **FAX:** (936) 202-8638
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/17/2016

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103417

GOOD DAY ASSISTED LIVING
3726 WOODCLIFFE DR
CONROE **TX** 77304
Phone (936) 441-5931 **Fax** (936) 441-5931

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

Owner Information

LIVIA ROTARI
3726 WOODCLIFFE DR
CONROE TX 77304
PHONE: **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/02/2018

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105730

HEARTIS CONROE
608 S CONROE MEDICAL DRIVE
CONROE **TX** 77304
Phone (936) 441-4454 **Fax**

TOTAL Lic Capacity: 52 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 52 **TITLE19:** 0
PRIVATE Beds: 52 **TITLE 18/19:** 0

Owner Information

CONROE MC PARTNERS L P
5910 N CENTRAL EXPRESSWAY ,SUITE 200
DALLAS TX 75206
PHONE: **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/13/2017

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 104283

HERITAGE OAKS ASSISTED LIVING AND MEMORY CARE COMMUNITY
903 LONGMIRE RD
CONROE **TX** 77304
Phone (936) 760-2010 **Fax** (936) 760-2030

TOTAL Lic Capacity: 90 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 27 **TITLE19:** 0
PRIVATE Beds: 90 **TITLE 18/19:** 0

Owner Information

CSL S CONROE LLC
14160 DALLAS PKWY ,STE 300
DALLAS TX 75254
PHONE: (972) 308-8366 **FAX:** (972) 387-8216
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/10/2016

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 101166

JANUS
285 HEREFORD DR
CONROE **TX** 77304
Phone (936) 788-7770 **Fax** (936) 788-7785

TOTAL Lic Capacity: 11 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 11 **TITLE 18/19:** 0

Owner Information

NEUROBEHAVIORAL RESOURCES LTD
PO BOX 929
CONROE TX 77305
PHONE: (936) 788-7770 **FAX:** (936) 788-7785
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 06/01/2017

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030252

LOVING KINDNESS ASSISTED LIVING HOME
635 PINEWOOD
CONROE **TX** 77385
Phone (281) 323-4676 **Fax** (281) 323-4676

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

CHRISTINA DEDOMINICIS
635 PINEWOOD
CONROE TX 77385
PHONE: (281) 323-4676 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/03/2016

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 106107

NEW GENESIS
9297 WAHRENBERGER RD
CONROE **TX** 77304
Phone (936) 788-7770 **Fax** (936) 788-7785

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

NEUROBEHAVIORAL RESOURCES LTD
PO BOX 929
CONROE TX 77305
PHONE: (936) 788-7770 **FAX:** (936) 788-7785
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/07/2017

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000993

SERENITY MANOR ROSEBUD HOUSE
11120 FM 1485
CONROE **TX** 77306
Phone (936) 231-3124 **Fax** (936) 231-3122

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

ROSEBUD SENIOR SERVICES LLC
11120 FM 1485
CONROE TX 77306
PHONE: (936) 231-3124 **FAX:** (936) 231-3122
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/16/2017

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000429

SOMERSET
9297 WAHRENBERGER RD
CONROE **TX** 77304
Phone (936) 788-7770 **Fax** (936) 788-7785

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

NEUROBEHAVIORAL RESOURCES LTD
PO BOX 929
CONROE TX 77305
PHONE: (936) 788-7770 **FAX:** (936) 788-7785
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/10/2016

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000698

STRAKE PLACE
1701 WESTVIEW BLVD
CONROE **TX** 77304
Phone (936) 539-5558 **Fax** (936) 539-9858

TOTAL Lic Capacity: 45 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 45 **TITLE 18/19:** 0

Owner Information

STRAKE AID OPCO LLC
301 COMMERCE STREET ,STE 3300
FORT WORTH TX 76102
PHONE: (817) 871-4000 **FAX:** (817) 871-4001
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/11/2017

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000533

TEIGOROC # 1
11184 DAMICO LN
CONROE **TX** 77306
Phone (936) 231-3127 **Fax** (936) 231-4253

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

TEIGO INC
11185 DAMICO LN
CONROE TX 77306
PHONE: (936) 231-3127 **FAX:** (936) 231-4253
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/07/2016

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 100324

THE WELLINGTON AT CONROE
500 RIVER POINTE DR
CONROE **TX** 77304
Phone (936) 756-8643 **Fax** (936) 756-8664

TOTAL Lic Capacity: 35 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 35 **TITLE 18/19:** 0

Owner Information

CSL CE CONROE LLC
14160 DALLAS PKWY ,STE 300
DALLAS TX 75254
PHONE: (972) 308-8366 **FAX:** (972) 387-8216
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/30/2018

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105404

VILLAGE GREEN ALZHEIMERS CARE HOME
404 SOUTH LOOP 336 WEST
CONROE **TX** 77304
Phone (936) 760-2424 **Fax** (936) 760-2454

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

VILLAGE GREEN LLC
404 SOUTH LOOP 336 WEST
CONROE TX 77304
PHONE: (936) 760-2424 **FAX:** (936) 760-2454
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/17/2017

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 101044

WINDSOR
9297 WAHRENBERGER
CONROE **TX** 77304
Phone (936) 788-7770 **Fax** (936) 788-7785

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

NEUROBEHAVIORAL RESOURCES LTD
PO BOX 929
CONROE TX 77305
PHONE: (936) 788-7770 **FAX:** (936) 788-7785
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/03/2017

County **MONTGOMERY** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 100259

BROOKDALE KINGWOOD
919 ROCKMEAD DR
KINGWOOD **TX** 77339
Phone (281) 359-8800 **Fax** (281) 359-8812

TOTAL Lic Capacity: 83 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 40 **TITLE19:** 0
PRIVATE Beds: 83 **TITLE 18/19:** 0

Owner Information

HBP LEASECO LLC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214
PHONE: (414) 918-5000 **FAX:** (414) 918-5054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/01/2017

County **MONTGOMERY** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105248

ISLE AT KINGWOOD
24025 KINGWOOD PLACE DR
KINGWOOD **TX** 77339
Phone (281) 312-4400 **Fax** (832) 644-6090

TOTAL Lic Capacity: 119 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 43 **TITLE19:** 0
PRIVATE Beds: 119 **TITLE 18/19:** 0

Owner Information

SBLP KINGWOOD LLC
5307 E MOCKINGBIRD LANE ,SUITE 1010
DALLAS TX 75206
PHONE: (214) 370-2600 **FAX:** (214) 370-2699
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/01/2017

County **MONTGOMERY** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 050702

SILVERADO SENIOR LIVING KINGWOOD
22955 EASTEX FRWY
KINGWOOD **TX** 77339
Phone (281) 312-2526 **Fax** (281) 312-1040

TOTAL Lic Capacity: 48 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 48 **TITLE19:** 0
PRIVATE Beds: 48 **TITLE 18/19:** 0

Owner Information

SUBTENANT 22955 EASTEX FREEWAY, LLC
4500 DORR STREET
TOLEDO OH 43615
PHONE: (419) 247-2800 **FAX:** (419) 247-2826
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/16/2017

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103637

ASSISTED LIVING OF SENDERA RANCH
5406 RANCH LAKE DR
MAGNOLIA **TX** 77354
Phone (936) 271-1033 **Fax** (936) 441-8185

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

ASSISTED LIVING OF MAGNOLIA INC
12079 WILLOW RIDGE CIRCLE
CONROE TX 77304
PHONE: (281) 804-6182 **FAX:** (936) 441-8185
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/16/2015

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 101825

LLEWELLYNS MAGNOLIA PLACE INC
8912 WEST LANE
MAGNOLIA **TX** 77354
Phone (281) 356-3201 **Fax** (281) 356-3201

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

LLEWELLYNS MAGNOLIA PLACE INC.
8912 WEST LANE
MAGNOLIA TX 77354
PHONE: (281) 356-3201 **FAX:** (281) 356-3201
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/06/2018

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102768

MEMORY LANE ASSISTED LIVING LLC
32802 WRIGHT RD
MAGNOLIA **TX** 77355
Phone (281) 259-9657 **Fax** (281) 259-2936

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

MEMORY LANE ASSISTED LIVING LLC
32802 WRIGHT DR
MAGNOLIA TX 77355
PHONE: (281) 259-9657 **FAX:** (281) 259-2936
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/05/2017

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 104045

STAGECOACH SENIOR LIVING
13715 STAGECOACH RD
MAGNOLIA **TX** 77355
Phone (281) 259-8979 **Fax** (832) 934-0172

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

DAVID FISCU
13715 STAGECOACH RD
MAGNOLIA TX 77355
PHONE: (281) 900-3801 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/01/2018

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105000

GENESIS SENIOR CARE INC
14552 FM 2854
MONTGOMERY **TX** 77316
Phone (936) 588-2432 **Fax** (936) 588-7472

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

GENESIS SENIOR CARE INC
14552 FM 2854
MONTGOMERY TX 77316
PHONE: (936) 588-2678 **FAX:** (936) 588-2678
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/04/2016

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105320

LIVE OAK ASSISTED LIVING
115 LONE STAR BEND
MONTGOMERY **TX** 77356
Phone (936) 597-4140 **Fax**

TOTAL Lic Capacity: 64 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 64 **TITLE 18/19:** 0

Owner Information

LOAL HOLDINGS INC
114 WATERFORD WAY
MONTGOMERY TX 77356
PHONE: (936) 597-4140 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/02/2017

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000886

SILVER HILLS I
23164 LANDRUM VILLAGE DR
MONTGOMERY **TX** 77316
Phone (936) 597-7377 **Fax** (936) 597-7426

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

SCAL MONTGOMERY LLC
2501 E HEBRON PKWY ,STE 100C
CARROLLTON TX 75010
PHONE: (972) 338-9748 **FAX:** (855) 557-2835
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/09/2017

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 100293

SILVER HILLS II
23188 LANDRUM VILLAGE DR
MONTGOMERY **TX** 77316
Phone (936) 597-7377 **Fax** (936) 597-7426

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

SCAL MONTGOMERY LLC
2501 E HEBRON PKWY ,STE 100C
CARROLLTON TX 75010
PHONE: (972) 338-9748 **FAX:** (855) 557-2835
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/09/2017

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103298

SILVER HILLS III
23188 LANDRUM VILLAGE DR
MONTGOMERY **TX** 77316
Phone (936) 597-7377 **Fax** (936) 597-7426

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

SCAL MONTGOMERY LLC
2501 E HEBRON PKWY ,STE 100C
CARROLLTON TX 75010
PHONE: (972) 338-9748 **FAX:** (855) 557-2835
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/29/2017

County **MONTGOMERY** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000906

J AND D HOME CARE 2 LLC
19874 N WHITE OAK DR
NEW CANEY **TX** 77357
Phone (281) 399-7654 **Fax** (281) 399-7654

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

JIMMIE L SMITH
17188 OAK GROVE LN
NEW CANEY TX 77357
PHONE: (281) 429-1838 **FAX:** (281) 429-1838
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/06/2018

County **MONTGOMERY** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000456

J AND D PERSONAL CARE HOME
17188 OAK GROVE LN
NEW CANEY **TX** 77357
Phone (281) 429-1838 **Fax** (281) 429-1838

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

JIMMIE L SMITH
17188 OAK GROVE LN
NEW CANEY TX 77357
PHONE: (281) 429-1838 **FAX:** (281) 429-1838
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/01/2017

County **MONTGOMERY** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 104997

JABEZ HOME CARE
2307 HUMMINGBIRD ST
NEW CANEY **TX** 77357
Phone (281) 689-7839 **Fax** (281) 689-7839

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

JABEZ OUTREACH CENTER INC
2307 HUMMINGBIRD ST
NEW CANEY TX 77357
PHONE: (281) 689-7839 **FAX:** (281) 601-2071
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/29/2016

County **MONTGOMERY** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102301

TOTAL LOVING CARE INC
23370 JOHNSON RD
NEW CANEY **TX** 77357
Phone (281) 399-3718 **Fax**

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

TOTAL LOVING CARE INC
23370 JOHNSON RD
NEW CANEY TX 77357
PHONE: (281) 399-3718 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/13/2018

County **MONTGOMERY** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103825

TOTAL LOVING CARE INC II
23374 JOHNSON RD
NEW CANEY **TX** 77357

Phone (281) 399-8377 **Fax** (281) 399-8377

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 9 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

TOTAL LOVING CARE II INC
23374 JOHNSON RD
NEW CANEY TX 77357

PHONE: (281) 399-8377 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/16/2017

County **MONTGOMERY** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 010337

CARING HANDS
24181 KELLY RD
PORTER **TX** 77365

Phone (281) 354-5254 **Fax** (281) 354-5673

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

DIVINE LIGHT II LLC
24181 KELLY RD
PORTER TX 77365

PHONE: (936) 777-5967 **FAX:** (281) 354-5673

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/09/2018

County **MONTGOMERY** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105440

COMPASSIA, LLC
23979 WILDWOOD RD
PORTER **TX** 77365

Phone (281) 601-6811 **Fax** (281) 601-6822

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

COMPASSIA LLC
23979 WILDWOOD RD
PORTER TX 77365

PHONE: (281) 601-6811 **FAX:** (281) 601-6822

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/03/2018

County **MONTGOMERY** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105336

LOVING COMFORT SENIOR CARE
20432 LANA LANE
PORTER **TX** 77365

Phone (281) 312-1339 **Fax** (281) 312-2994

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

LOVING COMFORT SENIOR CARE
20432 LANA LN
PORTER TX 77365

PHONE: (281) 312-1339 **FAX:** (281) 312-1994

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/15/2017

County **MONTGOMERY** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105421

PLANTATION ASSISTED LIVING B, LLC
19926 S.PLANTATION ESTATE
PORTER **TX** 77365

Phone (281) 354-5964 **Fax** (281) 577-0199

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

PLANTATION ASSISTED LIVING LLC
19930 PLANTATION ESTATES
PORTER TX 77365

PHONE: (281) 354-1886 **FAX:** (281) 577-0199

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/30/2017

County **MONTGOMERY** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103990

PLANTATION ASSISTED LIVING, LLC
19930 S PLANTATION ESTATES
PORTER **TX** 77365

Phone (281) 354-1886 **Fax** (218) 577-0199

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 8 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

PLANTATION ASSISTED LIVING LLC
19930 PLANTATION ESTATES
PORTER TX 77365

PHONE: (281) 354-1886 **FAX:** (281) 577-0199

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/16/2015

County **MONTGOMERY** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105684

GRACE ELDERLY CARE HOME LLC
25615 SPRING RIDGE DR
SPRING **TX** 77386
Phone (281) 419-8707 **Fax** (281) 419-8707

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

GRACE ELDERLY CARE HOME LLC
25615 SPRING RIDGE DR
SPRING TX 77386
PHONE: (281) 419-8707 **FAX:** (281) 419-8707
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/20/2018

County **MONTGOMERY** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 104078

GRACE MEMORY CARE II
25610 OAKHURST DR
SPRING **TX** 77386
Phone (832) 677-2901 **Fax** (281) 419-3165

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

GRACE MEMORY CARE INC
423 PINEWOOD RIDGE DR
SPRING TX 77386
PHONE: (832) 677-2901 **FAX:** (281) 419-3165
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/22/2018

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103452

HELENS CARE COTTAGES
710 SHADOW BROOK DR
SPRING **TX** 77380
Phone (713) 419-7357 **Fax** (936) 321-7516

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

GEL BUDDE LLC
43 WINGED FT DR
CONROE TX 77304
PHONE: (713) 419-7357 **FAX:** (936) 321-7516
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/12/2016

County **MONTGOMERY** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105291

THE PINES AT OAKHURST
25206 OAKHURST DR
SPRING **TX** 77386
Phone (832) 585-0624 **Fax**

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

WMF HOLDINGS LLC
25705 OAKHURST DR
SPRING TX 77386
PHONE: (281) 825-9223 **FAX:** (281) 351-1026
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/30/2017

County **MONTGOMERY** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102983

UCGA, LLC
29730 SPRING TERRACE
SPRING **TX** 77386
Phone (281) 924-7173 **Fax** (936) 448-2185

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

Owner Information

UCGA, LLC
29730 SPRING TERRACE
SPRING TX 77386
PHONE: (281) 924-7173 **FAX:** (936) 588-1512
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/09/2016

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 101708

UNLIMITED CARE -- BUDDE #2
25707 BUDDE RD
SPRING **TX** 77380
Phone (713) 419-2609 **Fax** (936) 321-2795

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

GEL PARTNERSHIP INC
31 WINDFERN PL
SPRING TX 77382
PHONE: (713) 858-6821 **FAX:** (936) 321-2795
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/27/2017

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102006

UNLIMITED CARE -- BUDDE #3
25711 BUDDE RD
SPRING **TX** 77381
Phone (713) 419-2609 **Fax** (936) 321-2795

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information
GEL PARTNERSHIP INC
31 WINDFERN PL
SPRING TX 77382
PHONE: (713) 858-6821 **FAX:** (936) 321-2795
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/27/2017

County **MONTGOMERY** Reg Svcs: UNIT 08 Region 06 - HOUSTON

Facility Information: **Facility ID:** 104487

UNLIMITED CARE - OAKRIDGE
26222 HANNA RD
SPRING **TX** 77386
Phone (281) 298-1649 **Fax** (936) 321-2795

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information
GEL PARTNERSHIP INC
31 WINDFERN PL
SPRING TX 77382
PHONE: (713) 858-6821 **FAX:** (936) 321-2795
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/17/2016

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103909

UNLIMITED CARE ASSISTED LIVING COTTAGES
2027 CHERRY LAUREL DR
SPRING **TX** 77386
Phone (713) 419-2609 **Fax** (936) 321-2795

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 7 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information
GEL PARTNERSHIP INC
31 WINDFERN PL
SPRING TX 77382
PHONE: (713) 858-6821 **FAX:** (936) 321-2795
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/17/2018

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 101315

UNLIMITED CARE BUDDE
25703 BUDDE RD
SPRING **TX** 77380
Phone (713) 419-2609 **Fax** (936) 321-2795

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information
GEL PARTNERSHIP INC
31 WINDFERN PL
SPRING TX 77382
PHONE: (713) 858-6821 **FAX:** (936) 321-2795
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/01/2018

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103673

UNLIMITED CARE...ASSISTED LIVING COTTAGES
25715 BUDDE RD
SPRING **TX** 77380
Phone (713) 419-2609 **Fax** (936) 321-2795

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information
GEL PARTNERSHIP INC
31 WINDFERN PL
SPRING TX 77382
PHONE: (713) 858-6821 **FAX:** (936) 321-2795
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/09/2017

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103125

AUTUMN GROVE - WOODLANDS
5000 W ALDEN BRIDGE DR
THE WOODLANDS **TX** 77382
Phone (281) 362-0900 **Fax** (281) 698-1222

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information
GLEN HOPE HARBOR INC
101 FIREBIRD COVE
LAKEWAY TX 78734
PHONE: (469) 371-0445 **FAX:** (512) 761-3548
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/26/2017

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 104378

AUTUMN LEAVES OF THE WOODLANDS
10700 MONTFAIR BOULEVARD
THE WOODLANDS **TX** 77382

Phone (832) 764-5324 **Fax** (832) 764-5327

TOTAL Lic Capacity: 44 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 44 **TITLE19:** 0
PRIVATE Beds: 44 **TITLE 18/19:** 0

Owner Information

THE WOODLANDS ARC TENANT LLC
545 E JOHN CARPENTER FREEWAY ,STE 500
IRVING TX 75062

PHONE: (241) 845-4500 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/31/2017

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 106594

AVANTI SENIOR LIVING AT VISION PARK
120 VISION PARK DRIVE
THE WOODLANDS **TX** 77384

Phone (281) 882-3855 **Fax**

TOTAL Lic Capacity: 58 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 40 **TITLE19:** 0
PRIVATE Beds: 58 **TITLE 18/19:** 0

Owner Information

IP AVANTI VISION PARK OPCO LLC
2219 SAWDUST RD ,STE 1903
THE WOODLANDS TX 77380

PHONE: (281) 907-9553 **FAX:** (281) 306-2382

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/29/2018

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 105425

BEREAN VILLAS LLC
13430 PARK AVENUE
THE WOODLANDS **TX** 77384

Phone (832) 273-3658 **Fax**

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

BEREAN ESTATES LLC
13430 PARK AVE
CONROE TX 77384

PHONE: (281) 513-8383 **FAX:** (832) 202-0922

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/07/2017

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 050724

BROOKDALE THE WOODLANDS
1730 WOODSTEAD CT
THE WOODLANDS **TX** 77380

Phone (281) 681-9900 **Fax** (281) 681-9489

TOTAL Lic Capacity: 120 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 39 **TITLE19:** 0
PRIVATE Beds: 120 **TITLE 18/19:** 0

Owner Information

HBP LEASECO LLC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214

PHONE: (414) 918-5000 **FAX:** (414) 918-5054

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/01/2017

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 103213

GRACE RESIDENTIAL CARE HOME INC
25914 OAKRIDGE DR
THE WOODLANDS **TX** 77380

Phone (832) 291-6089 **Fax** (281) 419-9721

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

GRACE RESIDENTIAL CARE HOME INC
25914 OAKRIDGE DR
THE WOODLANDS TX 77380

PHONE: (832) 291-6089 **FAX:** (281) 419-9721

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/01/2018

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030375

SILVERADO SENIOR LIVING THE WOODLANDS
7950 BAYBRANCH DR
THE WOODLANDS **TX** 77382

Phone (281) 681-8000 **Fax** (281) 681-8001

TOTAL Lic Capacity: 48 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 48 **TITLE19:** 0
PRIVATE Beds: 48 **TITLE 18/19:** 0

Owner Information

SUBTENANT 7950 BAYBRANCH DRIVE LLC
4500 DORR STREET
TOLEDO OH 43615

PHONE: (419) 247-2800 **FAX:** (419) 247-2826

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/11/2017

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030266

THE FORUM AT THE WOODLANDS
5055 W PANTHER CREEK DR
THE WOODLANDS **TX** 77381

Phone (281) 292-2600 **Fax** (281) 292-1836

TOTAL Lic Capacity: 54 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 20 **TITLE19:** 0
PRIVATE Beds: 54 **TITLE 18/19:** 0

Owner Information

FIVE STAR WOODLANDS LLC
5055 W PANTHER CREEK DR
THE WOODLANDS TX 77381

PHONE: (617) 796-8387 **FAX:** (617) 219-1435

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/01/2018

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000722

THE FORUM AT THE WOODLANDS
5055 W PANTHER CREEK DR
THE WOODLANDS **TX** 77381

Phone (281) 292-2600 **Fax** (281) 292-1836

TOTAL Lic Capacity: 126 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 126 **TITLE 18/19:** 0

Owner Information

FIVE STAR WOODLANDS LLC
5055 W PANTHER CREEK DR
THE WOODLANDS TX 77381

PHONE: (617) 796-8387 **FAX:** (617) 219-1435

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/01/2018

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 104849

THE VILLAGE AT THE WOODLANDS WATERWAY
2323 LAKE ROBBINS DR
THE WOODLANDS **TX** 77380

Phone (281) 292-4600 **Fax** (281) 292-4622

TOTAL Lic Capacity: 119 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 34 **TITLE19:** 0
PRIVATE Beds: 119 **TITLE 18/19:** 0

Owner Information

SLH WOODLANDS MANAGER, LLC
303 E WACKER DR ,STE 2400
CHICAGO IL 60601

PHONE: (312) 673-4333 **FAX:** (312) 673-4487

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/19/2017

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 106007

OLIMPIA'S SENIOR CARE, LLC
13571 NEEDHAM PLACE
WILLIS **TX** 77318

Phone (936) 344-6126 **Fax** (866) 345-2396

TOTAL Lic Capacity: 11 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 11 **TITLE 18/19:** 0

Owner Information

OLIMPIA'S SENIOR CARE LLC
13571 NEEDHAM PLACE
WILLIS TX 77318

PHONE: (936) 344-6126 **FAX:** (866) 345-2396

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/17/2016

County **MONTGOMERY** Reg Svcs: UNIT 16 Region 06 - HOUSTON

Facility Information: **Facility ID:** 102843

VIRGINIA'S LAKEVIEW HOME
14450 LONGSTREET RD
WILLIS **TX** 77318

Phone (936) 228-0941 **Fax** (936) 890-7348

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

DIVAYA LLC
12646 ARIES LOOP
WILLIS TX 77318

PHONE: (936) 689-2546 **FAX:** (936) 890-7348

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/14/2017

County **MORRIS** Reg Svcs: TYLER NW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 103419

BLUEBONNET ELITE ASSISTED LIVING
102 FLOYD ST
NAPLES **TX** 75568

Phone (903) 897-9600 **Fax**

TOTAL Lic Capacity: 62 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 62 **TITLE 18/19:** 0

Owner Information

TEXAS ENTERPRISES LLC
PO BOX 1200
NAPLES TX 75568

PHONE: **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/12/2016

County **NACOGDOCHES** Reg Svcs: NACOGDOCHES GERIATRIC Region 05 - BEAUMONT

Facility Information: **Facility ID:** 102964

MAGNOLIA COURT ASSISTED LIVING AND MEMORY CARE COMMUNITY
5902 N STREET
NACOGDOCHES **TX** 75965
Phone (936) 569-6227 **Fax** (936) 569-6231

TOTAL Lic Capacity: 70 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 70 **TITLE 18/19:** 0

Owner Information

CSL S NACOGDOCHES, LLC
14160 DALLAS PARKWAY ,SUITE 300
DALLAS TX 75254
PHONE: (972) 308-8366 **FAX:** (972) 387-8216
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/10/2016

County **NACOGDOCHES** Reg Svcs: NACOGDOCHES GERIATRIC Region 05 - BEAUMONT

Facility Information: **Facility ID:** 000491

MEADOWVIEW PLACE
901 OAKVIEW DR
NACOGDOCHES **TX** 75961
Phone (936) 559-9055 **Fax** (936) 564-6794

TOTAL Lic Capacity: 36 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 36 **TITLE 18/19:** 0

Owner Information

AUSTIN AID OPCO LLC
330 N WABASH AVE ,STE 3700
CHICAGO IL 60611
PHONE: (312) 725-7000 **FAX:** (312) 332-5300
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/11/2017

County **NACOGDOCHES** Reg Svcs: NACOGDOCHES GERIATRIC Region 05 - BEAUMONT

Facility Information: **Facility ID:** 000668

THE ARBOR ASSISTED LIVING
3002 WESTWARD DR
NACOGDOCHES **TX** 75964
Phone (936) 560-1272 **Fax** (936) 560-1682

TOTAL Lic Capacity: 62 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 62 **TITLE 18/19:** 0

Owner Information

PSL ARBOR OPERATIONS, LLC
8214 WESTCHESTER DRIVE ,STE. 600
DALLAS TX 75225
PHONE: (214) 736-7007 **FAX:** (214) 736-7020
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/08/2017

County **NAVARRO** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000666

BROOKDALE CORSICANA
3329 W 7TH AVE
CORSICANA **TX** 75110
Phone (903) 872-8400 **Fax** (903) 872-0168

TOTAL Lic Capacity: 50 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 50 **TITLE 18/19:** 0

Owner Information

BROOKDALE SENIOR LIVING COMMUNITIES INC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214
PHONE: (414) 918-5441 **FAX:** (414) 918-6076
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/05/2016

County **NAVARRO** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000478

HERITAGE OAKS RETIREMENT VILLAGE
3002 W 2ND AVE
CORSICANA **TX** 75110
Phone (903) 872-5130 **Fax** (903) 872-5949

TOTAL Lic Capacity: 92 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 92 **TITLE 18/19:** 0

Owner Information

PM MANAGEMENT - CORSICANA NC II, LLC
1703 W FIFTH ST ,STE 800
AUSTIN TX 78703
PHONE: (512) 634-4941 **FAX:** (877) 639-9530
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/01/2017

County **NEWTON** Reg Svcs: BEAUMONT GERIATRIC Region 05 - BEAUMONT

Facility Information: **Facility ID:** 103224

ROSEWOOD ASSISTED-LIVING CENTER INC
1010 HIGHWAY 87 SOUTH
NEWTON **TX** 75966
Phone (409) 379-2047 **Fax** (409) 379-2048

TOTAL Lic Capacity: 25 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 25 **TITLE 18/19:** 0

Owner Information

ROSEWOOD ASSISTED-LIVING CENTER INC
1010 HWY 87 S
NEWTON TX 75966
PHONE: (409) 379-2047 **FAX:** (409) 379-2048
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/16/2016

County **NOLAN** Reg Svcs: ABILENE GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 000501

HOYT PLACE
1700 HOYT AVE
SWEETWATER **TX** 79556

Phone (325) 235-5655 **Fax** (325) 235-5391

TOTAL Lic Capacity: 36 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 36 **TITLE 18/19:** 0

Owner Information

HOYT AID OPCO LLC
330 N. WABASH ,STE 3700
CHICAGO IL 60611

PHONE: (312) 725-7000 **FAX:** (312) 332-5300

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/11/2017

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

Facility Information: **Facility ID:** 000330

BROOKDALE CORPUS CHRISTI
6410 MEADOWVISTA BLVD
CORPUS CHRISTI **TX** 78414

Phone (361) 985-0555 **Fax** (361) 985-6128

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 20 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

ARC HOMEWOOD CORPUS CHRISTI LLC
111 WESTWOOD PL ,STE 400
BRENTWOOD TN 37027

PHONE: (414) 918-5441 **FAX:** (414) 918-6076

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/09/2018

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

Facility Information: **Facility ID:** 030038

GARDEN ESTATES OF CORPUS CHRISTI ASSISTED LIVING COMMUNITY
2709 CIMARRON BLVD
CORPUS CHRISTI **TX** 78414

Phone (361) 980-8200 **Fax** (361) 980-8288

TOTAL Lic Capacity: 67 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 67 **TITLE 18/19:** 0

Owner Information

LSREF GOLDEN OPS 26 (TX) II LLC
3500 LENOX RD NE ,STE 510
ATLANTA GA 30326

PHONE: (770) 754-9660 **FAX:** (770) 754-3085

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/01/2016

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

Facility Information: **Facility ID:** 000682

HOLMGREEN CENTER
317 N CARANCAHUA ST
CORPUS CHRISTI **TX** 78401

Phone (361) 887-2000 **Fax** (361) 884-3320

TOTAL Lic Capacity: 90 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 22 **TITLE19:** 0
PRIVATE Beds: 90 **TITLE 18/19:** 0

Owner Information

TRINITY TOWERS LIMITED PARTNERSHIP
111 WESTWOOD PLACE ,#400
BRENTWOOD TN 37027

PHONE: (615) 221-2250 **FAX:** (866) 885-0538

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/25/2017

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

Facility Information: **Facility ID:** 102612

JMJ SENIOR CITIZEN GROUP HOME
4301 KEY WEST
CORPUS CHRISTI **TX** 78411

Phone (361) 334-7460 **Fax** (361) 334-5598

TOTAL Lic Capacity: 11 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 11 **TITLE 18/19:** 0

Owner Information

JOEL A GARCIA
4301 KEYWEST
CORPUS CHRISTI TX 78411

PHONE: (361) 815-8384 **FAX:** (361) 334-5598

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/01/2017

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

Facility Information: **Facility ID:** 104912

MIRADOR
5857 TIMBERGATE DR
CORPUS CHRISTI **TX** 78414

Phone (361) 994-0906 **Fax**

TOTAL Lic Capacity: 66 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 18 **TITLE19:** 0
PRIVATE Beds: 66 **TITLE 18/19:** 0

Owner Information

SQLC SENIOR LIVING CENTER AT CORPUS CHRISTI INC
12720 HILLCREST RD ,SUITE 106
DALLAS TX 75230

PHONE: (469) 916-8958 **FAX:** (215) 623-6115

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/29/2017

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

Facility Information: **Facility ID:** 000607

MOUNT CARMEL HOME
4130 S ALAMEDA ST
CORPUS CHRISTI **TX** 78411
Phone (361) 855-6243 **Fax** (361) 854-8513

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

THE CARMELITE SISTERS D C J
4130 S ALAMEDA ST
CORPUS CHRISTI TX 78411
PHONE: (361) 855-6243 **FAX:** (361) 854-8513
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/01/2018

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

Facility Information: **Facility ID:** 000662

SENIOR CARE OF CORPUS CHRISTI
202 FORTUNE DR
CORPUS CHRISTI **TX** 78405
Phone (361) 289-0889 **Fax** (361) 289-7516

TOTAL Lic Capacity: 66 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 66 **TITLE 18/19:** 0

Owner Information

CORPUS CHRISTI SCC LLC
600 N PEARL ST ,STE 1100
DALLAS TX 75201
PHONE: (214) 252-7600 **FAX:** (214) 252-7599
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/01/2018

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

Facility Information: **Facility ID:** 000815

THE WATERFORD AT CORPUS CHRISTI
5813 ESPLANADE DR
CORPUS CHRISTI **TX** 78414
Phone (361) 991-9600 **Fax** (361) 980-8989

TOTAL Lic Capacity: 56 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 56 **TITLE 18/19:** 0

Owner Information

CSL CE CORPUS LLC
14160 DALLAS PKWY ,STE 300
DALLAS TX 75254
PHONE: (972) 308-8366 **FAX:** (972) 387-8216
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/17/2016

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

Facility Information: **Facility ID:** 106554

THRIVE MEMORY CARE AT CORPUS CHRISTI
7245 MCARDLE ROAD
CORPUS CHRISTI **TX** 78412
Phone (361) 288-4695 **Fax**

TOTAL Lic Capacity: 64 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 64 **TITLE19:** 0
PRIVATE Beds: 64 **TITLE 18/19:** 0

Owner Information

THRIVE IN OSO BAY, LLC
7245 MCARDLE
CORPUS CHRISTI TX 78412
PHONE: **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/06/2018

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

Facility Information: **Facility ID:** 000317

VILLA OF CORPUS CHRISTI SOUTH
4834 YORKTOWN BLVD
CORPUS CHRISTI **TX** 78413
Phone (361) 991-3252 **Fax** (361) 991-2368

TOTAL Lic Capacity: 96 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 40 **TITLE19:** 0
PRIVATE Beds: 96 **TITLE 18/19:** 0

Owner Information

VILLA QUILT OF CORPUS SOUTH LIMITED PARTNERSHIP
4834 YORKTOWN BLVD
CORPUS CHRISTI TX 87413
PHONE: (505) 797-8735 **FAX:** (505) 797-9003
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/01/2017

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

Facility Information: **Facility ID:** 000927

VILLA RESIDENTIAL CARE OF CORPUS CHRISTI NORTHWEST
2822 ROBBY
CORPUS CHRISTI **TX** 78410
Phone (361) 242-9446 **Fax** (361) 242-9764

TOTAL Lic Capacity: 80 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 80 **TITLE 18/19:** 0

Owner Information

VILLA QUILT OF CORPUS NORTHWEST LIMITED PARTNERSHIP
5353 WYOMING BLVD ,STE A
ALBUQUERQUE NM 87109
PHONE: (505) 797-8735 **FAX:** (505) 797-9003
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/01/2018

County **OCHILTREE** Reg Svcs: HIGH PLAINS GERI 1 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 100949

THE SEASONS
401 SW 24TH AVE
PERRYTON **TX** 79070

Phone (806) 648-1884 **Fax** (806) 648-1878

TOTAL Lic Capacity: 54 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 54 **TITLE 18/19:** 0

Owner Information

OCHILTREE COUNTY HOSPITAL DISTRICT
3101 GARRETT DR
PERRYTON TX 79070

PHONE: (806) 435-3606 **FAX:** (806) 648-2813

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/29/2018

County **ORANGE** Reg Svcs: BEAUMONT GERIATRIC Region 05 - BEAUMONT

Facility Information: **Facility ID:** 100548

ANSWERED PRAYER
602 AZALEA AVE
ORANGE **TX** 77630

Phone (409) 670-9841 **Fax** (409) 670-9841

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

JKW HALOS AND HORNS INC
602 AZALEA AVE
ORANGE TX 77630

PHONE: (409) 313-1044 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/13/2017

County **ORANGE** Reg Svcs: BEAUMONT GERIATRIC Region 05 - BEAUMONT

Facility Information: **Facility ID:** 101381

GOLDEN YEARS ASSISTED LIVING
16532 S HWY 62 S
ORANGE **TX** 77630

Phone (409) 745-9096 **Fax** (409) 745-9956

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

SILVER SENTINEL INCORPORATED
3616 SHERWOOD DR
ORANGE TX 77632

PHONE: (409) 767-9289 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/15/2017

County **ORANGE** Reg Svcs: BEAUMONT GERIATRIC Region 05 - BEAUMONT

Facility Information: **Facility ID:** 000468

SABINE PLACE
5301 MEEKS DR
ORANGE **TX** 77630

Phone (936) 559-9055 **Fax** (409) 883-8302

TOTAL Lic Capacity: 42 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 42 **TITLE 18/19:** 0

Owner Information

SABINE AID OPCO LLC
330 N. WABASH AVE. ,STE. 3700
CHICAGO IL 60611

PHONE: (312) 725-7000 **FAX:** (312) 332-5300

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/11/2017

County **PALO PINTO** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000672

LAKEWELL PLACE
3005 NORTHEAST 2ND ST
MINERAL WELLS **TX** 76067

Phone (940) 325-7979 **Fax** (940) 328-0699

TOTAL Lic Capacity: 36 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 36 **TITLE 18/19:** 0

Owner Information

LAKEWELL AID OPCO LLC
330 N WABASH ,STE 3700
CHICAGO IL 60611

PHONE: (312) 728-7000 **FAX:** (312) 332-5300

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/11/2017

County **PALO PINTO** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105535

SERENITY ESTATES, LLC
401 NW 4TH STREET
MINERAL WELLS **TX** 76067

Phone (940) 325-3744 **Fax** (940) 325-3093

TOTAL Lic Capacity: 26 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 26 **TITLE 18/19:** 0

Owner Information

SERENITY ESTATES LLC
401 NW 4TH STREET
MINERAL WELLS TX 76067

PHONE: (940) 325-3744 **FAX:** (940) 325-3093

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/05/2017

County **PANOLA** Reg Svcs: NACOGDOCHES GERIATRIC Region 04 - TYLER

Facility Information: **Facility ID:** 102017

CARRIES ASSISTED LIVING CENTER
2625 CR 302
CARTHAGE **TX** 75633
Phone (903) 694-9290 **Fax** (903) 694-9191

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

GRACELAND PERSONAL CARE HOMES INC
PO BOX 329
CARTHAGE TX 75633
PHONE: (903) 693-9617 **FAX:** (903) 694-9191
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/01/2018

County **PANOLA** Reg Svcs: NACOGDOCHES GERIATRIC Region 04 - TYLER

Facility Information: **Facility ID:** 101654

MARIAN PLACE INC
1690 NE LOOP
CARTHAGE **TX** 75633
Phone (903) 690-0556 **Fax** (903) 690-0526

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 14 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

MARIAN PLACE INC
1690 NE LOOP
CARTHAGE TX 75633
PHONE: (903) 690-0556 **FAX:** (903) 690-0526
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/01/2016

County **PANOLA** Reg Svcs: NACOGDOCHES GERIATRIC Region 04 - TYLER

Facility Information: **Facility ID:** 000979

WINKLER PLACE
513 NORTH ADAMS
CARTHAGE **TX** 75633
Phone (903) 694-2525 **Fax** (903) 694-2644

TOTAL Lic Capacity: 36 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 36 **TITLE 18/19:** 0

Owner Information

WINKLER AID OPCO LLC
330 N WABASH ,STE 3700
CHICAGO IL 60611
PHONE: (312) 725-7000 **FAX:** (312) 332-5300
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/11/2017

County **PANOLA** Reg Svcs: TYLER SE TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 030363

HAPPY ACRES PERSONAL CARE
5154 US HWY 79 N
DE BERRY **TX** 75639
Phone (903) 622-4596 **Fax** (903) 622-4806

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

ELZENA FITE
5154 US HWY 79 N
DE BERRY TX 75639
PHONE: (903) 622-4596 **FAX:** (903) 622-4806
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/19/2018

County **PARKER** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102371

ARBOR HOUSE OF WEATHERFORD
1101 JAMESON STREET
WEATHERFORD **TX** 76086
Phone (817) 599-5075 **Fax**

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

WEATHERFORD TX ARBOR HOUSE, LP
2401 TEE CIRCLE ,STE 103
NORMAN OK 73069
PHONE: (405) 292-1040 **FAX:** (405) 360-3301
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/18/2017

County **PARKER** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030057

ARBOR HOUSE OF WEATHERFORD
1101 JAMESON ST
WEATHERFORD **TX** 76086
Phone (817) 599-5075 **Fax** (817) 613-9230

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

WEATHERFORD TX ARBOR HOUSE, LP
2401 TEE CIRCLE ,STE 103
NORMAN OK 73069
PHONE: (405) 292-1040 **FAX:** (405) 360-3301
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/27/2016

County **PARKER** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000611

AUTUMN HILL MANOR
202 W RENTZ ST
WEATHERFORD **TX** 76086

Phone (817) 596-4159 **Fax** (817) 598-1696

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

AUTUMN H MANOR INC
1240 STANHOPE CT
SOUTHLAKE TX 76092

PHONE: (817) 329-2739 **FAX:** (817) 598-1696

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/20/2018

County **PARKER** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 100164

AUTUMN HILL MANOR
228 W RENTZ ST
WEATHERFORD **TX** 76086

Phone (817) 596-4159 **Fax** (817) 598-1696

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

AUTUMN H MANOR INC
1240 STANHOPE CT
SOUTHLAKE TX 76092

PHONE: (817) 329-2739 **FAX:** (817) 598-1696

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/20/2017

County **PARKER** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000808

BROOKDALE WEATHERFORD
904 S LAMAR ST
WEATHERFORD **TX** 76086

Phone (817) 341-4100 **Fax** (817) 341-4101

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

BROOKDALE SENIOR LIVING COMMUNITIES INC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214

PHONE: (414) 918-5441 **FAX:** (414) 918-6076

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/01/2016

County **PARKER** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000755

HILLTOP PARK REHABILITATION AND CARE CENTER
970 HILLTOP DR
WEATHERFORD **TX** 76086

Phone (817) 596-9001 **Fax** (817) 599-3823

TOTAL Lic Capacity: 40 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 40 **TITLE 18/19:** 0

Owner Information

HOLLAND LAKE OHANA LLC
970 HILLTOP DR
WEATHERFORD TX 76086

PHONE: (817) 596-9001 **FAX:** (817) 599-3823

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/13/2017

County **PARKER** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102928

MARTIN CREST ASSISTED LIVING AND MEMORY CARE COMMUNITY
1818 MARTIN DR
WEATHERFORD **TX** 76086

Phone (817) 341-1169 **Fax** (817) 598-0926

TOTAL Lic Capacity: 70 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 70 **TITLE 18/19:** 0

Owner Information

CSL S WEATHERFORD LLC
14160 DALLAS PARKWAY ,STE 300
DALLAS TX 75254

PHONE: (972) 308-8366 **FAX:** (972) 387-8216

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/10/2016

County **PARMER** Reg Svcs: HIGH PLAINS GERI 1 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 100379

FRIONA HERITAGE ESTATES
201 E15TH STREET
FRIONA **TX** 79035

Phone (806) 250-5599 **Fax** (806) 250-2132

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

CITY OF FRIONA
623 MAIN
FRIONA TX 79035

PHONE: (806) 250-2761 **FAX:** (806) 250-2132

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/21/2018

County **POLK** Reg Svcs: BEAUMONT GERIATRIC Region 05 - BEAUMONT

Facility Information: **Facility ID:** 102678

GOOD SHEPHERD ASSISTED LIVING HOME
703 N. HOUSTON ST
LIVINGSTON **TX** 77351
Phone (936) 327-9956 **Fax** (936) 327-9957

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

GOOD SHEPHERD ASSISTED LIVING
703 N HOUSTON
LIVINGSTON TX 77351
PHONE: (936) 327-9956 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/23/2018

County **POLK** Reg Svcs: BEAUMONT GERIATRIC Region 05 - BEAUMONT

Facility Information: **Facility ID:** 105331

PROVIDENT MEMORY CARE CENTER
1810 N. WASHINGTON AVE.
LIVINGSTON **TX** 77351
Phone (936) 327-8195 **Fax** (866) 245-6709

TOTAL Lic Capacity: 44 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 44 **TITLE19:** 0
PRIVATE Beds: 44 **TITLE 18/19:** 0

Owner Information

PROVIDENT MEMORY CARE GROUP LLC
12515 RESEARCH BLVD ,BLDG 7 STE 200-B
AUSTIN TX 78759
PHONE: (512) 630-4550 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/02/2017

County **POLK** Reg Svcs: BEAUMONT GERIATRIC Region 05 - BEAUMONT

Facility Information: **Facility ID:** 104411

TALL PINES ASSISTED LIVING
1437 SOUTH FM 1988
LIVINGSTON **TX** 77351
Phone (936) 967-3636 **Fax** (936) 967-3635

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

TALL PINES ASSISTED LIVING
1437 SOUTH FM 1988
LIVINGSTON TX 77351
PHONE: (936) 967-3636 **FAX:** (936) 967-3635
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 06/23/2018

County **POLK** Reg Svcs: BEAUMONT GERIATRIC Region 05 - BEAUMONT

Facility Information: **Facility ID:** 100218

THE GARDENS AT LIVINGSTON
501 GARDEN RIDGE DR
LIVINGSTON **TX** 77351
Phone (936) 327-3141 **Fax** (936) 327-0038

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

CARROLL PARTNERS INVESTMENT NO 2 INC
601 GARDEN RIDGE DR
LIVINGSTON TX 77351
PHONE: (903) 327-3141 **FAX:** (936) 327-0038
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/01/2016

County **POLK** Reg Svcs: BEAUMONT GERIATRIC Region 05 - BEAUMONT

Facility Information: **Facility ID:** 100408

THE GARDENS AT LIVINGSTON
601 GARDEN RIDGE DR
LIVINGSTON **TX** 77351
Phone (936) 327-3141 **Fax** (936) 327-0038

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

CARROLL PARTNERS INVESTMENT NO 2 INC
601 GARDEN RIDGE DR
LIVINGSTON TX 77351
PHONE: (903) 327-3141 **FAX:** (936) 327-0038
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/01/2016

County **POTTER** Reg Svcs: HIGH PLAINS GERI 1 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 050721

BROOKDALE MEDI PARK WEST
7404 WALLACE BLVD
AMARILLO **TX** 79106
Phone (806) 356-8346 **Fax** (806) 355-7043

TOTAL Lic Capacity: 80 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 80 **TITLE 18/19:** 0

Owner Information

EMERITUS CORPORATION
6737 W. WASHINGTON STREET ,SUITE 2300
MILWAUKEE WI 53214
PHONE: (414) 918-5000 **FAX:** (414) 918-5054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/31/2016

County **POTTER** Reg Svcs: HIGH PLAINS GERI 1 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 103028

DR WINFRED AND ELIZABETH MOORE ASSISTED LIVING CENTER
400 SW 14TH ST
AMARILLO **TX** 79101
Phone (806) 337-5176 **Fax** (806) 337-5075

TOTAL Lic Capacity: 34 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 34 **TITLE 18/19:** 0

Owner Information

BAPTIST COMMUNITY SERVICES
701 PARK PLACE ,SECOND FL
AMARILLO TX 79101
PHONE: (806) 337-5292 **FAX:** (806) 337-5075
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/22/2017

County **POTTER** Reg Svcs: HIGH PLAINS GERI 1 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 103381

GOOD LIFE ASSISTED LIVING
928 WESTWOOD DR
AMARILLO **TX** 79124
Phone (806) 418-4320 **Fax** (806) 418-4323

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

WESTWOOD DRIVE ENTERPRISES LLC
21211 FM 179
WOLFFORTH TX 79382
PHONE: (806) 855-6464 **FAX:** (806) 855-4092
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/06/2017

County **POTTER** Reg Svcs: HIGH PLAINS GERI 1 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 000895

HARRINGTON ASSISTED LIVING CENTER
401 S W 12TH
AMARILLO **TX** 79101
Phone (806) 337-5191 **Fax** (806) 337-5075

TOTAL Lic Capacity: 120 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 120 **TITLE 18/19:** 0

Owner Information

BAPTIST COMMUNITY SERVICES
701 PARK PLACE ,SECOND FL
AMARILLO TX 79101
PHONE: (806) 337-5292 **FAX:** (806) 337-5075
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/21/2017

County **POTTER** Reg Svcs: HIGH PLAINS GERI 1 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 106345

HEARTIS AMARILLO
1610 RESEARCH
AMARILLO **TX** 79106
Phone (806) 353-1900 **Fax**

TOTAL Lic Capacity: 96 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 35 **TITLE19:** 0
PRIVATE Beds: 96 **TITLE 18/19:** 0

Owner Information

HEARTIS AMARILLO PARTNERS, LP
5910 N CENTRAL EXPRESSWAY ,SUITE 200
DALLAS TX 75206
PHONE: (214) 916-5750 **FAX:** (469) 547-5422
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/02/2017

County **POTTER** Reg Svcs: HIGH PLAINS GERI 1 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 000505

PLUM CREEK PLACE
6800 PLUM CREEK DR
AMARILLO **TX** 79124
Phone (806) 353-5185 **Fax** (806) 353-6912

TOTAL Lic Capacity: 58 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 58 **TITLE 18/19:** 0

Owner Information

POTTER AID OPCO LLC
301 COMMERCE STREET ,STE 3300
FORT WORTH TX 76102
PHONE: (817) 871-4000 **FAX:** (817) 871-4001
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/11/2017

County **POTTER** Reg Svcs: HIGH PLAINS GERI 1 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 000393

SAGECREEK ASSISTED LIVING
5500 WEST 9TH AVE
AMARILLO **TX** 79106
Phone (806) 352-7244 **Fax** (806) 467-7473

TOTAL Lic Capacity: 52 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 52 **TITLE 18/19:** 0

Owner Information

ER OPCO CRAIG LLC
P O BOX 2107
BRENTWOOD TN 30924-2107
PHONE: **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/28/2017

County **POTTER** Reg Svcs: HIGH PLAINS GERI 1 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 010318

THE COTTAGES AT QUAIL CREEK I
6811 PLUM CREEK DR
AMARILLO **TX** 79124
Phone (806) 351-2271 **Fax** (806) 351-1310

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

QUAIL CREEK COTTAGES LTD
4514 TRAVIS ST ,STE 211
DALLAS TX 75205
PHONE: (214) 526-0021 **FAX:** (214) 526-7965
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/08/2016

County **POTTER** Reg Svcs: HIGH PLAINS GERI 1 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 010324

THE COTTAGES AT QUAIL CREEK I I
6811 PLUM CRK DR
AMARILLO **TX** 79124
Phone (806) 351-2271 **Fax** (806) 351-1310

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

QUAIL CREEK COTTAGES LTD
4514 TRAVIS ST ,STE 211
DALLAS TX 75205
PHONE: (214) 526-0021 **FAX:** (214) 526-7965
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/08/2016

County **RANDALL** Reg Svcs: HIGH PLAINS GERI 1 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 000327

BROOKDALE SLEEPY HOLLOW
7401 SEVILLE DR
AMARILLO **TX** 79121
Phone (806) 351-2105 **Fax** (806) 351-0143

TOTAL Lic Capacity: 65 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 26 **TITLE19:** 0
PRIVATE Beds: 65 **TITLE 18/19:** 0

Owner Information

ESC IV LP
111 WESTWOOD PL ,STE 400
BRENTWOOD TN 37027
PHONE: (414) 918-5441 **FAX:** (414) 918-5054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/30/2017

County **RANDALL** Reg Svcs: HIGH PLAINS GERI 1 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 104152

HILLSIDE HAVEN CAREHOME
5230 ROYCE DR
AMARILLO **TX** 79110
Phone (806) 358-7996 **Fax**

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

HILLSIDE HAVEN CARE LLC
5230 ROYCE DRIVE
AMARILLO TX 79110
PHONE: (806) 358-7996 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE C
License Exp Dt: 02/16/2018

County **RANDALL** Reg Svcs: HIGH PLAINS GERI 1 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 010218

SKYWEST ASSISTED LIVING CENTER BY SHAW-AMARILLO
6301 BLAKE AVE
AMARILLO **TX** 79119
Phone (806) 351-0686 **Fax** (806) 206-1178

TOTAL Lic Capacity: 11 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 11 **TITLE 18/19:** 0

Owner Information

LONNIE W SHAW
2623 12TH AVE
CANYON TX 79015
PHONE: (806) 655-2911 **FAX:** (806) 655-1007
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/01/2016

County **RANDALL** Reg Svcs: HIGH PLAINS GERI 1 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 000497

CONNER PLACE
2 COTTONWOOD LN
CANYON **TX** 79015
Phone (806) 655-5965 **Fax** (806) 655-8213

TOTAL Lic Capacity: 36 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 36 **TITLE 18/19:** 0

Owner Information

CONNER AID OPCO LLC
330 N. WABASH ,SUITE 3700
CHICAGO IL 60611
PHONE: (312) 725-7000 **FAX:** (312) 332-5300
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/11/2017

County **RANDALL** Reg Svcs: HIGH PLAINS GERI 1 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 101051

HUDSON HOUSE CANYON INC
3210 RUSSELL LONG BLVD
CANYON **TX** 79015
Phone (806) 655-4244 **Fax** (806) 655-7001

TOTAL Lic Capacity: 33 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 33 **TITLE 18/19:** 0

Owner Information

HUDCO PROPERTIES LP
3210 RUSSELL LONG BLVD
CANYON TX 79015
PHONE: (806) 655-4244 **FAX:** (806) 655-7001
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/09/2017

County **RANDALL** Reg Svcs: HIGH PLAINS GERI 1 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 000762

SKYWEST ASSISTED LIVING CENTER BY SHAW
2623 12TH AVE
CANYON **TX** 79015
Phone (806) 655-2911 **Fax** (806) 655-1077

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

LONNIE W SHAW
2623 12TH AVE
CANYON TX 79015
PHONE: (806) 655-2911 **FAX:** (806) 655-1007
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/01/2017

County **ROCKWALL** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103958

ARBOR HOUSE OF ROCKWALL
5250 MEDICAL DRIVE
ROCKWALL **TX** 75032
Phone (214) 678-9959 **Fax**

TOTAL Lic Capacity: 86 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 30 **TITLE19:** 0
PRIVATE Beds: 86 **TITLE 18/19:** 0

Owner Information

ROCKWALL TX ARBOR HOUSE, LP
5250 MEDICAL DRIVE
ROCKWALL TX 75032
PHONE: (405) 801-2879 **FAX:** (405) 360-3301
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/20/2017

County **ROCKWALL** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104957

AUTUMN LEAVES OF ROCKWALL
225 E RALPH HALL PARKWAY
ROCKWALL **TX** 75032
Phone (469) 402-1883 **Fax**

TOTAL Lic Capacity: 50 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 50 **TITLE19:** 0
PRIVATE Beds: 50 **TITLE 18/19:** 0

Owner Information

ROCKWALL MEMORY CARE LLC
545 E JOHN CARPENTER HWY ,STE 500
IRVING TX 75062
PHONE: (214) 845-4500 **FAX:** (214) 845-4501
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/07/2018

County **ROCKWALL** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030301

BROOKDALE SUMMER RIDGE
3020 RIDGE ROAD
ROCKWALL **TX** 75032
Phone (972) 771-2800 **Fax** (972) 771-0340

TOTAL Lic Capacity: 140 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 140 **TITLE 18/19:** 0

Owner Information

EMERITUS CORPORATION
6737 W. WASHINGTON STREET ,SUITE 2300
MILWAUKEE WI 53214
PHONE: (414) 918-5000 **FAX:** (414) 918-5054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/31/2016

County **ROCKWALL** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104757

ESSENTIAL LIVING RESIDENTIAL CARE
489 BENDING OAKS TR
ROCKWALL **TX** 75087
Phone (972) 722-2958 **Fax**

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

GOLD STAR PROS, LLC
5967 FM 36 SOUTH
QUINLAN TX 75474
PHONE: (817) 371-5566 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/22/2017

County **ROCKWALL** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105757

ROCK RIDGE ASSISTED LIVING AND MEMORY CARE
720 E. RALPH HALL PARKWAY
ROCKWALL **TX** 75032
Phone (469) 757-8300 **Fax**

TOTAL Lic Capacity: 85 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 24 **TITLE19:** 0
PRIVATE Beds: 85 **TITLE 18/19:** 0

Owner Information

ROCKWALL ALF, LLC
8415 EAST 21ST STREET NORTH ,SUITE 100
WICHITA KS 67206
PHONE: (316) 616-6288 **FAX:** (316) 616-6255
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/16/2017

County **RUNNELS** Reg Svcs: SAN ANGLEO GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 100396

ASHWOOD MANOR
1502 HWY 158
BALLINGER **TX** 76821
Phone (325) 365-2959 **Fax**

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

NIKKI G LOWE
1502 HWY 158
BALLINGER TX 76821
PHONE: (325) 365-2959 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/21/2016

County **RUNNELS** Reg Svcs: SAN ANGLEO GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 000388

WINTERS ASSISTED LIVING
616 E TRUETT
WINTERS **TX** 79567
Phone (325) 754-5083 **Fax** (325) 754-4570

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

WINTERS AL OPERATOR LLC
6203 TURNER WAY
DALLAS TX 75230
PHONE: (214) 396-3462 **FAX:** (214) 396-3482
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/01/2018

County **RUSK** Reg Svcs: TYLER SE TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 104191

ARBOR PLACE ASSISTED LIVING
1200 HIGHWAY 259 NORTH
HENDERSON **TX** 75652
Phone (903) 657-8620 **Fax** (903) 657-8625

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

WCG ARBOR PLACE ASSISTED LIVING LLC
712 FAIR PARK DR
HENDERSON TX 75654
PHONE: (903) 657-8969 **FAX:** (903) 657-8960
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/08/2018

County **RUSK** Reg Svcs: TYLER SE TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 000708

AZALEA PLACE
1905 OLD NACOGDOCHES RD
HENDERSON **TX** 75654
Phone (903) 657-1563 **Fax** (903) 657-4693

TOTAL Lic Capacity: 36 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 36 **TITLE 18/19:** 0

Owner Information

AZALEA AID OPCO LLC
330 N WABASH ,STE 3700
CHICAGO IL 60611
PHONE: (312) 725-7000 **FAX:** (312) 332-5300
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/11/2017

County **RUSK** Reg Svcs: TYLER SE TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 030004

BROOKDALE HENDERSON
1000 RICHARDSON DR
HENDERSON **TX** 75654
Phone (903) 655-1198 **Fax** (903) 656-2259

TOTAL Lic Capacity: 80 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 21 **TITLE19:** 0
PRIVATE Beds: 80 **TITLE 18/19:** 0

Owner Information

ESC IV LP
111 WESTWOOD PL ,STE 400
BRENTWOOD TN 37027
PHONE: (414) 918-5441 **FAX:** (414) 918-5054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/01/2017

County **RUSK** Reg Svcs: TYLER SE TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 001167

MIRIAM L KING
4660 FM 2867 E
HENDERSON **TX** 75654
Phone (903) 889-2344 **Fax**

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

MIRIAM L KING
4660 FM RD 2867 E
HENDERSON TX 75654
PHONE: (903) 889-2344 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE C
License Exp Dt: 10/31/2017

County **RUSK** Reg Svcs: TYLER SE TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 001276

STARLING'S ADULT FOSTER CARE HOME
4285 U S HWY 259 S
HENDERSON **TX** 75654
Phone (903) 657-4304 **Fax** (903) 657-4304

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

MERELINE STARLING ADULT FOSTER CARE
4285 US HWY 259 S
HENDERSON TX 75654
PHONE: (903) 657-4304 **FAX:** (903) 657-4304
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE C
License Exp Dt: 04/15/2017

County **SAN AUGUSTINE** Reg Svcs: NACOGDOCHES GERIATRIC Region 05 - BEAUMONT

Facility Information: **Facility ID:** 030024

EL CAMINO HOUSE
1997 DAVIDSON DR
SAN AUGUSTINE **TX** 75972
Phone (936) 275-0222 **Fax** (936) 275-5978

TOTAL Lic Capacity: 55 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 55 **TITLE 18/19:** 0

Owner Information

D & H ENTERPRISES INC
451 SOUTH EL CAMINO CROSSING
SAN AUGUSTINE TX 75972
PHONE: (936) 275-2900 **FAX:** (936) 275-1479
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/11/2016

County **SAN JACINTO** Reg Svcs: BEAUMONT GERIATRIC Region 05 - BEAUMONT

Facility Information: **Facility ID:** 102759

CELESTIAL CARE
900 FM 945 RD S
CLEVELAND **TX** 77328
Phone (936) 767-4047 **Fax** (936) 767-4367

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

Owner Information

CELEST K WATSON
900 HWY 945 RD S
CLEVELAND TX 77328
PHONE: (936) 767-4047 **FAX:** (936) 767-4367
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/08/2016

County **SAN PATRICIO** Reg Svcs: CORPUS CHRISTI 11 Region 11 - CORPUS CHRISTI

Facility Information: **Facility ID:** 010345

TRISUN ASSISTED LIVING-PAVILION
211 CEDAR DR
PORTLAND **TX** 78374
Phone (361) 777-4250 **Fax** (361) 777-2892

TOTAL Lic Capacity: 40 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 40 **TITLE 18/19:** 0

Owner Information

PM MANAGEMENT-PORTLAND AL LLC
1703 W FIFTH ST ,STE 800
AUSTIN TX 78703
PHONE: (512) 634-4941 **FAX:** (877) 639-9530
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/01/2016

County **SCURRY** Reg Svcs: ABILENE GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 104894

GOOD LIFE SENIOR LIVING 1
1904 MARTHA ANN BLVD
SNYDER **TX** 79549
Phone **Fax**

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

WESTWOOD DRIVE ENTERPRISES LLC
21211 FM 179
WOLFFORTH TX 79382
PHONE: (806) 855-6464 **FAX:** (806) 855-4092
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/21/2017

County **SCURRY** Reg Svcs: ABILENE GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 104895

GOOD LIFE SENIOR LIVING AND MEMORY CARE B
1904 MARTHA ANN BLVD
SNYDER **TX** 79549

Phone (325) 436-0228 **Fax** (325) 436-0229

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

WESTWOOD DRIVE ENTERPRISES LLC
21211 FM 179
WOLFFORTH TX 79382

PHONE: (806) 855-6464 **FAX:** (806) 855-4092

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/21/2015

County **SHELBY** Reg Svcs: NACOGDOCHES GERIATRIC Region 05 - BEAUMONT

Facility Information: **Facility ID:** 104343

LAKESIDE VILLAGE ASSISTED LIVING
1468 LOOP 500
CENTER **TX** 75935

Phone (936) 590-9300 **Fax** (936) 590-9315

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

TENAHA CREEK, LLC
1468 LOOP 500 EAST
CENTER TX 75935

PHONE: (936) 590-9300 **FAX:** (936) 590-9315

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/15/2016

County **SMITH** Reg Svcs: TYLER SW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 104878

WESLEY HOUSE
13923 FM 2710
LINDALE **TX** 75771

Phone (903) 882-9296 **Fax** (903) 881-9802

TOTAL Lic Capacity: 54 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 54 **TITLE 18/19:** 0

Owner Information

WESLEY PARTNERS SENIOR LIVING, LLC
110 DALLAS ST
MT. VERNON TX 75457

PHONE: (903) 537-4116 **FAX:** (903) 270-6227

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/31/2016

County **SMITH** Reg Svcs: TYLER SW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 000331

ATRIA COPELAND
5317 NEW COPELAND RD
TYLER **TX** 75703

Phone (903) 509-9575 **Fax** (903) 509-9890

TOTAL Lic Capacity: 80 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 80 **TITLE 18/19:** 0

Owner Information

WG COPELAND SH LLC
10350 ORMSBY PARK PLACE ,STE 300
LOUISVILLE KY 40223

PHONE: (502) 779-4700 **FAX:** (502) 779-4749

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/12/2017

County **SMITH** Reg Svcs: TYLER SW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 000947

ATRIA WILLOW PARK
3500 S VINE AVE
TYLER **TX** 75701

Phone (903) 561-4302 **Fax** (903) 561-2581

TOTAL Lic Capacity: 82 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 82 **TITLE 18/19:** 0

Owner Information

WG WILLOW PARK SH, LLC
10350 ORMSBY PARK PLACE ,STE 300
LOUISVILLE KY 40223

PHONE: (502) 779-4700 **FAX:** (502) 779-4749

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/12/2017

County **SMITH** Reg Svcs: TYLER SW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 102945

AZALEA TRAILS ASSISTED LIVING AND MEMORY CARE COMMUNITY
5550 OLD JACKSONVILLE HWY
TYLER **TX** 75703

Phone (903) 561-4307 **Fax** (903) 561-4603

TOTAL Lic Capacity: 54 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 54 **TITLE 18/19:** 0

Owner Information

CSL S TYLER LLC
14160 DALLAS PARKWAY
DALLAS TX 75254

PHONE: (972) 308-8366 **FAX:** (972) 387-8216

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/10/2016

County **SMITH** Reg Svcs: TYLER SW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 100910

BRECKENRIDGE VILLAGE OF TYLER ROSE HOUSE
15062 CR 1145
TYLER **TX** 75704
Phone (903) 596-8100 **Fax** (903) 596-8104

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **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: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/24/2017

County **SMITH** Reg Svcs: TYLER SW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 000800

BROOKDALE TYLER EAST
3505 UNIVERSITY BLVD
TYLER **TX** 75701
Phone (903) 565-0800 **Fax** (903) 565-0802

TOTAL Lic Capacity: 50 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 50 **TITLE 18/19:** 0

Owner Information

BROOKDALE SENIOR LIVING COMMUNITIES INC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214
PHONE: (414) 918-5441 **FAX:** (414) 918-6076
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/01/2016

County **SMITH** Reg Svcs: TYLER SW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 010226

BROOKDALE TYLER SOUTH
5403 PLANTATION DR
TYLER **TX** 75703
Phone (903) 534-4955 **Fax** (903) 534-1311

TOTAL Lic Capacity: 56 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 56 **TITLE19:** 0
PRIVATE Beds: 56 **TITLE 18/19:** 0

Owner Information

ESC IV LP
111 WESTWOOD PL ,STE 400
BRENTWOOD TN 37027
PHONE: (414) 918-5441 **FAX:** (414) 918-5054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/31/2017

County **SMITH** Reg Svcs: TYLER SW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 000308

EAST TEXAS ALF REUNION INN LLC
1515 RICE RD
TYLER **TX** 75703
Phone (903) 581-6100 **Fax** (903) 581-1119

TOTAL Lic Capacity: 51 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 51 **TITLE 18/19:** 0

Owner Information

EAST TEXAS ALF REUNION INN LLC
4939 ELIZABETH
TEXARKANA TX 75503
PHONE: (903) 832-0429 **FAX:** (903) 255-0385
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/01/2018

County **SMITH** Reg Svcs: TYLER SW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 103676

EAST TEXAS ALF WATERTON INN LLC
2885 SHILOH ROAD
TYLER **TX** 75703
Phone (903) 939-9664 **Fax** (903) 939-0334

TOTAL Lic Capacity: 39 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 39 **TITLE 18/19:** 0

Owner Information

EAST TEXAS ALF WATERTON INN LLC
1901 RICKETY LANE ,STE 208
TYLER TX 75703
PHONE: (903) 534-6221 **FAX:** (903) 534-4705
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/01/2016

County **SMITH** Reg Svcs: TYLER SW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 030387

GARDEN ESTATES OF TYLER ASSISTED LIVING COMMUNITY
2055 GRANDE BLVD
TYLER **TX** 75703
Phone (903) 534-0449 **Fax** (903) 534-0462

TOTAL Lic Capacity: 70 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 70 **TITLE 18/19:** 0

Owner Information

LSREF GOLDEN OPS 26 (TX) III, LLC
3500 LENOX ROAD NE ,SUITE 510
ATLANTA GA 30326
PHONE: (770) 754-9660 **FAX:** (770) 754-3085
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/01/2018

County **SMITH** Reg Svcs: TYLER SW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 104686

MEADOW LAKE ASSISTED LIVING COMMUNITY
16044 COUNTY ROAD 165
TYLER **TX** 75703
Phone (903) 526-5599 **Fax** (903) 526-3717

TOTAL Lic Capacity: 54 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 34 **TITLE19:** 0
PRIVATE Beds: 54 **TITLE 18/19:** 0

Owner Information

ER OPCO ML LLC
PO BOX 2107
BRENTWOOD TN 37024
PHONE: (615) 915-2932 **FAX:** (615) 915-2938

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/28/2017

County **SMITH** Reg Svcs: TYLER SW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 101997

NEURORESTORATIVE TEXAS
11937 US HWY 271
TYLER **TX** 75708
Phone (903) 877-8700 **Fax** (903) 877-8707

TOTAL Lic Capacity: 20 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 20 **TITLE 18/19:** 0

Owner Information

MENTOR ABI, LLC
313 CONGRESS ST ,5TH FLR
BOSTON MA 02210
PHONE: (617) 790-4800 **FAX:** (617) 790-4271

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/22/2018

County **SMITH** Reg Svcs: TYLER SW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 105019

OAK HILLS TERRACE MEMORY CARE
2651 ELKTON TRAIL
TYLER **TX** 75703
Phone (903) 747-3927 **Fax** (903) 939-9937

TOTAL Lic Capacity: 48 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 48 **TITLE19:** 0
PRIVATE Beds: 48 **TITLE 18/19:** 0

Owner Information

FM OAK HILLS TYLER INVESTORS, LLC
7420 BRIDGEPORT RD. ,SUITE 105
PORTLAND OR 97224
PHONE: (503) 443-1818 **FAX:** (503) 443-1919

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/03/2016

County **SMITH** Reg Svcs: TYLER SW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 104335

PENNY RELLA HOME CARE
220 MAC ARTHUR ST
TYLER **TX** 75704
Phone (903) 705-2374 **Fax** (903) 526-4094

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

LUCILLE HAYTER
220 MCARTHUR ST
TYLER TX 75704
PHONE: (903) 526-4094 **FAX:** (903) 526-4094

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE C
License Exp Dt: 06/09/2018

County **SMITH** Reg Svcs: TYLER SW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 103159

PRESTIGE ESTATES LLC
6928 PALUXY DR
TYLER **TX** 75703
Phone (903) 561-6102 **Fax** (903) 561-6541

TOTAL Lic Capacity: 72 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 24 **TITLE19:** 0
PRIVATE Beds: 72 **TITLE 18/19:** 0

Owner Information

PRESTIGE ESTATES, LLC
10165 QUAIL RUN
TYLER TX 75709
PHONE: (903) 593-1908 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/04/2017

County **SMITH** Reg Svcs: TYLER SW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 103375

THE HAMPTONS AT PINE FOREST, LP
4250 OLD OMEN RD
TYLER **TX** 75707
Phone (903) 566-8931 **Fax** (903) 566-8506

TOTAL Lic Capacity: 100 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 38 **TITLE19:** 0
PRIVATE Beds: 100 **TITLE 18/19:** 0

Owner Information

THE HAMPTONS AT PINE FOREST, LP
1014 PRUITT PLACE
TYLER TX 75703
PHONE: (903) 566-8500 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/14/2016

County **SMITH** Reg Svcs: TYLER SW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 000316

VILLA OF TYLER BUILDING 1
3323 GARDEN VALLEY RD
TYLER **TX** 75702
Phone (903) 592-8852 **Fax** (903) 533-1565

TOTAL Lic Capacity: 27 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 27 **TITLE 18/19:** 0

Owner Information

TYLER I ENTERPRISES, LLC
4150 INTERNATIONAL PLAZA ,STE 600
FORT WORTH TX 76109
PHONE: (817) 348-8959 **FAX:** (817) 348-0466
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/01/2016

County **SMITH** Reg Svcs: TYLER SW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 000558

VILLA OF TYLER BUILDING 2
3323 GARDEN VALLEY RD
TYLER **TX** 75702
Phone (903) 592-8852 **Fax** (903) 533-1565

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

TYLER I ENTERPRISES, LLC
4150 INTERNATIONAL PLAZA ,STE 600
FORT WORTH TX 76109
PHONE: (817) 348-8959 **FAX:** (817) 348-0466
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/01/2016

County **SMITH** Reg Svcs: TYLER SW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 000559

VILLA OF TYLER BUILDING 3
3323 GARDEN VALLEY RD
TYLER **TX** 75702
Phone (903) 592-8852 **Fax** (903) 533-1565

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

TYLER I ENTERPRISES, LLC
4150 INTERNATIONAL PLAZA ,STE 600
FORT WORTH TX 76109
PHONE: (817) 348-8959 **FAX:** (817) 348-0466
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/01/2018

County **SMITH** Reg Svcs: TYLER SW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 000560

VILLA OF TYLER BUILDING 4
3323 GARDEN VALLEY RD
TYLER **TX** 75702
Phone (903) 592-8852 **Fax** (903) 533-1565

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

TYLER I ENTERPRISES, LLC
4150 INTERNATIONAL PLAZA ,STE 600
FORT WORTH TX 76109
PHONE: (817) 348-8959 **FAX:** (817) 348-0466
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/01/2016

County **SMITH** Reg Svcs: TYLER SW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 102114

TENDER LOVING ELDERLY CARE
14830 CR 2333
WHITEHOUSE **TX** 75791
Phone (903) 534-3676 **Fax** (903) 534-7173

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

DIANNE M FARRELL
14830 CR 2333
WHITEHOUSE TX 75791
PHONE: (903) 534-3676 **FAX:** (903) 534-0124
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE C
License Exp Dt: 11/29/2016

County **SMITH** Reg Svcs: TYLER SW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 103583

NEURORESTORATIVE TEXAS
15717 N MOUNTAIN VIEW RD
WINONA **TX** 75708
Phone (903) 877-9444 **Fax** (903) 877-8707

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

MENTOR ABI, LLC
313 CONGRESS ST ,5TH FLR
BOSTON MA 02210
PHONE: (617) 790-4800 **FAX:** (617) 790-4271
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/23/2018

County **SWISHER** Reg Svcs: HIGH PLAINS GERI 1 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 101627

SWISHER MEMORIAL HOSPITAL RESIDENTIAL LIVING CENTER
539 S E 2ND ST
TULIA **TX** 79088
Phone (806) 995-3581 **Fax** (806) 995-8283

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

SWISHER MEMORIAL HEALTHCARE SYSTEM
539 SE 2ND
TULIA TX 79088
PHONE: (806) 995-3581 **FAX:** (806) 995-8283
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/01/2018

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101771

24 HOURS HOME CARE INC
2133 POSTWOOD LN
ARLINGTON **TX** 76018
Phone (817) 903-7564 **Fax** (817) 419-6501

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

24 HOUR HOME CARE INC
2133 POSTWOOD LN
ARLINGTON TX 76018
PHONE: (817) 903-7564 **FAX:** (817) 419-6501
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE C
License Exp Dt: 01/10/2018

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 050452

ANGELIC PLACE ELDERCARE HOME
2300 PARK RUN DR
ARLINGTON **TX** 76016
Phone (817) 457-8600 **Fax** (817) 457-4592

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

BRENDA MYERS
2300 PARK RUN DR
ARLINGTON TX 76016
PHONE: (817) 457-8600 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/02/2017

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 010360

ARLINGTON AUTUMN LEAVES, LP
514 CENTRAL PARK DR
ARLINGTON **TX** 76014
Phone (817) 419-6700 **Fax** (817) 419-6779

TOTAL Lic Capacity: 46 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 46 **TITLE19:** 0
PRIVATE Beds: 46 **TITLE 18/19:** 0

Owner Information

ARLINGTON AUTUMN LEAVES L P
545 E. JOHN CARPENTER FWY ,STE. 500
IRVING TX 75062
PHONE: (214) 845-4500 **FAX:** (214) 845-4501
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/24/2017

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105379

AVALON CARE GROUP LLC
7140 HWY 287 S
ARLINGTON **TX** 76001
Phone (214) 752-7050 **Fax** (214) 752-7054

TOTAL Lic Capacity: 25 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 25 **TITLE19:** 0
PRIVATE Beds: 25 **TITLE 18/19:** 0

Owner Information

AVALON CARE GROUP LLC
1625 N STEMMONS FREEWAY
DALLAS TX 75207
PHONE: (214) 752-7050 **FAX:** (214) 752-7054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/15/2016

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 100656

AVALON CARE GROUP LLC
7200 HWY 287
ARLINGTON **TX** 76001
Phone (817) 563-0714 **Fax** (817) 563-6152

TOTAL Lic Capacity: 25 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 25 **TITLE19:** 0
PRIVATE Beds: 25 **TITLE 18/19:** 0

Owner Information

AVALON CARE GROUP LLC
1625 N STEMMONS FREEWAY
DALLAS TX 75207
PHONE: (214) 752-7050 **FAX:** (214) 752-7054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/15/2016

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 100660

AVALON CARE GROUP, LLC
7204 HWY 287
ARLINGTON **TX** 76001
Phone (214) 752-7050 **Fax** (214) 752-7054

TOTAL Lic Capacity: 25 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 25 **TITLE19:** 0
PRIVATE Beds: 25 **TITLE 18/19:** 0

Owner Information

AVALON CARE GROUP LLC
1625 N STEMMONS FREEWAY
DALLAS TX 75207
PHONE: (214) 752-7050 **FAX:** (214) 752-7054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/15/2016

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000616

BETHESDA FOUNDATION DBA BETHESDA GARDENS
1103 W ARKANSAS LN
ARLINGTON **TX** 76013
Phone (817) 861-4644 **Fax** (817) 861-4669

TOTAL Lic Capacity: 75 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 75 **TITLE 18/19:** 0

Owner Information

BETHESDA FOUNDATION
15475 GLENEAGLE DR
COLORADO SPRINGS CO 80921
PHONE: (719) 481-0100 **FAX:** (719) 481-6080
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/31/2017

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 100100

BROOKDALE LAKE ARLINGTON
2517 LITTLE RD
ARLINGTON **TX** 76016
Phone (817) 457-9710 **Fax** (817) 492-4330

TOTAL Lic Capacity: 101 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 30 **TITLE19:** 0
PRIVATE Beds: 101 **TITLE 18/19:** 0

Owner Information

HBP LEASECO LLC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214
PHONE: (414) 918-5000 **FAX:** (414) 918-5054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/01/2017

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 100159

BROOKDALE PECAN PARK
915 NORTH FIELDER RD
ARLINGTON **TX** 76012
Phone (817) 265-6900 **Fax** (817) 265-6906

TOTAL Lic Capacity: 31 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 31 **TITLE19:** 0
PRIVATE Beds: 31 **TITLE 18/19:** 0

Owner Information

ARC PECAN PARK LP
111 WESTWOOD PL ,STE 400
BRENTWOOD TN 37027
PHONE: (615) 221-2250 **FAX:** (615) 221-2284
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/25/2016

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 050686

BROOKDALE PECAN PARK
915 NORTH FIELDER RD
ARLINGTON **TX** 76012
Phone (817) 265-6900 **Fax** (817) 265-6906

TOTAL Lic Capacity: 160 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 160 **TITLE 18/19:** 0

Owner Information

ARC PECAN PARK LP
111 WESTWOOD PL ,STE 400
BRENTWOOD TN 37027
PHONE: (615) 221-2250 **FAX:** (615) 221-2284
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/25/2017

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 100222

CASTLEROCK ASSISTED LIVING LP
5519 S COLLINS ST.
ARLINGTON **TX** 76018
Phone (817) 557-2221 **Fax** (817) 557-2215

TOTAL Lic Capacity: 70 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 70 **TITLE 18/19:** 0

Owner Information

CASTLEROCK ASSISTED LIVING, LP
5519 S COLLINS ST
ARLINGTON TX 76018
PHONE: (817) 557-2221 **FAX:** (817) 557-2215
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/01/2018

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 050057

COMPASSION OF FAITH
2501/03 OAK HILL DR
ARLINGTON **TX** 76006

Phone (817) 649-4048 **Fax** (817) 649-4016

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

LINDA'S ALTERNATIVE CARE, INC
2503 OAK HILL DR
ARLINGTON TX 76006

PHONE: (817) 905-7190 **FAX:** (817) 649-4016

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/05/2017

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102989

COURAGE ASSISTED LIVING FACILITY
519 RED COAT LN
ARLINGTON **TX** 76002

Phone (817) 375-1059 **Fax** (817) 419-8146

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

Owner Information

PATIENCE O EGUAE
519 RED COAT LN
ARLINGTON TX 76002

PHONE: (817) 798-1991 **FAX:** (817) 784-0385

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/01/2018

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030053

ELMCROFT OF ARLINGTON
4101 W ARKANSAS LN
ARLINGTON **TX** 76016

Phone (817) 469-7671 **Fax** (817) 469-1423

TOTAL Lic Capacity: 119 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 119 **TITLE 18/19:** 0

Owner Information

ARLINGTON OPERATIONS, LLC
700 N HURSTBOURNE PKWY ,STE 200
LOUISVILLE KY 40222

PHONE: (502) 753-6004 **FAX:** (502) 753-6104

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/01/2017

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105163

FIELDS HOMECARE SERVICES LLC
903 CYPRESS COURT
ARLINGTON **TX** 76014

Phone (817) 642-5335 **Fax** (817) 538-5015

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

FIELDS HOMECARE SERVICES LLC
903 CYPRESS COURT
ARLINGTON TX 76014

PHONE: (817) 642-5335 **FAX:** (817) 300-1578

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/05/2016

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105648

GRACE & MERCY ASSISTED LIVING LLC
3405 WOODSIDE DR.
ARLINGTON **TX** 76016

Phone (817) 451-4336 **Fax** (817) 451-4338

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

Owner Information

GRACE & MERCY ASSISTED LIVING LLC
3405 WOODSIDE DRIVE
ARLINGTON TX 76016

PHONE: (817) 451-4336 **FAX:** (817) 451-4338

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/19/2018

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102995

HIBISCUS RESIDENTIAL CARE HOME LLC
341 MCMURTRY DR
ARLINGTON **TX** 76002

Phone (817) 719-3022 **Fax** (817) 719-4128

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

Owner Information

HIBISCUS RESIDENTIAL CARE HOME LLC
341 MCMURTRY DR
ARLINGTON TX 76002

PHONE: (817) 449-9278 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/01/2018

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105636

L & A CARE, LLC
308 DAKOTA DR.
ARLINGTON **TX** 76002
Phone (817) 538-5200 **Fax** (817) 642-7018

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

Owner Information

L & A CARE, LLC
308 DAKOTA DR
ARLINGTON TX 76002
PHONE: (817) 538-5200 **FAX:** (817) 642-7018
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/04/2016

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030336

LEGACY LIVING AT ARLINGTON
1501 NE GREEN OAKS BLVD
ARLINGTON **TX** 76006
Phone (817) 795-1700 **Fax** (817) 795-1709

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 60 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

ARLINGTON MC MANAGEMENT LLC
1501 NE GREEN OAKS BLVD
ARLINGTON TX 76006
PHONE: (516) 596-5222 **FAX:** (516) 775-3299
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/07/2017

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000847

MEADOW VIEW ASSISTED LIVING
2815 MEDLIN DR
ARLINGTON **TX** 76015
Phone (817) 465-9596 **Fax** (817) 465-4026

TOTAL Lic Capacity: 80 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 80 **TITLE 18/19:** 0

Owner Information

SOUTHWEST LTC-MEADOW VIEW LTD
1518 LEGACY DR ,STE 110
FRISCO TX 75034
PHONE: (469) 916-6100 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/01/2016

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105353

MEADOWBROOK MEMORY CARE COMMUNITY
2300 LITTLE RD
ARLINGTON **TX** 76016
Phone (817) 451-9700 **Fax** (817) 451-9701

TOTAL Lic Capacity: 69 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 69 **TITLE19:** 0
PRIVATE Beds: 69 **TITLE 18/19:** 0

Owner Information

JACK HENRY ARLINGTON LLC
111 MARKET STREET N.E. ,SUITE 200
OLYMPIA WA 98501
PHONE: (360) 867-1900 **FAX:** (360) 867-1954
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/31/2017

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 050565

METRO HOME CARE
802 LEVELLAND DR
ARLINGTON **TX** 76017
Phone (817) 784-3827 **Fax** (817) 468-5005

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

Owner Information

SUMAINA S IBRAHIM
7903 TINCUP DR
ARLINGTON TX 76001
PHONE: (817) 477-5775 **FAX:** (817) 477-4438
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/20/2017

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103189

NEW ERA ASSISTED LIVING
7903 TINCUP DRIVE
ARLINGTON **TX** 76001
Phone (817) 477-5775 **Fax**

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

Owner Information

SUMAINA S IBRAHIM
7903 TINCUP DR
ARLINGTON TX 76001
PHONE: (817) 477-5775 **FAX:** (817) 477-4438
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/07/2016

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105709

SATORI SENIOR CARE AT SAINT CLAIRE
2305 SAINT CLAIRE DR
ARLINGTON **TX** 76012
Phone (817) 224-2281 **Fax**

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

Owner Information

SATORI SENIOR CARE
2305 SAINT CLAIRE DRIVE
ARLINGTON TX 76012
PHONE: (817) 224-2281 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/02/2016

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103046

SEASONS ASSISTED LIVING
2424 VENTURA
ARLINGTON **TX** 76015
Phone (817) 460-5889 **Fax** (817) 299-0334

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

MCCULLY HOMES LLC
2424 VENTURA A
ARLINGTON TX 76015
PHONE: (817) 528-7575 **FAX:** (817) 299-0334
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/22/2017

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101918

TENDER CARE HOME FOR ADULTS
3600 CHAMBERLAND DR
ARLINGTON **TX** 76014
Phone (817) 800-9948 **Fax** (817) 557-5434

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

Owner Information

TENDER ELDERLY CARE INC
7200 GEORGE FINGER RD
ARLINGTON TX 76002
PHONE: (817) 800-9948 **FAX:** (817) 557-5434
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/28/2017

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104085

TENDERCARE HOME FOR ADULTS #2
7200 GEORGE FINGER RD
ARLINGTON **TX** 76002
Phone (817) 800-9948 **Fax** (817) 557-5434

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

Owner Information

TENDER ELDERLY CARE INC
7200 GEORGE FINGER RD
ARLINGTON TX 76002
PHONE: (817) 800-9948 **FAX:** (817) 557-5434
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/14/2018

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103205

THE GUARDIAN
1804 MARTINIQUE DR
ARLINGTON **TX** 76012
Phone (817) 986-4534 **Fax** (817) 274-0328

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

Owner Information

MARIE HART
1804 MARTINIQUE DR
ARLINGTON TX 76012
PHONE: (817) 986-4534 **FAX:** (817) 274-0328
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/05/2017

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000919

THE WATERFORD ON COOPER
1860 N COOPER ST
ARLINGTON **TX** 76011
Phone (817) 261-3601 **Fax** (817) 261-2810

TOTAL Lic Capacity: 124 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 27 **TITLE19:** 0
PRIVATE Beds: 124 **TITLE 18/19:** 0

Owner Information

CSL CE ARLINGTON LLC
14160 DALLAS PKWY ,STE 300
DALLAS TX 75254
PHONE: (972) 308-8366 **FAX:** (972) 387-8216
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/30/2018

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030096

EAGLE CREST VILLA
113 DENVER TR
AZLE **TX** 76020
Phone (817) 444-3249 **Fax** (817) 444-3275

TOTAL Lic Capacity: 55 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 55 **TITLE 18/19:** 0

Owner Information

EAGLE CREST HEALTH CARE LLLP
7150 GANTT ACCESS ROAD
AZLE TX 76020
PHONE: (817) 444-3249 **FAX:** (817) 444-3275
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/01/2017

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000643

SILVER CREEK ASSISTED LIVING
1300 SILVER CREEK AZLE ROAD
AZLE **TX** 76020
Phone (817) 238-8126 **Fax** (817) 238-8784

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

SILVER CREEK AL LLC
1300 SILVER CREEK AZLE ROAD
AZLE TX 76020
PHONE: **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/28/2017

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030035

BROOKDALE EDEN ESTATES
1997 FOREST RIDGE DR
BEDFORD **TX** 76021
Phone (817) 267-2488 **Fax** (817) 267-0406

TOTAL Lic Capacity: 70 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 70 **TITLE 18/19:** 0

Owner Information

EMERITUS CORPORATION
6737 W. WASHINGTON STREET ,SUITE 2300
MILWAUKEE WI 53214
PHONE: (414) 918-5000 **FAX:** (414) 918-5054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/31/2016

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 010265

BROOKDALE OAK HOLLOW
2016 L DON DODSON PKY
BEDFORD **TX** 76021
Phone (817) 267-6200 **Fax** (817) 267-6455

TOTAL Lic Capacity: 56 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 56 **TITLE19:** 0
PRIVATE Beds: 56 **TITLE 18/19:** 0

Owner Information

ESC IV LP
111 WESTWOOD PL ,STE 400
BRENTWOOD TN 37027
PHONE: (414) 918-5441 **FAX:** (414) 918-5054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/24/2018

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030346

ELMCROFT OF BEDFORD
3800 CENTRAL DR
BEDFORD **TX** 76021
Phone (817) 283-6604 **Fax** (817) 283-7425

TOTAL Lic Capacity: 118 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 118 **TITLE 18/19:** 0

Owner Information

BEDFORD OPERATIONS, LLC
9510 ORMSBY STATION RD ,SUITE 101
LOUISVILLE KY 40223
PHONE: (502) 753-6004 **FAX:** (502) 753-6104
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/03/2017

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000729

HEARTLAND HEALTH CARE CENTER
2001 FOREST RIDGE DR
BEDFORD **TX** 76021
Phone (817) 571-6804 **Fax** (817) 267-4176

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

HEARTLAND OF BEDFORD TX, LLC DBA HCR HEARTLAND OF BEDFORD TX LLC
333 NORTH SUMMIT ST
TOLEDO OH 43604
PHONE: (419) 252-5500 **FAX:** (419) 254-5494
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/07/2017

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000567

PARKWOOD HEALTHCARE COMMUNITY
2600 PARKVIEW LANE
BEDFORD **TX** 76022

Phone (817) 354-6556 **Fax** (817) 354-1808

TOTAL Lic Capacity: 84 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 30 **TITLE19:** 0
PRIVATE Beds: 84 **TITLE 18/19:** 0

Owner Information

LCS-PHC LLC
CAPITAL SQUARE ,800 LOCUST ST STE 820
DES MOINES IA 50309

PHONE: (515) 875-4590 **FAX:** (515) 875-4780

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/30/2018

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105563

PBH RESIDENTIAL CARE HOMES, L.P.
604 DONNA LANE
BEDFORD **TX** 76022

Phone (817) 494-8488 **Fax** (888) 397-1087

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

Owner Information

PBH RESIDENTIAL CARE HOMES LP
604 DONNA LANE
BEDFORD TX 76022

PHONE: (469) 682-6670 **FAX:** (972) 660-2204

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/05/2017

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000619

TCG BENBROOK AL LLC
4242 BRYANT IRVIN RD
BENBROOK **TX** 76109

Phone (817) 763-0088 **Fax** (817) 763-8411

TOTAL Lic Capacity: 170 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 26 **TITLE19:** 0
PRIVATE Beds: 170 **TITLE 18/19:** 0

Owner Information

TCG BENBROOK AL, LLC
1200 SUMMIT AVE ,SUTIE 444
FORT WORTH TX 76102

PHONE: (817) 446-4792 **FAX:** (817) 446-0923

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/31/2017

County **TARRANT** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000384

COVENANT PLACE OF BURLESON
611 NE ALSBURY BLVD
BURLESON **TX** 76028

Phone (817) 447-4477 **Fax** (817) 447-4505

TOTAL Lic Capacity: 80 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 80 **TITLE 18/19:** 0

Owner Information

CSL LEASECO INC
14160 DALLAS PKWY ,STE 300
DALLAS TX 75254

PHONE: (972) 770-5600 **FAX:** (972) 770-5666

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/01/2017

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106481

ELK CREEK SENIOR LIVING COMMUNITY
301 ELK DRIVE
BURLESON **TX** 76028

Phone (817) 295-6555 **Fax**

TOTAL Lic Capacity: 90 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 21 **TITLE19:** 0
PRIVATE Beds: 90 **TITLE 18/19:** 0

Owner Information

SFL ELK CREEK BURLESON LP
301 ELK DRIVE
BURLESON TX 76028-5645

PHONE: (817) 386-8888 **FAX:** (817) 386-8324

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/28/2018

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104503

SILVER RIDGE ASSISTED LIVING
5314 BRANSFORD RD STE A
COLLEYVILLE **TX** 76034

Phone (817) 514-3826 **Fax** (817) 886-2620

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

SIVA ASSISTED LIVING SERVICES LTD CO
412 TIMBERLINE DRIVE NORTH
COLLEYVILLE TX 76034

PHONE: (817) 514-3826 **FAX:** (817) 886-2620

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/22/2017

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104483

SILVER RIDGE ASSISTED LIVING
5314 BRANSFORD RD STE B
COLLEYVILLE **TX** 76034
Phone (817) 514-3826 **Fax** (817) 886-2620

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

SIVA ASSISTED LIVING SERVICES LTD CO
412 TIMBERLINE DRIVE NORTH
COLLEYVILLE TX 76034
PHONE: (817) 514-3826 **FAX:** (817) 886-2620
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/22/2017

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105400

SILVER RIDGE MEMORY CARE II
412 TIMBERLINE DRIVE NORTH
COLLEYVILLE **TX** 76034
Phone (817) 560-0901 **Fax** (817) 886-2620

TOTAL Lic Capacity: 20 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 20 **TITLE19:** 0
PRIVATE Beds: 20 **TITLE 18/19:** 0

Owner Information

SIVA ASSISTED LIVING SERVICES LTD CO
412 TIMBERLINE DRIVE NORTH
COLLEYVILLE TX 76034
PHONE: (817) 514-3826 **FAX:** (817) 886-2620
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/22/2017

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105473

US MEMORY CARE- COLLEYVILLE
8100 PRECINCT LINE ROAD
COLLEYVILLE **TX** 76034
Phone (214) 782-9994 **Fax** (214) 782-9569

TOTAL Lic Capacity: 108 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 75 **TITLE19:** 0
PRIVATE Beds: 108 **TITLE 18/19:** 0

Owner Information

USMC COLLEYVILLE, LLC
14881 QUORUM DRIVE ,SUITE 250
PLANO TX 75254
PHONE: (214) 782-9994 **FAX:** (214) 782-9569
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/29/2017

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103487

ANCHOR WAY SENIOR CARE LLC
10805 W CLEBURNE RD
CROWLEY **TX** 76036
Phone (682) 240-8181 **Fax** (866) 323-0948

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

ANCHOR WAY SENIOR CARE LLC
10805 W CLEBURNE RD
CROWLEY TX 76036
PHONE: (682) 240-8181 **FAX:** (866) 323-0948
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/04/2018

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103746

JACK'S PLACE
519 ESSEX PL
EULESS **TX** 76039
Phone (817) 685-7578 **Fax** (817) 554-5291

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

ELDER VILLAGE EULESS LLC
517 ESSEX PLACE
EULESS TX 76039
PHONE: (817) 313-6136 **FAX:** (817) 554-5281
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/08/2018

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105670

STARFISH SHELMAR HOME
606 SHELMAR DR
EULESS **TX** 76039
Phone (817) 545-7644 **Fax**

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

STARFISH ENTERPRISES LLC
606 SHELMAR DR
EULESS TX 76039
PHONE: (817) 545-7644 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/18/2016

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 001027

ALBRIGHT FOSTER CARE
7636 RED WILLOW RD
FORT WORTH **TX** 76133

Phone (817) 294-5915 **Fax** (817) 294-3742

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

BELINDA E ALBRIGHT
7636 RED WILLOW RD
FORT WORTH TX 76133

PHONE: (817) 294-5915 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE C
License Exp Dt: 02/21/2018

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104331

AUTUMN LEAVES OF CITYVIEW
7100 DUTCH BRANCH ROAD
FORT WORTH **TX** 76132

Phone (817) 769-3800 **Fax** (817) 769-3801

TOTAL Lic Capacity: 46 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 46 **TITLE19:** 0
PRIVATE Beds: 46 **TITLE 18/19:** 0

Owner Information

SOUTHWEST FT WORTH MEMORY CARE LLC
545 E JOHN CARPENTER FRWY ,STE 500
IRVING TX 75062

PHONE: (214) 845-4500 **FAX:** (214) 845-4501

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/24/2018

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000803

AVALON CARE GROUP, LLC
4551 BOAT CLUB RD
FORT WORTH **TX** 76135

Phone (214) 752-7050 **Fax** (214) 752-7054

TOTAL Lic Capacity: 40 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 40 **TITLE19:** 0
PRIVATE Beds: 40 **TITLE 18/19:** 0

Owner Information

AVALON CARE GROUP LLC
1625 N STEMMONS FREEWAY
DALLAS TX 75207

PHONE: (214) 752-7050 **FAX:** (214) 752-7054

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/15/2018

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 100339

BETHESDA GARDENS
5417 ALTA MESA BLVD
FORT WORTH **TX** 76133

Phone (817) 292-8886 **Fax** (817) 292-3128

TOTAL Lic Capacity: 124 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 124 **TITLE 18/19:** 0

Owner Information

BSLC II
15475 GLENEAGLE DR
COLORADO SPRINGS CO 80921

PHONE: (719) 481-0100 **FAX:** (719) 488-6080

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/26/2017

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103785

BETHESDA GARDENS MEMORY CARE COMMUNITY
5349 ALTAMESA BLVD
FORT WORTH **TX** 76123

Phone (817) 292-8886 **Fax** (817) 292-3128

TOTAL Lic Capacity: 32 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 62 **TITLE19:** 0
PRIVATE Beds: 32 **TITLE 18/19:** 0

Owner Information

BSLC II
15475 GLENEAGLE DR
COLORADO SPRINGS CO 80921

PHONE: (719) 481-0100 **FAX:** (719) 488-6080

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/26/2017

County **TARRANT** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000707

BROOKDALE BROADWAY CITYVIEW
5301 BRYANT IRVIN RD
FORT WORTH **TX** 76132

Phone (817) 346-9407 **Fax** (817) 294-3235

TOTAL Lic Capacity: 52 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 52 **TITLE 18/19:** 0

Owner Information

FORT AUSTIN LIMITED PARTNERSHIP
111 WESWOOD PLACE ,STE 400
BRENTWOOD TN 37027

PHONE: (312) 977-3742 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/25/2016

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000301

BROOKDALE TANGLEWOOD OAKS
2698 S HULEN ST
FORT WORTH **TX** 76109

Phone (817) 922-9559 **Fax** (817) 922-0050

TOTAL Lic Capacity: 116 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 24 **TITLE19:** 0
PRIVATE Beds: 116 **TITLE 18/19:** 0

Owner Information

ESC-NGH, LP
111 WESTWOOD PL ,STE 400
BRENTWOOD TN 37027

PHONE: (206) 298-2909 **FAX:** (206) 301-4500

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/01/2017

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 100302

BROOKDALE WESTOVER HILLS
6201 PLAZA PKWY
FORT WORTH **TX** 76116

Phone (817) 989-1174 **Fax** (817) 989-1946

TOTAL Lic Capacity: 31 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 31 **TITLE19:** 0
PRIVATE Beds: 31 **TITLE 18/19:** 0

Owner Information

ARC WESTOVER HILLS LP
6737 WEST WASHINGTON ST ,STE 2300
MILWAUKE WI 53214

PHONE: (414) 918-5000 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/25/2017

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 100206

BROOKDALE WESTOVER HILLS
6201 PLAZA PKWY
FORT WORTH **TX** 76116

Phone (817) 989-1174 **Fax** (817) 989-1946

TOTAL Lic Capacity: 144 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 144 **TITLE 18/19:** 0

Owner Information

ARC WESTOVER HILLS LP
6737 WEST WASHINGTON ST ,STE 2300
MILWAUKE WI 53214

PHONE: (414) 918-5000 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/20/2017

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000671

CASABLANCA ASSISTED LIVING AND MEMORY CARE
6617 DAN DANCIGER RD
FORT WORTH **TX** 76133

Phone (817) 292-0925 **Fax** (817) 768-7843

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 12 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

CASABLANCA RETIREMENT HOME, INC.
6617 DAN DANCIGER RD
FORT WORTH TX 76133

PHONE: (917) 224-1603 **FAX:** (469) 402-0906

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/30/2017

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104433

CIRCLE OF HELPING HANDS
6405 GREENBRIAR LN
FORT WORTH **TX** 76132

Phone (214) 470-9193 **Fax** (817) 534-5771

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

CIRCLE OF HELPING HANDS LLC
6405 GREENBRIAR LANE
FORT WORTH TX 76132

PHONE: (214) 470-9193 **FAX:** (817) 534-5771

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/12/2016

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030369

COLONIAL GARDENS OF FORT WORTH FW-1
6939 RIVER PARK CIRCLE
FORT WORTH **TX** 76116

Phone (817) 731-1440 **Fax** (817) 731-0535

TOTAL Lic Capacity: 20 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 20 **TITLE19:** 0
PRIVATE Beds: 20 **TITLE 18/19:** 0

Owner Information

ASF LIVING INC
P O BOX 3666
SAN ANGELO TX 76902

PHONE: (325) 653-3180 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/01/2016

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 100325

COLONIAL GARDENS OF FORT WORTH FW-2
6931 RIVER PARK CIR
FORT WORTH **TX** 76116
Phone (817) 731-9446 **Fax** (817) 731-4987

TOTAL Lic Capacity: 20 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 20 **TITLE19:** 0
PRIVATE Beds: 20 **TITLE 18/19:** 0

Owner Information

ASF LIVING INC
P O BOX 3666
SAN ANGELO TX 76902
PHONE: (325) 653-3180 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/01/2016

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104322

COURTYARDS AT RIVER PARK
3201 RIVER PARK
FORT WORTH **TX** 76116
Phone (817) 732-4436 **Fax** (817) 732-2667

TOTAL Lic Capacity: 71 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 22 **TITLE19:** 0
PRIVATE Beds: 71 **TITLE 18/19:** 0

Owner Information

NIC COURTYARDS MANAGEMENT LLC
1800 SW 1ST AVE ,STE 180
PORTLAND OR 97201-5362
PHONE: (503) 684-1123 **FAX:** (503) 684-2533
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/28/2017

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000675

COURTYARDS AT RIVER PARK
3201 RIVER PARK DR
FORT WORTH **TX** 76116
Phone (817) 732-4436 **Fax** (817) 732-2667

TOTAL Lic Capacity: 72 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 72 **TITLE 18/19:** 0

Owner Information

NIC COURTYARDS MANAGEMENT LLC
1800 SW 1ST AVE ,STE 180
PORTLAND OR 97201-5362
PHONE: (503) 684-1123 **FAX:** (503) 684-2533
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/28/2017

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101467

DRAKES ASSISTED LIVING
3229 COMANCHE ST
FORT WORTH **TX** 76119
Phone (817) 536-1454 **Fax** (817) 536-6859

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

BETTY K DRAKE
5508 WAINWRIGHT DR
FORT WORTH TX 76112
PHONE: (817) 451-8168 **FAX:** (817) 572-2539
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/11/2016

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 050669

EMERALD VISTA LODGE
6016 WEDGMONT CIR N
FORT WORTH **TX** 76133
Phone (817) 361-5717 **Fax** (817) 361-5717

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

DR NENITA C SABATER
6016 WEDGMONT CIR NO
FORT WORTH TX 76133
PHONE: (817) 361-5717 **FAX:** (817) 361-5717
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/02/2016

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 001240

FAIR HAVEN ADULT FOSTER CARE
5832 MONTERREY DR
FORT WORTH **TX** 76112
Phone (817) 429-5785 **Fax** (817) 429-5785

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

LOIS M SMITH
5832 MONTERREY DR
FORT WORTH TX 76112
PHONE: (817) 429-5785 **FAX:** (817) 429-5785
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE C
License Exp Dt: 03/03/2017

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 100982

FLEURDLEYS INC
6104 RENDON NEW HOPE RD
FORT WORTH **TX** 76140

Phone (817) 483-2808 **Fax** (817) 483-5651

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

Owner Information

FLEURDLEYS INC
6104 RENDON NEW HOPE RD
FORT WORTH TX 76140

PHONE: (817) 483-2808 **FAX:** (817) 483-5651

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/03/2017

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105160

GODS REACHOUT RESIDENTIAL AND ASSISTED LIVING
7801 W MARLBOROUGH
FORT WORTH **TX** 76134

Phone (817) 568-1445 **Fax** (817) 568-1445

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

VANZANELL EDWARDS
7801 W MARLBOROUGH
FORT WORTH TX 76134

PHONE: (817) 568-1445 **FAX:** (817) 568-1445

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/31/2017

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105743

GOOD LIFE SENIOR LIVING AND MEMORY CARE
812 WEST MORPHY ST
FORT WORTH **TX** 76104

Phone (817) 805-0507 **Fax** (817) 921-5402

TOTAL Lic Capacity: 42 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 42 **TITLE19:** 0
PRIVATE Beds: 42 **TITLE 18/19:** 0

Owner Information

MAGNOLIA MEDICAL MANAGEMENT LLC
812 W MORPHY ST
FORT WORTH TX 79382

PHONE: (806) 535-6322 **FAX:** (817) 921-5402

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/13/2016

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000812

GREENBRIAR MANSION
7865 OAKMONT BLD
FORT WORTH **TX** 76132

Phone (817) 292-0792 **Fax** (817) 292-6856

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

GREENBRIAR PRIME MANAGEMENT LLC
2423 GRAVEL DR
FORT WORTH TX 76118

PHONE: (817) 535-3827 **FAX:** (817) 535-1362

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/11/2016

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106183

HEARTIS EAGLE MOUNTAIN
3141 DALHART DRIVE
FORT WORTH **TX** 76179

Phone (817) 236-6116 **Fax**

TOTAL Lic Capacity: 95 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 35 **TITLE19:** 0
PRIVATE Beds: 95 **TITLE 18/19:** 0

Owner Information

EAGLE MOUNTAIN AL PARTNERS, LP
5910 N CENTRAL EXPRESSWAY ,STE 200
DALLAS TX 75206

PHONE: (214) 916-5750 **FAX:** (469) 547-5422

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/03/2018

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105915

HERITAGE PLACE ASSISTED LIVING
621 OLD HIGHWAY 1187
FORT WORTH **TX** 76028

Phone (817) 293-2300 **Fax**

TOTAL Lic Capacity: 138 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 28 **TITLE19:** 0
PRIVATE Beds: 138 **TITLE 18/19:** 0

Owner Information

TCG BURLESON AL, LLC
1200 SUMMIT AVE. ,STE. 444
FORT WORTH TX 76102

PHONE: (817) 446-4792 **FAX:** (817) 446-0923

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/07/2016

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000669

HERITAGE SQUARE
500 S BEACH ST
FORT WORTH **TX** 76105

Phone (817) 534-0013 **Fax** (817) 534-0308

TOTAL Lic Capacity: 85 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 85 **TITLE 18/19:** 0

Owner Information

GREENBRIAR PRIME MANAGEMENT LLC
2423 GRAVEL DR
FORT WORTH TX 76118

PHONE: (817) 535-3827 **FAX:** (817) 535-1362

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/08/2017

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000813

LAKEWOOD VILLAGE PERSONAL CARE UNIT
5100 RANDOL MILL RD
FORT WORTH **TX** 76112

Phone (817) 451-8001 **Fax** (866) 529-7014

TOTAL Lic Capacity: 39 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 39 **TITLE 18/19:** 0

Owner Information

CHRISTIAN CARE CENTERS INC
900 WIGGINS PKWY
MESQUITE TX 75150

PHONE: (972) 686-2400 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/30/2016

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030236

MORRIS FAMILY HOMES
1333 E RICHMOND AVE
FORT WORTH **TX** 76104

Phone (817) 926-7041 **Fax** (817) 926-7461

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

JERRY B MORRIS JR
6901 REBEL RD
FORT WORTH TX 76104

PHONE: (817) 926-7041 **FAX:** (817) 926-7461

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/26/2017

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103283

PATHWAYS ADULT LIVING INC
921 W CANNON ST
FORT WORTH **TX** 76104

Phone (817) 810-0606 **Fax** (817) 810-0616

TOTAL Lic Capacity: 35 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 35 **TITLE 18/19:** 0

Owner Information

PATHWAYS ADULT LIVING INC
921 WEST CANNON ST
FORT WORTH TX 76104

PHONE: (817) 810-0606 **FAX:** (817) 810-0616

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 06/05/2018

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102849

ROSE TERRACE ELDERLY CARE HOME
4704 WHISTLER DR
FORT WORTH **TX** 76132

Phone (817) 263-2203 **Fax** (817) 263-2203

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

ROSE TERRACE ELDERLY CARE HOME, LTD.
6080 S HULEN ST ,STE 360
FORT WORTH TX 76132

PHONE: (817) 313-7588 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/21/2017

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105244

SAVANNA OAKS RANCH
232 BENS TRAIL
FORT WORTH **TX** 76120

Phone (972) 241-9334 **Fax** (972) 484-4739

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

PATE REHABILITATION ENDEAVORS, INC
2655 VILLA CREEK ,STE 140
DALLAS TX 75234

PHONE: (972) 241-9334 **FAX:** (972) 484-4739

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/06/2016

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105780

SILVERADO - FT. WORTH
7001 BRYANT IRVIN ROAD
FORT WORTH **TX** 76132

Phone (817) 292-2662 **Fax** (817) 292-2621

TOTAL Lic Capacity: 92 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 92 **TITLE19:** 0
PRIVATE Beds: 92 **TITLE 18/19:** 0

Owner Information

MERIDIAN FORT WORTH ALZ OE, LP
3811 TURTLE CREEK BLVD ,STE 1050
DALLAS TX 75219

PHONE: (214) 651-4000 **FAX:** (214) 651-4001

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/13/2018

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102163

ST JOHN'S RESIDENTIAL CARE HOME INC
4448 MALLOW OAK DR
FORT WORTH **TX** 76123

Phone (817) 680-5171 **Fax** (817) 361-9244

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

Owner Information

ST JOHN'S RESIDENTIAL CARE HOME INC
805 FIREWHELL TRAIL
FORT WORTH TX 76112

PHONE: (817) 680-5171 **FAX:** (817) 361-9244

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/19/2016

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101565

ST JOHN'S RESIDENTIAL CARE HOME INC
5801 RAYBURN DR
FORT WORTH **TX** 76133

Phone (817) 294-2674 **Fax** (817) 361-9244

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

Owner Information

ST JOHN'S RESIDENTIAL CARE HOME INC
805 FIREWHELL TRAIL
FORT WORTH TX 76112

PHONE: (817) 680-5171 **FAX:** (817) 361-9244

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/22/2016

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104442

ST JOHN'S RESIDENTIAL CARE HOME, INC
4444 MALLOW OAK DR
FORT WORTH **TX** 76123

Phone (817) 297-1464 **Fax** (817) 361-9244

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

ST JOHN'S RESIDENTIAL CARE HOME, INC
4444 MALLOW OAK DRIVE
FORT WORTH TX 76123

PHONE: (817) 680-5171 **FAX:** (817) 361-9244

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/21/2017

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102977

ST. JOHN'S RESIDENTIAL CARE HOME III INC.
7925 CONEFLOWER ROAD
FORT WORTH **TX** 76123

Phone (682) 554-8097 **Fax** (682) 253-8019

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

Owner Information

PASCUAL SENIOR CARE INC
7925 CONEFLOWER RD
FORT WORTH TX 76123

PHONE: (682) 554-8097 **FAX:** (682) 253-8019

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/01/2017

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105561

ST. JOHN'S RESIDENTIAL CARE HOME INC
4816 TEAROSE TRAIL
FORT WORTH **TX** 76123

Phone (817) 717-5168 **Fax**

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

PASCUAL SENIOR CARE INC
4816 TEAROSE TRL
FORT WORTH TX 76123

PHONE: (682) 554-8097 **FAX:** (682) 253-8019

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/28/2018

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106067

ST. JOHN'S RESIDENTIAL CARE HOME, INC.
805 FIRE WHEEL TRAIL
FORT WORTH **TX** 76112

Phone (817) 680-5171 **Fax** (817) 361-9244

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

ST JOHN'S RESIDENTIAL CARE HOME INC
805 FIREWHELL TRAIL
FORT WORTH TX 76112

PHONE: (817) 680-5171 **FAX:** (817) 361-9244

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 06/22/2017

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102835

SUNRISE OF FORT WORTH
6151 BRYANT IRVIN ROAD
FORT WORTH **TX** 76132

Phone (817) 292-2288 **Fax** (817) 292-4668

TOTAL Lic Capacity: 105 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 42 **TITLE19:** 0
PRIVATE Beds: 105 **TITLE 18/19:** 0

Owner Information

MS FORT WORTH SH LLC
10350 ORMSBY PARK PLACE ,STE 300
LOUISVILLE KY 40223

PHONE: (502) 357-9000 **FAX:** (502) 357-9441

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/01/2016

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000964

TANDY VILLAGE
2601 TANDY AVE
FORT WORTH **TX** 76103

Phone (817) 535-1253 **Fax** (817) 536-0177

TOTAL Lic Capacity: 160 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 160 **TITLE 18/19:** 0

Owner Information

ROMANS HOUSE LLC
1312 LIVER POOL LANE
MANSFIELD TX 76063

PHONE: (817) 247-8259 **FAX:** (817) 753-7808

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/15/2016

County **TARRANT** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104969

THE STAYTON AT MUSEUM WAY
2501 MUSEUM WAY
FORT WORTH **TX** 76107-3507

Phone (817) 332-3332 **Fax** (817) 332-3340

TOTAL Lic Capacity: 72 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 20 **TITLE19:** 0
PRIVATE Beds: 72 **TITLE 18/19:** 0

Owner Information

TARRANT COUNTY SENIOR LIVING CENTER INC
12720 HILLCREST RD ,STE 106
DALLAS TX 75230

PHONE: (469) 916-8958 **FAX:** (214) 623-6115

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/22/2017

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106208

THE VANTAGE AT CITY VIEW
6251 OVERTON RIDGE BLVD.
FORT WORTH **TX** 76132

Phone (817) 292-5600 **Fax** (817) 292-1955

TOTAL Lic Capacity: 88 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 30 **TITLE19:** 0
PRIVATE Beds: 88 **TITLE 18/19:** 0

Owner Information

CRP CITY VIEW LLC
6301 OVERTON RIDGE BLVD
FORT WORTH TX 76132

PHONE: (770) 777-9898 **FAX:** (678) 317-2200

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/13/2017

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106043

VINCENT VICTORIA VILLAGE
4607 E CALIFORNIA PKWY
FORT WORTH **TX** 76119

Phone (817) 247-8259 **Fax** (682) 422-3644

TOTAL Lic Capacity: 80 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 80 **TITLE 18/19:** 0

Owner Information

HEALTHCORE SYSTEM MANAGEMENT LLC
4607 E CALIFORNIA PKWY
FOREST HILL TX 76119

PHONE: (817) 247-8259 **FAX:** (682) 422-3644

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/10/2017

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000846

WESTCHESTER PLAZA
554 S SUMMIT
FORT WORTH **TX** 76104

Phone (817) 336-2593 **Fax** (817) 335-4403

TOTAL Lic Capacity: 275 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 275 **TITLE 18/19:** 0

Owner Information

WESTCHESTER PRIME MANAGEMENT LLC
2423 GRAVEL DR
FORT WORTH TX 76118

PHONE: (469) 222-6468 **FAX:** (469) 519-0344

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/11/2016

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105382

LAKE COUNTRY ASSISTED LIVING, LLC
7505 LOCHWOOD CT
FT WORTH **TX** 76179

Phone (682) 841-7576 **Fax** (682) 841-7576

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

Owner Information

LAKE COUNTRY ASSISTED LIVING, LLC
7505 LOCHWOOD CT
FT WORTH TX 76179

PHONE: (682) 841-7576 **FAX:** (682) 841-7576

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/14/2017

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000860

402 DUNCAN PERRY
402 DUNCAN PERRY RD
GRAND PRAIRIE **TX** 75050

Phone (972) 206-0402 **Fax** (972) 206-0408

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

COMMUNITY ASSISTED LIVING OF GRAND PRAIRIE INC
3803 S ROBINSON RD
GRAND PRAIRIE TX 75052-1239

PHONE: (972) 263-2112 **FAX:** (972) 263-2115

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/21/2017

County **TARRANT** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105944

ABBY'S PLACE LLC
5819 SUMMERWOOD DRIVE
GRAND PRAIRIE **TX** 75052

Phone (972) 986-6806 **Fax**

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

ABBY'S PLACE LLC
5819 SUMMERWOOD DRIVE
GRAND PRAIRIE TX 75052

PHONE: (972) 986-6806 **FAX:** (866) 432-0262

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/14/2017

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105663

ACCESSIBLE LIVING
2935 PALADIUM DR
GRAND PRAIRIE **TX** 75052

Phone (786) 237-9470 **Fax** (214) 235-0279

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

IREKA HAMILTON
2935 PALADIUM DR
GRAND PRAIRIE TX 75052

PHONE: (786) 237-9470 **FAX:** (214) 235-0279

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/09/2016

County **TARRANT** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105243

HALO RESIDENTIAL CARE HOMES
2826 ROCHESTER COURT
GRAND PRAIRIE **TX** 75052

Phone (469) 964-2337 **Fax** (940) 239-0414

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

Owner Information

HALO HEALTHCARE CONCEPTS INC
2826 ROCHESTER CT
GRAND PRAIRIE TX 75052

PHONE: (469) 964-2337 **FAX:** (940) 239-0414

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/08/2017

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106040

OXFORD GLEN AT GRAND PRAIRIE
2424 GRAND PENINSULA DRIVE
GRAND PRAIRIE **TX** 75054
Phone (972) 841-2599 **Fax**

TOTAL Lic Capacity: 42 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 42 **TITLE19:** 0
PRIVATE Beds: 42 **TITLE 18/19:** 0

Owner Information

OXFORD MEMORY CARE GP, LTD
125 N. MARKET ,SUITE 1416
WICHITA KS 67202
PHONE: (316) 201-3210 **FAX:** (316) 201-3219
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/09/2017

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030384

ATRIA GRAPEVINE
3975 WILLIAM D TATE AVE
GRAPEVINE **TX** 76051
Phone (817) 416-8907 **Fax** (817) 421-9792

TOTAL Lic Capacity: 110 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 25 **TITLE19:** 0
PRIVATE Beds: 110 **TITLE 18/19:** 0

Owner Information

WG GRAPEVINE SH LLC
10350 ORMSBY PARK PL ,STE 300
LOUISVILLE KY 40223
PHONE: (502) 779-4700 **FAX:** (502) 779-4701
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/12/2017

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104742

DANCING RIVER ASSISTED LIVING
3735 IRA E WOODS
GRAPEVINE **TX** 76051
Phone (817) 442-0505 **Fax** (817) 488-9752

TOTAL Lic Capacity: 106 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 19 **TITLE19:** 0
PRIVATE Beds: 106 **TITLE 18/19:** 0

Owner Information

SLH 2014 MANAGER LLC
303 EAST WACKER DR ,STE 2400
CHICAGO IL 60601
PHONE: (312) 673-4387 **FAX:** (312) 673-4487
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/01/2016

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 101961

GRAND BROOK MEMORY CARE OF GRAPEVINE
2501 HERITAGE AVENUE
GRAPEVINE **TX** 76051
Phone (817) 329-8500 **Fax** (817) 329-8501

TOTAL Lic Capacity: 48 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 48 **TITLE19:** 0
PRIVATE Beds: 48 **TITLE 18/19:** 0

Owner Information

GRAPEVINE OPCO, LLC
7708 SAN JACINTO #100
PLANO TX 75024
PHONE: (469) 331-8200 **FAX:** (469) 331-8200
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/23/2017

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105836

MEADOWOOD ASSISTED LIVING & MEMORY CARE AT THE VINEYARDS
4545 MERLOT AVE
GRAPEVINE **TX** 76051
Phone (817) 275-6100 **Fax**

TOTAL Lic Capacity: 85 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 18 **TITLE19:** 0
PRIVATE Beds: 85 **TITLE 18/19:** 0

Owner Information

MEADOWOOD ALF, LLC
8415 E 21ST ST N ,STE 100
WICHITA KS 67206
PHONE: (316) 615-6288 **FAX:** (316) 616-6255
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/15/2017

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103208

AUTUMN LEAVES OF FOSSIL CREEK
4501 SILVER SAGE DR
HALTOM CITY **TX** 76137
Phone (817) 849-9000 **Fax** (817) 849-9001

TOTAL Lic Capacity: 46 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 46 **TITLE19:** 0
PRIVATE Beds: 46 **TITLE 18/19:** 0

Owner Information

HSRE-LSGI I TRS, LLC
545 EAST JOHN CARPENTER FREEWAY ,SUITE 500
IRVING TX 75062
PHONE: (214) 845-4500 **FAX:** (214) 845-4501
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/23/2017

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105869

RIVERSIDE INN AT FOSSIL CREEK MEMORY CARE COMMUNITY
6621 N. RIVERSIDE DRIVE
HALTOM CITY **TX** 76137
Phone (817) 708-2234 **Fax**

TOTAL Lic Capacity: 68 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 68 **TITLE19:** 0
PRIVATE Beds: 68 **TITLE 18/19:** 0

Owner Information

RIVERSIDE MEMORY CARE, LLC
111 MARKET ST NE ,STE 200
OLYMPIA WA 98501
PHONE: (360) 867-1900 **FAX:** (360) 867-1954
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/20/2016

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106482

AVALON MEMORY CARE - KELLER
1137 RUFE SNOW DR
KELLER **TX** 76248
Phone (214) 752-7050 **Fax** (214) 752-7054

TOTAL Lic Capacity: 24 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 24 **TITLE 18/19:** 0

Owner Information

AVALON DEMENTIA CARE MANAGEMENT, LLC
1625 N STEMMONS FRWY
DALLAS TX 75207
PHONE: (214) 752-7050 **FAX:** (214) 752-7054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/07/2018

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 050086

HIDDEN OAKS ASSISTED LIVING
765 BANDIT TRAIL
KELLER **TX** 76248
Phone (817) 479-7021 **Fax**

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

HIDDEN OAKS ASSISTED LIVING LLC
210 CR 3073
DE BERRY TX 75639
PHONE: (903) 622-7565 **FAX:** (903) 622-7565
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/01/2017

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105555

LEGACY AT BEAR CREEK
200 KELLER SMITHFIELD RD.SOUTH
KELLER **TX** 76248
Phone (817) 993-0757 **Fax** (817) 993-0748

TOTAL Lic Capacity: 90 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 26 **TITLE19:** 0
PRIVATE Beds: 90 **TITLE 18/19:** 0

Owner Information

SNR 25 LEGACY AT BEAR CREEK LEASING LLC
1345 AVENUE OF THE AMERICAS, 49TH F
NEW YOURK NY 10105
PHONE: (569) 304-5033 **FAX:** (972) 608-9716
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/01/2017

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106140

LEGEND AT FORT WORTH
8708 OLD DENTON ROAD
KELLER **TX** 76244
Phone (817) 885-8800 **Fax**

TOTAL Lic Capacity: 94 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 18 **TITLE19:** 0
PRIVATE Beds: 94 **TITLE 18/19:** 0

Owner Information

DFW ALF 1 LLC
8708 OLD DENTON RD
FT WORTH TX 76244
PHONE: (316) 616-6288 **FAX:** (316) 616-6255
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/10/2017

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105907

MEADOWVIEW PLACE
2000 MEADOWVIEW DR
KELLER **TX** 76262
Phone (817) 337-5496 **Fax**

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

Owner Information

MEADOWVIEW PLACE, LLC
2001 FAWKES LANE
KELLER TX 76262
PHONE: (817) 337-5496 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/19/2016

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104920

MUSTANG CREEK ESTATES
675 RAPP ROAD BLDG A
KELLER **TX** 76248
Phone (817) 337-6800 **Fax**

TOTAL Lic Capacity: 30 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 30 **TITLE 18/19:** 0

Owner Information

CLERMONT AVENUE II LTD
701 RAPP RD
KELLER TX 76248
PHONE: (214) 683-5111 **FAX:** (972) 623-2275
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/12/2017

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104919

MUSTANG CREEK ESTATES
675 RAPP RD BLDG C
KELLER **TX** 76248
Phone (817) 337-6800 **Fax**

TOTAL Lic Capacity: 30 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 30 **TITLE 18/19:** 0

Owner Information

CLERMONT AVENUE II LTD
701 RAPP RD
KELLER TX 76248
PHONE: (214) 683-5111 **FAX:** (972) 623-2275
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/22/2018

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104908

MUSTANG CREEK ESTATES
675 RAPP ROAD BLDG E
KELLER **TX** 76248
Phone (817) 337-6800 **Fax**

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

CLERMONT AVENUE II LTD
701 RAPP RD
KELLER TX 76248
PHONE: (214) 683-5111 **FAX:** (972) 623-2275
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/23/2017

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105549

MUSTANG CREEK ESTATES KELLER HOUSE F
701 RAPP ROAD, BLDG F
KELLER **TX** 76248
Phone (214) 683-5111 **Fax** (972) 623-2275

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

CLERMONT AVENUE II LTD
701 RAPP RD
KELLER TX 76248
PHONE: (214) 683-5111 **FAX:** (972) 623-2275
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/25/2017

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105550

MUSTANG CREEK ESTATES KELLER HOUSE G
701 RAPP RD
KELLER **TX** 76248
Phone (214) 683-5111 **Fax** (972) 623-2275

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

CLERMONT AVENUE II LTD
701 RAPP RD
KELLER TX 76248
PHONE: (214) 683-5111 **FAX:** (972) 623-2275
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/17/2017

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106142

TENDER LOVING CARE ASSISTED LIVING HOME
1113 HILLSIDE DRIVE
KELLER **TX** 76248
Phone (817) 562-2388 **Fax**

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

Owner Information

CESAM CARE LLC
1113 HILLSIDE DRIVE
KELLER TX 76248
PHONE: (817) 562-2388 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/24/2017

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030244

WHITLEY PLACE
800 WHITLEY RD
KELLER **TX** 76248

Phone (817) 379-0795 **Fax** (817) 337-1032

TOTAL Lic Capacity: 65 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 20 **TITLE19:** 0
PRIVATE Beds: 65 **TITLE 18/19:** 0

Owner Information

CAPITAL SENIOR MANAGEMENT 2 INC
14160 DALLAS PKWY ,STE 300
DALLAS TX 75254

PHONE: (972) 770-5600 **FAX:** (972) 770-5666

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/01/2017

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000807

BROOKDALE MANSFIELD
1771 COUNTRY CLUB
MANSFIELD **TX** 76063

Phone (817) 477-0600 **Fax** (817) 477-2223

TOTAL Lic Capacity: 58 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 58 **TITLE 18/19:** 0

Owner Information

BROOKDALE SENIOR LIVING COMMUNITIES INC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214

PHONE: (414) 918-5441 **FAX:** (414) 918-6076

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/01/2017

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106384

CEDAR BLUFF ASSISTED LIVING AND MEMORY CARE
354 MATLOCK ROAD
MANSFIELD **TX** 76063

Phone (817) 473-2200 **Fax**

TOTAL Lic Capacity: 112 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 52 **TITLE19:** 0
PRIVATE Beds: 112 **TITLE 18/19:** 0

Owner Information

MTAL OPERATOR LLC
505 PECAN ST ,STE 101
FOR WORTH TX 76102

PHONE: (817) 632-6364 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/23/2018

County **TARRANT** Reg Svcs: TEAM 5 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106137

ECHELON PLACE
140 N. MITCHELL
MANSFIELD **TX** 76063

Phone (682) 518-1070 **Fax** (682) 518-1093

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

ECHELON PLACE LP
140 N MITCHELL
MANSFIELD TX 76063

PHONE: (682) 518-1070 **FAX:** (682) 518-1093

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/06/2018

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 104688

ISLE AT WATERCREST - MANSFIELD
200 E. DEBBIE LANE
MANSFIELD **TX** 76063

Phone (817) 453-3900 **Fax** (817) 453-3909

TOTAL Lic Capacity: 130 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 43 **TITLE19:** 0
PRIVATE Beds: 130 **TITLE 18/19:** 0

Owner Information

CHP ISLE AT WATERCREST-MANSFIELD TENANT CORP
200 EAST DEBBIE LANE
MANSFIELD TX 76063

PHONE: (817) 453-3900 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/05/2016

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105236

IVY LEAVES PLACE
7199 RENDON BLOOKWORTH ROAD
MANSFIELD **TX** 76063

Phone (817) 808-7172 **Fax** (817) 483-1294

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

IVY LEAVES PLACE LLC
7199 RENDON BLOODWORTH RD
MANSFIELD TX 76063

PHONE: (817) 808-7172 **FAX:** (817) 483-1294

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/27/2017

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 102915

WALNUT CREEK ASSISTED LIVING AND MEMORY CARE COMMUNITY
2281 COUNTRY CLUB DR
MANSFIELD **TX** 76063
Phone (817) 473-3018 **Fax** (817) 453-1652

TOTAL Lic Capacity: 70 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 70 **TITLE 18/19:** 0

Owner Information

CSL S MANSFIELD LLC
14160 DALLAS PARKWAY ,STE 300
DALLAS TX 75254
PHONE: (972) 308-8366 **FAX:** (972) 387-8216
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/01/2016

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 100285

ASHWOOD COURT
7501 GLENVIEW DR
NORTH RICHLAND HILLS **TX** 76180
Phone (817) 804-3100 **Fax**

TOTAL Lic Capacity: 120 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 120 **TITLE 18/19:** 0

Owner Information

NORTH RICHLAND HILLS SENIOR LIVING, LLC
117 WEST MAIN
ALLEN TX 75013
PHONE: (817) 984-4404 **FAX:** (903) 215-8581
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/01/2018

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030174

BROOKDALE HOLIDAY LANE ESTATES
6155 HOLIDAY LN
NORTH RICHLAND HILLS **TX** 76180
Phone (817) 427-0275 **Fax** (817) 656-4227

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

EMERITUS CORPORATION
6737 W. WASHINGTON STREET ,SUITE 2300
MILWAUKEE WI 53214
PHONE: (414) 918-5000 **FAX:** (414) 918-5054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/31/2016

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 010232

BROOKDALE NORTH RICHLAND HILLS
8500 EMERALD HILLS WAY
NORTH RICHLAND HILLS **TX** 76180
Phone (817) 577-3337 **Fax** (817) 427-1973

TOTAL Lic Capacity: 110 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 110 **TITLE 18/19:** 0

Owner Information

CSH NORTH RICHLAND HILLS LLC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214
PHONE: (414) 918-5000 **FAX:** (414) 918-6076
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/30/2017

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000304

GOOD PLACE ASSISTED LIVING
7801 N RICHLAND BLVD
NORTH RICHLAND HILLS **TX** 76180
Phone (817) 581-6310 **Fax** (817) 581-0608

TOTAL Lic Capacity: 80 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 80 **TITLE 18/19:** 0

Owner Information

CSL LEASECO INC
14160 DALLAS PKWY ,STE 300
DALLAS TX 75254
PHONE: (972) 770-5600 **FAX:** (972) 770-5666
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 06/01/2017

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000804

BROOKDALE RICHLAND HILLS
7520 GLENVIEW DR
RICHLAND **TX** 76180
Phone (817) 589-8600 **Fax** (817) 589-7603

TOTAL Lic Capacity: 50 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 50 **TITLE 18/19:** 0

Owner Information

AHC RICHLAND HILLS LLC
111 WESTWOOD PLACE ,SUITE 400
BRENTWOOD TN 37027
PHONE: (615) 221-2250 **FAX:** (615) 221-2280
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/20/2016

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030263

BROOKDALE RICHLAND HILLS 2
7520 B GLENVIEW DR
RICHLAND HILLS **TX** 76180

Phone (817) 589-9688 **Fax** (817) 590-2881

TOTAL Lic Capacity: 50 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 50 **TITLE19:** 0
PRIVATE Beds: 50 **TITLE 18/19:** 0

Owner Information

AHC RICHLAND HILLS, LLC
7520 B GLENVIEW DRIVE
RICHLAND HILLS TX 76180

PHONE: (414) 518-5441 **FAX:** (414) 918-6076

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/20/2016

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105902

SILVERADO - SOUTHLAKE
2001 E. KIRKWOOD BLVD.
SOUTHLAKE **TX** 76092

Phone (817) 756-8600 **Fax** (817) 886-2620

TOTAL Lic Capacity: 65 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 65 **TITLE19:** 0
PRIVATE Beds: 65 **TITLE 18/19:** 0

Owner Information

SILVERADO SOUTHLAKE LLC
6400 OAK CANYON ,SUITE 200
IRVINE CA 92618

PHONE: (949) 240-7200 **FAX:** (949) 240-7270

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/01/2017

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 103303

THE ISLE AT WATERMERE
101 WATERMERE DR
SOUTHLAKE **TX** 76092

Phone (817) 748-4000 **Fax** (817) 748-4001

TOTAL Lic Capacity: 120 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 40 **TITLE19:** 0
PRIVATE Beds: 120 **TITLE 18/19:** 0

Owner Information

SOUTHLAKE CARE GROUP LP
5307 E MOCKINGBIRD LANE ,STE 1010
DALLAS TX 75206

PHONE: (214) 370-2623 **FAX:** (817) 431-2699

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/27/2016

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 105649

THE LANDING AT WATERMERE
201 WATERMERE DRIVE
SOUTHLAKE **TX** 76092

Phone (817) 482-1340 **Fax** (817) 431-1314

TOTAL Lic Capacity: 40 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 40 **TITLE 18/19:** 0

Owner Information

NORTH TOWER CARE GROUP LP
5307 E. MOCKINGBIRD LANE ,STE 1010
DALLAS TX 75206

PHONE: (214) 370-2600 **FAX:** (214) 370-2699

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/06/2018

County **TARRANT** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 030018

BROOKDALE WATAUGA
5800 N PARK RD
WATAUGA **TX** 76148

Phone (972) 473-7400 **Fax** (972) 473-7403

TOTAL Lic Capacity: 50 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 50 **TITLE 18/19:** 0

Owner Information

BROOKDALE SENIOR LIVING COMMUNITIES INC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214

PHONE: (414) 918-5441 **FAX:** (414) 918-6076

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/01/2016

County **TARRANT** Reg Svcs: TEAM 6 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 106056

THE WESTMORE
25 LEONARD TRAIL
WESTWORTH VILLAGE **TX** 76114

Phone (817) 731-7600 **Fax**

TOTAL Lic Capacity: 140 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 23 **TITLE19:** 0
PRIVATE Beds: 140 **TITLE 18/19:** 0

Owner Information

TCG WESTWORTH VILLAGE CAMPUS LLC
1200 SUMMIT AVE ,STE 444
FORT WORTH TX 76102

PHONE: (817) 446-4792 **FAX:** (817) 446-0923

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/25/2016

County **TAYLOR** Reg Svcs: ABILENE GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 101090

AMBERS HOUSE
3264 VARNER LN
ABILENE **TX** 79601
Phone (325) 232-6926 **Fax** (325) 673-7829

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

Owner Information

DISABILITY RESOURCES INC
PO BOX 1880
ABILENE TX 79604
PHONE: (325) 677-6815 **FAX:** (325) 673-7829
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/01/2017

County **TAYLOR** Reg Svcs: ABILENE GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 101202

ANDRESS HOUSE
3257 VARNER LN
ABILENE **TX** 79601
Phone (325) 677-3106 **Fax**

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

DISABILITY RESOURCES INC
PO BOX 1880
ABILENE TX 79604
PHONE: (325) 677-6815 **FAX:** (325) 673-7829
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/25/2016

County **TAYLOR** Reg Svcs: ABILENE GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 000626

CHISHOLM PLACE
1450 E N 10TH ST
ABILENE **TX** 79601
Phone (325) 670-0961 **Fax** (325) 670-0780

TOTAL Lic Capacity: 44 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 44 **TITLE 18/19:** 0

Owner Information

CHISHOLM AID OPCO LLC
330 N WABASH ,STE 3700
CHICAGO IL 60611
PHONE: (312) 725-7000 **FAX:** (312) 332-5300
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/11/2017

County **TAYLOR** Reg Svcs: ABILENE GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 102042

CHOICES RESIDENTIAL ASSISTED LIVING
1610 ORANGE STREET
ABILENE **TX** 79601
Phone (325) 676-7667 **Fax**

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

JUDY LYNN HANCOCK
1610 ORANGE ST
ABILENE TX 79601
PHONE: (325) 676-7667 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE C
License Exp Dt: 04/11/2017

County **TAYLOR** Reg Svcs: ABILENE GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 030108

COVENANT PLACE OF ABILENE
3234 BUFFALO GAP RD
ABILENE **TX** 79606
Phone (325) 793-1144 **Fax** (325) 793-1422

TOTAL Lic Capacity: 55 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 55 **TITLE 18/19:** 0

Owner Information

CSL LEASECO INC
14160 DALLAS PKWY ,STE 300
DALLAS TX 75254
PHONE: (972) 770-5600 **FAX:** (972) 770-5666
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/01/2017

County **TAYLOR** Reg Svcs: ABILENE GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 000836

FULWILER HOUSE
1551 FULWILER RD
ABILENE **TX** 79603
Phone (325) 691-5953 **Fax** (325) 673-7829

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

DISABILITY RESOURCES INC
PO BOX 1880
ABILENE TX 79604
PHONE: (325) 677-6815 **FAX:** (325) 673-7829
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/30/2016

County **TAYLOR** Reg Svcs: ABILENE GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 000665

HIGHLAND ASSISTED LIVING LLC
2310 S SEVENTH
ABILENE **TX** 79605
Phone (325) 675-5100 **Fax** (325) 675-5300

TOTAL Lic Capacity: 39 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 39 **TITLE 18/19:** 0

Owner Information

HIGHLAND ASSISTED LIVING L L C
PO BOX 3395
ABILENE TX 79604
PHONE: (915) 675-5100 **FAX:** (325) 675-5300
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/01/2018

County **TAYLOR** Reg Svcs: ABILENE GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 001014

KENNETH HART
1742 SAYLES BLVD
ABILENE **TX** 79605
Phone (325) 701-4044 **Fax** (325) 701-4044

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

KENNETH HART
1742 SAYLES BLVD
ABILENE TX 79605
PHONE: (325) 690-6123 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE C
License Exp Dt: 07/19/2017

County **TAYLOR** Reg Svcs: ABILENE GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 000995

KENWOOD HOUSE
951 KENWOOD
ABILENE **TX** 79601
Phone (325) 672-1482 **Fax**

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

DISABILITY RESOURCES INC
PO BOX 1880
ABILENE TX 79604
PHONE: (325) 677-6815 **FAX:** (325) 673-7829
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/09/2018

County **TAYLOR** Reg Svcs: ABILENE GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 101167

ORSBURN HOUSE
3258 VARNER LANE
ABILENE **TX** 79601
Phone (325) 677-3104 **Fax** (325) 673-7829

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

Owner Information

DISABILITY RESOURCES INC
PO BOX 1880
ABILENE TX 79604
PHONE: (325) 677-6815 **FAX:** (325) 673-7829
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/23/2017

County **TAYLOR** Reg Svcs: ABILENE GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 030102

ROYAL ESTATES OF ABILENE
6565 CENTRAL PARK BLVD
ABILENE **TX** 79606
Phone (325) 690-9210 **Fax** (915) 690-9212

TOTAL Lic Capacity: 120 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 120 **TITLE 18/19:** 0

Owner Information

SENIOR LIFESTYLE TEXAS ABILENE LP
303 E WACKER DR ,STE 2400
CHICAGO IL 60601
PHONE: (312) 673-4333 **FAX:** (312) 673-4430
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/01/2016

County **TAYLOR** Reg Svcs: ABILENE GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 101004

THE COZY COTTAGE
714 S SAN JOSE
ABILENE **TX** 79605
Phone (325) 695-7949 **Fax**

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

BRENDA MCDONALD COOK
714 S SAN JOSE
ABILENE TX 79605
PHONE: (915) 695-7949 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE C
License Exp Dt: 04/26/2017

County **TAYLOR** Reg Svcs: ABILENE GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 103249

THE WOOD GROUP
858 FORMOSA ST
ABILENE **TX** 79602
Phone (940) 767-0463 **Fax** (940) 767-0466

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

TWG INVESTMENTS LTD
3610 BARNETT RD
WICHITA FALLS TX 76310
PHONE: (940) 767-0463 **FAX:** (940) 767-0466
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/17/2017

County **TAYLOR** Reg Svcs: ABILENE GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 102002

WESLEY COURT ASSISTED LIVING CENTER
2617 ANTILLEY ROAD
ABILENE **TX** 79606
Phone (325) 437-1184 **Fax** (325) 437-1185

TOTAL Lic Capacity: 29 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 29 **TITLE 18/19:** 0

Owner Information

ER OPCO WC, LLC
PO BOX 2107
BRENTWOOD TN 37024-2107
PHONE: (615) 915-2932 **FAX:** (615) 915-2938
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/28/2017

County **TAYLOR** Reg Svcs: ABILENE GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 000414

WISTERIA PLACE ASSISTED LIVING CENTER
3202 S WILLIS ST
ABILENE **TX** 79605
Phone (325) 692-6145 **Fax** (325) 695-2629

TOTAL Lic Capacity: 82 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 38 **TITLE19:** 0
PRIVATE Beds: 82 **TITLE 18/19:** 0

Owner Information

SOUTHERN OAKS HEALTHCARE INC
3202 SOUTH WILLIS STREET
ABILENE TX 79605
PHONE: (325) 695-6145 **FAX:** (325) 695-2629
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/01/2017

County **TERRY** Reg Svcs: HIGH PLAINS GERI 2 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 030026

COTTAGE VILLAGE
1202 CHERYL DR
BROWNFIELD **TX** 79316
Phone (806) 637-9066 **Fax** (806) 637-6305

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

COTTAGE VILLAGE LIVING II LLC
1202 CHERYL DR
BROWNFIELD TX 79316
PHONE: (806) 637-9066 **FAX:** (806) 637-6305
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/01/2018

County **TITUS** Reg Svcs: TYLER NW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 000428

HERITAGE PARK VILLAGE
1714 N EDWARDS ST
MOUNT PLEASANT **TX** 75455
Phone (903) 577-0759 **Fax** (903) 577-8777

TOTAL Lic Capacity: 51 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 51 **TITLE 18/19:** 0

Owner Information

MOUNT PLEASANT SENIOR LIVING LLC
117 W MAIN ST
ALLEN TX 75013
PHONE: (817) 984-4404 **FAX:** (903) 215-8581
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/29/2017

County **TITUS** Reg Svcs: TYLER NW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 000748

HERITAGE PARK VILLAGE
1712 NORTH EDWARDS ST
MOUNT PLEASANT **TX** 75455
Phone (903) 577-1170 **Fax** (903) 215-8581

TOTAL Lic Capacity: 34 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 34 **TITLE 18/19:** 0

Owner Information

MOUNT PLEASANT SENIOR LIVING LLC
117 W MAIN ST
ALLEN TX 75013
PHONE: (817) 984-4404 **FAX:** (903) 215-8581
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/01/2017

County **TITUS** Reg Svcs: TYLER NW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 000782

MOUNT PLEASANT ASSISTED LIVING
2009 N EDWARDS
MOUNT PLEASANT **TX** 75455

Phone (903) 572-8123 **Fax** (903) 577-1559

TOTAL Lic Capacity: 25 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 25 **TITLE 18/19:** 0

Owner Information

MOUNT PLEASANT ALF OPERATING COMPANY LLC
2009 N EDWARDS
MOUNT PLEASANT TX 75455

PHONE: (903) 572-8123 **FAX:** (903) 577-1599

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/01/2018

County **TITUS** Reg Svcs: TYLER NW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 000580

MOUNT PLEASANT ASSISTED LIVING
2013 N EDWARDS
MOUNT PLEASANT **TX** 75455

Phone (903) 572-8123 **Fax** (903) 577-1559

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

MOUNT PLEASANT ALF OPERATING COMPANY LLC
2009 N EDWARDS
MOUNT PLEASANT TX 75455

PHONE: (903) 572-8123 **FAX:** (903) 577-1599

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/01/2018

County **TITUS** Reg Svcs: TYLER NW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 105033

MOUNT PLEASANT HOSPITALITY HOUSE
804 WEST 16TH ST
MOUNT PLEASANT **TX** 75455

Phone (903) 572-9893 **Fax** (903) 572-8873

TOTAL Lic Capacity: 65 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 65 **TITLE 18/19:** 0

Owner Information

ORGANIZATIONAL CONSULTANTS OF AMERICA: ORCA, INC
804 W 16TH STREET
MT PLEASANT TX 75455

PHONE: (903) 572-9893 **FAX:** (903) 572-8873

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/23/2018

County **TITUS** Reg Svcs: TYLER NW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 000709

MT PLEASANT ASSISTED LIVING
2011 N EDWARDS
MOUNT PLEASANT **TX** 75455

Phone (903) 572-8123 **Fax** (903) 577-1559

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

MOUNT PLEASANT ALF OPERATING COMPANY LLC
2009 N EDWARDS
MOUNT PLEASANT TX 75455

PHONE: (903) 572-8123 **FAX:** (903) 577-1599

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/01/2018

County **TITUS** Reg Svcs: TYLER NW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 106133

THE LODGE ASSISTED LIVING AND MEMORY CARE
1880 W 16TH STREET
MOUNT PLEASANT **TX** 75455

Phone (903) 575-9896 **Fax** (903) 575-9064

TOTAL Lic Capacity: 66 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 36 **TITLE19:** 0
PRIVATE Beds: 66 **TITLE 18/19:** 0

Owner Information

THE LODGE AT MT PLEASANT LLC
1880 W 16TH STREET
MOUNT PLEASANT TX 75455

PHONE: (903) 575-9896 **FAX:** (903) 575-9064

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/27/2017

County **TOM GREEN** Reg Svcs: SAN ANGLEO GERIATRIC Region 09 - ABILENE

Facility Information: **Facility ID:** 000387

BROOKDALE SOUTH SAN ANGELO
2695 VALLEY VIEW BLVD
SAN ANGELO **TX** 76904

Phone (325) 947-7194 **Fax** (325) 223-8144

TOTAL Lic Capacity: 133 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 38 **TITLE19:** 0
PRIVATE Beds: 133 **TITLE 18/19:** 0

Owner Information

ESC IV LP
111 WESTWOOD PL ,STE 400
BRENTWOOD TN 37027

PHONE: (414) 918-5441 **FAX:** (414) 918-5054

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/30/2017

County **TOM GREEN** Reg Svcs: SAN ANGLEO GERIATRIC Region 09 - ABILENE

Facility Information: **Facility ID:** 102526

BRYANT MANOR ASSISTED LIVING FACILITY
516 SPAULDING
SAN ANGELO **TX** 76903

Phone (325) 227-6232 **Fax** (325) 617-2035

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

GLORIA SOLIS
516 SPAULDING
SAN ANGELO TX 76903

PHONE: (325) 227-6232 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/30/2017

County **TOM GREEN** Reg Svcs: SAN ANGLEO GERIATRIC Region 09 - ABILENE

Facility Information: **Facility ID:** 103484

BRYANT MANOR II ASSISTED LIVING
521 SPAULDING
SAN ANGELO **TX** 76903

Phone (325) 227-6232 **Fax** (325) 227-6232

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

Owner Information

GLORIA SOLIS
516 SPAULDING
SAN ANGELO TX 76903

PHONE: (325) 227-6232 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/03/2016

County **TOM GREEN** Reg Svcs: SAN ANGLEO GERIATRIC Region 09 - ABILENE

Facility Information: **Facility ID:** 105266

NEW HAVEN ASSISTED LIVING OF SAN ANGELO LLC
2501 SAWGRASS DR
SAN ANGELO **TX** 76904

Phone (325) 267-2316 **Fax**

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

NEW HAVEN ASSISTED LIVING OF SAN ANGELO LLC
1919 SHIELD DR
NEW BRAUNFELS TX 78130

PHONE: (847) 975-1609 **FAX:** (801) 606-2793

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/29/2018

County **TOM GREEN** Reg Svcs: SAN ANGLEO GERIATRIC Region 09 - ABILENE

Facility Information: **Facility ID:** 105267

NEW HAVEN ASSISTED LIVING OF SAN ANGELO LLC
2501 SAWGRASS DR.
SAN ANGELO **TX** 76904

Phone (325) 267-2316 **Fax**

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

NEW HAVEN ASSISTED LIVING OF SAN ANGELO LLC
1919 SHIELD DR
NEW BRAUNFELS TX 78130

PHONE: (847) 975-1609 **FAX:** (801) 606-2793

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/29/2018

County **TOM GREEN** Reg Svcs: SAN ANGLEO GERIATRIC Region 09 - ABILENE

Facility Information: **Facility ID:** 030100

ROYAL ESTATES OF SAN ANGELO
6101 GRAND COURT RD
SAN ANGELO **TX** 76901

Phone (325) 947-0043 **Fax** (325) 947-1992

TOTAL Lic Capacity: 78 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 78 **TITLE 18/19:** 0

Owner Information

SENIOR LIFESTYLE TEXAS SAN ANGELO, LP
303 EAST WACKER DR ,STE 2400
CHICAGO IL 60601

PHONE: (312) 673-4333 **FAX:** (312) 673-4387

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/01/2016

County **TOM GREEN** Reg Svcs: SAN ANGLEO GERIATRIC Region 09 - ABILENE

Facility Information: **Facility ID:** 105285

THE SPRINGS
6102 GRAND COURT RD
SAN ANGELO **TX** 76901

Phone (325) 224-3040 **Fax**

TOTAL Lic Capacity: 66 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 66 **TITLE19:** 0
PRIVATE Beds: 66 **TITLE 18/19:** 0

Owner Information

CHP SPRINGS TX TENANT CORP
5310 HARVEST HILL RD ,SUITE 280
DALLAS TX 75230

PHONE: (214) 871-2155 **FAX:** (214) 368-7341

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/02/2018

County **TOM GREEN** Reg Svcs: SAN ANGLEO GERIATRIC Region 09 - ABILENE

Facility Information: **Facility ID:** 030009

THE ST ANGELUS
15 N VAN BUREN
SAN ANGELO **TX** 76901

Phone (325) 659-4581 **Fax**

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

COMFORT SENIOR LIVING, LLC
15 N VAN BUREN
SAN ANGELO TX 76901

PHONE: (325) 659-4581 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/01/2017

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 103390

AN ANGEL'S PLACE
11611 CIRCLE DR
AUSTIN **TX** 78748

Phone (512) 906-0377 **Fax** (512) 373-8838

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

CHERYL'S ANGEL PLACE INC
7107 LUNAR DR
AUSTIN TX 78745

PHONE: (512) 750-2222 **FAX:** (512) 916-8623

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/07/2016

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 104789

ANGELS OF SUNLAND
3123 SUNLAND DR
AUSTIN **TX** 78748

Phone (512) 351-9446 **Fax** (512) 916-8623

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

CHERYL'S ANGEL PLACE INC
7107 LUNAR DR
AUSTIN TX 78745

PHONE: (512) 750-2222 **FAX:** (512) 916-8623

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/03/2017

County **TRAVIS** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 100262

ARDEN COURTS OF AUSTIN
11630 FOUR IRON DR
AUSTIN **TX** 78750

Phone (512) 918-2800 **Fax** (512) 918-2862

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 60 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

ARDEN COURTS OF AUSTIN TX LLC
333 N SUMMIT ST
TOLEDO OH 43604

PHONE: (419) 252-5500 **FAX:** (877) 385-9446

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/07/2017

County **TRAVIS** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 103582

AUSTIN NORTH ASSISTED LIVING
11206 POWDER MILL
AUSTIN **TX** 78750

Phone (512) 465-2157 **Fax** (512) 465-2157

TOTAL Lic Capacity: 15 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 15 **TITLE 18/19:** 0

Owner Information

AUSTIN NORTH ASSISTED LIVING LLC
2103 OLD MILL RD
CEDAR PARK TX 78613

PHONE: (512) 249-6760 **FAX:** (512) 465-2157

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/22/2016

County **TRAVIS** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 010257

AUSTIN SENIOR CARE
1414 CARDINAL HILL DR
AUSTIN **TX** 78758

Phone (512) 853-9503 **Fax** (512) 692-7648

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

CYUSHIKA L BROOKS-HARPER
1414 CARDINAL HILL DR
AUSTIN TX 78758

PHONE: (512) 853-9503 **FAX:** (512) 692-7648

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/04/2016

County **TRAVIS** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 106074

AUTUMN LEAVES OF NORTHWEST AUSTIN
10025 ANDERSON MILL ROAD
AUSTIN **TX** 78750
Phone (512) 487-5243 **Fax** (512) 487-5972

TOTAL Lic Capacity: 50 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 50 **TITLE19:** 0
PRIVATE Beds: 50 **TITLE 18/19:** 0

Owner Information

NORTH AUSTIN MEMORY CARE, LLC
545 E JOHN CARPENTER FREEWAY ,STE 500
IRVING TX 75062
PHONE: (214) 845-4500 **FAX:** (214) 845-4501
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/20/2017

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 000389

BARTON HILLS ASSISTED LIVING
1606 NASH AVE
AUSTIN **TX** 78704
Phone (512) 441-6000 **Fax** (512) 441-2205

TOTAL Lic Capacity: 35 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 35 **TITLE 18/19:** 0

Owner Information

BHAL LLC
1606 NASH AVE.
AUSTIN TX 78704
PHONE: (512) 441-6000 **FAX:** (512) 441-2205
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/15/2016

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 010282

BROOKDALE BECKETT MEADOWS
7709 BECKETT RD
AUSTIN **TX** 78749
Phone (512) 891-9544 **Fax** (512) 899-2736

TOTAL Lic Capacity: 95 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 23 **TITLE19:** 0
PRIVATE Beds: 95 **TITLE 18/19:** 0

Owner Information

ESC IV LP
111 WESTWOOD PL ,STE 400
BRENTWOOD TN 37027
PHONE: (414) 918-5441 **FAX:** (414) 918-5054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/31/2017

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 030416

BROOKDALE GAINES RANCH
4409 GAINES RANCH LOOP
AUSTIN **TX** 78735
Phone (512) 899-8400 **Fax** (512) 899-1711

TOTAL Lic Capacity: 58 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 58 **TITLE 18/19:** 0

Owner Information

BKD GAINES RANCH, LLC
111 WESTWOOD PLACE ,STE 400
BRENTWOOD TN 37027
PHONE: (615) 221-2250 **FAX:** (615) 564-8204
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 06/10/2017

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 030267

BROOKDALE LOHMANS CROSSING
1604 LOHMANS CROSSING
AUSTIN **TX** 78734
Phone (512) 261-6653 **Fax** (512) 261-2699

TOTAL Lic Capacity: 75 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 75 **TITLE 18/19:** 0

Owner Information

EMERITUS CORPORATION
6737 W. WASHINGTON STREET ,SUITE 2300
MILWAUKEE WI 53214
PHONE: (414) 918-5000 **FAX:** (414) 918-5054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/31/2018

County **TRAVIS** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 000948

BROOKDALE NORTH AUSTIN
5310 DUVAL RD
AUSTIN **TX** 78727
Phone (512) 418-8228 **Fax** (512) 418-9211

TOTAL Lic Capacity: 112 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 30 **TITLE19:** 0
PRIVATE Beds: 112 **TITLE 18/19:** 0

Owner Information

ESC-NGH, LP
111 WESTWOOD PL ,STE 400
BRENTWOOD TN 37027
PHONE: (206) 298-2909 **FAX:** (206) 301-4500
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/01/2016

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 050750

BROOKDALE NORTHWEST HILLS
5715 MESA DR
AUSTIN **TX** 78731
Phone (512) 454-5900 **Fax** (512) 652-0004

TOTAL Lic Capacity: 240 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 28 **TITLE19:** 0
PRIVATE Beds: 240 **TITLE 18/19:** 0

Owner Information

BROOKDALE NORTHWEST HILLS LLC
6737 W WASHINGTON ST ,#2300
MILWAUKEE WI 53214
PHONE: (414) 918-5000 **FAX:** (414) 918-5054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/29/2017

County **TRAVIS** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 030175

BROOKDALE PARMER LANE
12429 SCOFIELD FARMS DR
AUSTIN **TX** 78758
Phone (512) 410-2688 **Fax** (512) 835-1316

TOTAL Lic Capacity: 112 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 112 **TITLE 18/19:** 0

Owner Information

EMERITUS CORPORATION
6737 W. WASHINGTON STREET ,SUITE 2300
MILWAUKEE WI 53214
PHONE: (414) 918-5000 **FAX:** (414) 918-5054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/31/2016

County **TRAVIS** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 030176

BROOKDALE PARMER LANE
12429 SCOFIELD FARMS DR
AUSTIN **TX** 78758
Phone (512) 410-2688 **Fax** (512) 835-1316

TOTAL Lic Capacity: 36 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 36 **TITLE19:** 0
PRIVATE Beds: 36 **TITLE 18/19:** 0

Owner Information

EMERITUS CORPORATION
6737 W. WASHINGTON STREET ,SUITE 2300
MILWAUKEE WI 53214
PHONE: (414) 918-5000 **FAX:** (414) 918-5054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/31/2016

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 000958

BROOKDALE SPICEWOOD SPRINGS
4401 SPICEWOOD SPRINGS RD
AUSTIN **TX** 78759
Phone (512) 418-8822 **Fax** (512) 418-8825

TOTAL Lic Capacity: 109 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 109 **TITLE 18/19:** 0

Owner Information

S-H OPCO SPICEWOOD SPRINGS LLC
6737 W WASHINGTON ST ,#2300
MILWAUKEE WI 92614
PHONE: (414) 918-5000 **FAX:** (414) 918-6076
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/29/2016

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 000745

BROOKDALE WESTLAKE HILLS
1034 LIBERTY PARK DR
AUSTIN **TX** 78746
Phone (512) 328-3775 **Fax** (512) 329-6533

TOTAL Lic Capacity: 36 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 36 **TITLE 18/19:** 0

Owner Information

FORT AUSTIN LIMITED PARTNERSHIP
111 WESWOOD PLACE ,STE 400
BRENTWOOD TN 37027
PHONE: (312) 977-3742 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/25/2016

County **TRAVIS** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 010266

COLLINFIELD 9205 LLC
9205 COLLINFIELD DR
AUSTIN **TX** 78758
Phone (512) 358-4851 **Fax** (512) 821-1224

TOTAL Lic Capacity: 7 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 7 **TITLE 18/19:** 0

Owner Information

COLLINFIELD 9205 LLC
4713 MIRADOR DRIVE
AUSTIN TX 78735
PHONE: (512) 656-4003 **FAX:** (512) 346-1134
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/06/2016

County **TRAVIS** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 000482

COLONIAL GARDENS OF AUSTIN A-1
3700 ADELPHI LN
AUSTIN **TX** 78727
Phone (512) 833-0009 **Fax** (512) 833-0060

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

ASF LIVING INC
P O BOX 3666
SAN ANGELO TX 76902
PHONE: (325) 653-3180 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/01/2017

County **TRAVIS** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 030112

COLONIAL GARDENS OF AUSTIN A-2
3706 ADELPHI LN
AUSTIN **TX** 78727
Phone (512) 833-9253 **Fax** (512) 833-5916

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

ASF LIVING INC
P O BOX 3666
SAN ANGELO TX 76902
PHONE: (325) 653-3180 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/01/2017

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 100114

ELMCROFT OF AUSTIN
7017 MANCHACA RD
AUSTIN **TX** 78745
Phone (512) 916-4095 **Fax** (512) 916-9239

TOTAL Lic Capacity: 133 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 20 **TITLE19:** 0
PRIVATE Beds: 133 **TITLE 18/19:** 0

Owner Information

ESL AUSTIN OPERATIONS
700 N. HURSTBOURNE PKWY. ,STE. 200
LOUISVILLE KY 40222
PHONE: (502) 753-6004 **FAX:** (502) 753-6104
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/01/2017

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 100113

GRACE HOUSE OF LAKE TRAVIS EAST
11825 BEE CAVE RD
AUSTIN **TX** 78738
Phone (512) 402-0968 **Fax** (512) 402-0950

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

GRACE SENIOR SERVICES INC
11825 BEE CAVE ROAD
AUSTIN TX 78738
PHONE: (512) 402-0968 **FAX:** (512) 402-0950
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/08/2017

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 100279

GRACE HOUSE OF LAKE TRAVIS-WEST
11825 BEE CAVE RD
AUSTIN **TX** 78738
Phone (512) 402-0968 **Fax** (512) 402-0950

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

GRACE SENIOR SERVICES INC
11825 BEE CAVE ROAD
AUSTIN TX 78738
PHONE: (512) 402-0968 **FAX:** (512) 402-0950
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/10/2018

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 000455

HARPER HOUSE PERSONAL CARE FACILITY, INC
2201 GREENWOOD AVE
AUSTIN **TX** 78723
Phone (512) 708-8489 **Fax** (512) 532-6068

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

Owner Information

HARPER HOUSE PCF, INC
2201 GREENWOOD AVE
AUSTIN TX 78723
PHONE: (512) 708-8489 **FAX:** (512) 532-6068
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/08/2016

County **TRAVIS** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 000730

HEARTLAND HEALTH CARE CENTER
11406 RUSTIC ROCK DR
AUSTIN **TX** 78750

Phone (512) 355-5028 **Fax** (512) 335-0709

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

HEARTLAND OF AUSTIN TX LLC DBA HCR HEARTLAND OF AUSTIN TX LLC
333 N SUMMIT ST
TOLEDO OH 43604

PHONE: (419) 252-5500 **FAX:** (877) 385-9446

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/07/2017

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 050404

HOME OF SOUTHERN HOSPITALITY, LLC
5000 SHOALWOOD AVE
AUSTIN **TX** 78756

Phone (512) 451-8400 **Fax** (512) 451-7972

TOTAL Lic Capacity: 15 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 15 **TITLE 18/19:** 0

Owner Information

HOME OF SOUTHERN HOSPITALITY LLC
5000 SHOALWOOD AVENUE
AUSTIN TX 78756

PHONE: (512) 451-8400 **FAX:** (512) 451-7972

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/02/2018

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 104271

HORTON'S HELPING HANDS
603 THELMA DR
AUSTIN **TX** 78745

Phone (512) 804-0462 **Fax** (512) 804-5303

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

RALPH HORTON JR
603 THELMA DR
AUSTIN TX 78745

PHONE: (512) 804-0462 **FAX:** (512) 804-5303

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/04/2018

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 106219

LEGACY OAKS ASISTED LIVING AND MEMORY CARE
7501 WEST HWY 290
AUSTIN **TX** 78736

Phone (512) 288-8300 **Fax** (817) 386-8324

TOTAL Lic Capacity: 122 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 32 **TITLE19:** 0
PRIVATE Beds: 122 **TITLE 18/19:** 0

Owner Information

SW AUSTIN ASSISTED LIVING LLC
7501 WEST HWY 290
AUSTIN TX 78736

PHONE: (512) 288-8300 **FAX:** (817) 386-8324

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/28/2017

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 106179

LIVE OAK ESTATES
10212 ENGLISH OAK DR.
AUSTIN **TX** 78748

Phone (512) 551-9331 **Fax** (512) 861-5799

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

LIVE OAK ESTATES LLC
10212 ENGLISH OAK DR
AUSTIN TX 78748

PHONE: (512) 551-9331 **FAX:** (512) 861-5799

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/27/2017

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 104169

LONGHORN VILLAGE
12001 LONGHORN PARKWAY
AUSTIN **TX** 78732

Phone (512) 382-4664 **Fax** (512) 628-6170

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

LONGHORN VILLAGE
12001 LONGHORN PKWY
AUSTIN TX 78732

PHONE: (512) 382-4664 **FAX:** (512) 628-6170

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/24/2018

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 103952

LONGHORN VILLAGE
12001 LONGHORN PARKWAY
AUSTIN **TX** 78732
Phone (561) 266-5600 **Fax** (512) 628-6170

TOTAL Lic Capacity: 20 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 20 **TITLE 18/19:** 0

Owner Information

LONGHORN VILLAGE
12001 LONGHORN PKWY
AUSTIN TX 78732
PHONE: (512) 382-4664 **FAX:** (512) 628-6170
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/25/2016

County **TRAVIS** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 000417

MARILYN M CAMPBELL CENTER
11110 TOM ADAMS DR
AUSTIN **TX** 78753-3301
Phone (512) 836-1515 **Fax** (512) 836-1951

TOTAL Lic Capacity: 80 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 40 **TITLE19:** 0
PRIVATE Beds: 80 **TITLE 18/19:** 0

Owner Information

BUCKNER RETIREMENT SERVICES INC
700 N PEARL ST ,STE 1200
DALLAS TX 75201
PHONE: (214) 758-8000 **FAX:** (214) 758-8153
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/27/2017

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 030071

MARY LEE FOUNDATION REHABILITATION CENTER
1328 LAMAR SQUARE DR
AUSTIN **TX** 78704
Phone (512) 443-1360 **Fax** (512) 443-1758

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

MARY LEE FOUNDATION
1339 LAMAR SQUARE DR
AUSTIN TX 78704
PHONE: (512) 443-5777 **FAX:** (512) 443-5807
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/02/2018

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 001243

ONION CREEK PLANTATION
7302 LAKE CHARLES DR
AUSTIN **TX** 78744
Phone (512) 280-5742 **Fax** (512) 291-0844

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

HERLINDA MOLINA
7302 LAKE CHARLES DR
AUSTIN TX 78744
PHONE: (512) 280-5742 **FAX:** (512) 291-0844
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE C
License Exp Dt: 10/07/2017

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 000785

PARSONS HOUSE AUSTIN
1130 CAMINO LA COSTA
AUSTIN **TX** 78752
Phone (512) 454-0524 **Fax** (512) 454-5502

TOTAL Lic Capacity: 120 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 120 **TITLE 18/19:** 0

Owner Information

PARSONS HOUSE AUSTIN LP
1 NORTH CALLE CESAR CHAVEZ ,STE 200
SANTA BARBARA CA 93103
PHONE: (805) 564-3341 **FAX:** (805) 966-2009
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/05/2017

County **TRAVIS** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 104336

PAVILION AT GREAT HILLS
11819 PAVILION BLVD
AUSTIN **TX** 78759
Phone (512) 249-0500 **Fax** (512) 249-0567

TOTAL Lic Capacity: 35 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 35 **TITLE19:** 0
PRIVATE Beds: 35 **TITLE 18/19:** 0

Owner Information

CHP AUSTIN TX TENANT CORP
450 S ORANGE AVE
ORLANDO FL 32801
PHONE: (407) 650-1000 **FAX:** (407) 540-2576
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/30/2017

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 103685

PROVIDENT MEMORY CARE CENTER
11013 SIGNAL HILL DR
AUSTIN **TX** 78737
Phone (512) 637-5400 **Fax** (512) 637-5404

TOTAL Lic Capacity: 22 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 22 **TITLE19:** 0
PRIVATE Beds: 22 **TITLE 18/19:** 0

Owner Information

PROVIDENT MEMORY CARE GROUP LLC
12515 RESEARCH BLVD ,BLDG 7 STE 200-B
AUSTIN TX 78759
PHONE: (512) 630-4550 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/11/2017

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 103118

QUERENCIA AT BARTON CREEK
2500 BARTON CREEK BOULEVARD
AUSTIN **TX** 78735
Phone (512) 610-9400 **Fax** (512) 610-9427

TOTAL Lic Capacity: 73 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 23 **TITLE19:** 0
PRIVATE Beds: 73 **TITLE 18/19:** 0

Owner Information

BARTON CREEK SENIOR LIVING CENTER, INC
12720 HILLCREST DR ,STE 106
DALLAS TX 75230
PHONE: (469) 916-8958 **FAX:** (214) 623-6115
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/30/2017

County **TRAVIS** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 000733

RENAISSANCE - AUSTIN
11279 TAYLOR DRAPER LN
AUSTIN **TX** 78759-3953
Phone (512) 338-0995 **Fax** (512) 794-8687

TOTAL Lic Capacity: 44 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 44 **TITLE 18/19:** 0

Owner Information

HARVEST RENAISSANCE - AUSTIN LLC
5885 MEADOWS RD ,STE 500
LAKE OSWEGO OR 97035
PHONE: (503) 586-7309 **FAX:** (503) 431-2320
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/28/2018

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 000624

RIDGE OAK LIVING COMMUNITY
6404 RIDGE OAK RD
AUSTIN **TX** 78749
Phone (512) 892-1711 **Fax** (512) 892-1400

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

THERAPEUTIC COMMUNITIES LLC
PO BOX 705
SAN MARCOS TX 78667
PHONE: (512) 567-1704 **FAX:** (512) 357-4025
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/22/2017

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 101766

SHADY HOLLOW ASSISTED LIVING
11315 MENODORA DR
AUSTIN **TX** 78748
Phone (512) 280-8861 **Fax** (512) 295-1125

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

SHADY HOLLOW ASSISTED LIVING CORPORATION
11315 MENODORA DR
AUSTIN TX 78748
PHONE: (512) 560-7695 **FAX:** (512) 292-4796
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/15/2017

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 102254

SHADY HOLLOW II ASSISTED LIVING
11303 ALOYSIA DR
AUSTIN **TX** 78748
Phone (512) 292-4796 **Fax** (512) 292-4796

TOTAL Lic Capacity: 5 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 5 **TITLE 18/19:** 0

Owner Information

SHADY HOLLOW ASSISTED LIVING CORPORATION
11315 MENODORA DR
AUSTIN TX 78748
PHONE: (512) 560-7695 **FAX:** (512) 292-4796
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/25/2017

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 105478

SILVERADO SENIOR LIVING-ONION CREEK
11330 FARRAH LANE
AUSTIN **TX** 78748
Phone (512) 280-2030 **Fax**

TOTAL Lic Capacity: 92 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 92 **TITLE19:** 0
PRIVATE Beds: 92 **TITLE 18/19:** 0

Owner Information

SUBTENANT 11330 FARAH LANE LLC
4500 DORR STREET
TOLEDO OH 43615
PHONE: (419) 247-2800 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/30/2016

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 103370

SOUTH AUSTIN ASSISTED LIVING INC
4601 CHESNEY RIDGE DR
AUSTIN **TX** 78749
Phone (512) 436-8004 **Fax** (512) 436-8004

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

Owner Information

SOUTH AUSTIN ASSISTED LIVING ,INC
4601 CHESNEY RIDGE DRIVE
AUSTIN TX 78749
PHONE: (512) 436-8004 **FAX:** (512) 436-8004
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/08/2017

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 105080

SOUTH AUSTIN ASSISTED LIVING, INC
4816 CHESNEY RIDGE DR
AUSTIN **TX** 78749
Phone (512) 243-8476 **Fax** (512) 436-8004

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

Owner Information

SOUTH AUSTIN ASSISTED LIVING ,INC
4601 CHESNEY RIDGE DRIVE
AUSTIN TX 78749
PHONE: (512) 436-8004 **FAX:** (512) 436-8004
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/14/2016

County **TRAVIS** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 050182

TEXAS RESIDENTIAL AND VOCATIONAL SERVICES
2107 BRUNSWICK
AUSTIN **TX** 78723
Phone (512) 928-2498 **Fax** (512) 928-2473

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

BENNY RAY HOWARD ESTATE
6702 BREEZY PASS
AUSTIN TX 78749
PHONE: (512) 928-2498 **FAX:** (512) 928-2473
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 09/24/2016

County **TRAVIS** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 104337

THE PAVILION AT GREAT HILLS
11819 PAVILION BLVD
AUSTIN **TX** 78759
Phone (512) 249-0500 **Fax** (512) 249-0567

TOTAL Lic Capacity: 130 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 130 **TITLE 18/19:** 0

Owner Information

CHP AUSTIN TX TENANT CORP
450 S ORANGE AVE
ORLANDO FL 32801
PHONE: (407) 650-1000 **FAX:** (407) 540-2576
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/30/2017

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 106216

VILLAGE ON THE PARK-ONION CREEK
11300 FARRAH LANE BLDG 6
AUSTIN **TX** 78748
Phone (512) 280-5500 **Fax** (281) 996-1141

TOTAL Lic Capacity: 38 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 38 **TITLE 18/19:** 0

Owner Information

BRIDGEWOOD SOUTH AUSTIN LLC
6363 WOODWAY ,SUITE 410
HOUSTON TX 77057
PHONE: (713) 623-6767 **FAX:** (713) 623-6772
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/11/2018

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 105071

WESTMINSTER MANOR ASSISTED LIVING
4200 JACKSON AVENUE
AUSTIN **TX** 78731
Phone (512) 454-2140 **Fax** (512) 454-5713

TOTAL Lic Capacity: 37 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 37 **TITLE 18/19:** 0

Owner Information

WESTMINSTER MANOR
4200 JACKSON
AUSTIN TX 78731
PHONE: (512) 454-4711 **FAX:** (512) 454-8350
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/18/2018

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 105945

SILVERADO - BEE CAVE
14058 A BEE CAVE PARKWAY
BEE CAVE **TX** 78738
Phone (512) 263-2544 **Fax**

TOTAL Lic Capacity: 92 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 92 **TITLE19:** 0
PRIVATE Beds: 92 **TITLE 18/19:** 0

Owner Information

MERIDIAN BEE CAVE ALZ OE, L.P.
3811 TURTLE CREEK BLVD ,STE 1050
DALLAS TX 75219
PHONE: (214) 651-4000 **FAX:** (214) 651-4001
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/22/2016

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 030272

BROOKDALE LAKEWAY
1915 LOHMANS CROSSING RD
LAKEWAY **TX** 78734
Phone (512) 261-7146 **Fax** (512) 261-7149

TOTAL Lic Capacity: 132 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 132 **TITLE 18/19:** 0

Owner Information

BROOKDALE LAKEWAY LLC
111 WESTWOOD PLACE ,#400
BRENTWOOD TN 37027
PHONE: (615) 221-2250 **FAX:** (615) 221-2280
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/29/2017

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 030273

BROOKDALE LAKEWAY I
1915 LOHMANS CROSSING RD
LAKEWAY **TX** 78734
Phone (512) 261-7146 **Fax** (512) 261-7149

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

BROOKDALE LAKEWAY LLC
111 WESTWOOD PLACE ,#400
BRENTWOOD TN 37027
PHONE: (615) 221-2250 **FAX:** (615) 221-2280
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/29/2017

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 106031

THE HARBOR AT LAKEWAY
300 MEDICAL PARKWAY
LAKEWAY **TX** 78738
Phone (512) 402-1222 **Fax**

TOTAL Lic Capacity: 226 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 43 **TITLE19:** 0
PRIVATE Beds: 226 **TITLE 18/19:** 0

Owner Information

LMV-AL VENTURES LLC
8310-1 CAPITAL OF TX HIGHWAY NORTH ,STE 275
AUSTIN TX 78731
PHONE: (512) 335-0600 **FAX:** (512) 342-0600
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/08/2017

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 000706

MABEE VILLAGE AT MARBRIDGE
2310 BLISS SPILLAR RD
MANCHACA **TX** 78652
Phone (512) 282-3163 **Fax** (512) 282-5279

TOTAL Lic Capacity: 90 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 90 **TITLE 18/19:** 0

Owner Information

MARBRIDGE FOUNDATION INC
PO BOX 2250
MANCHACA TX 78652
PHONE: (512) 282-1144 **FAX:** (512) 282-3723
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/14/2017

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 000520

MARBRIDGE RANCH
2310 BLISS SPILLAR RD
MANCHACA **TX** 78652

Phone (512) 282-1144 **Fax** (512) 282-3723

TOTAL Lic Capacity: 99 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 99 **TITLE 18/19:** 0

Owner Information

MARBRIDGE FOUNDATION INC
PO BOX 2250
MANCHACA TX 78652

PHONE: (512) 282-1144 **FAX:** (512) 282-3723

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/01/2017

County **TRAVIS** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 000377

BROOKSIDE FARM
2213 E HOWARD LN
MANOR **TX** 78653

Phone (512) 251-6997 **Fax** (512) 251-7003

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

SCHOLEY-MORRISON COMMUNITY OPTIONS INC
PO BOX 82214
AUSTIN TX 78708

PHONE: (512) 251-1211 **FAX:** (512) 251-7003

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 06/30/2018

County **TRAVIS** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 001055

GLOVERS FOSTER HOME
12349 JOHNSON RD
MANOR **TX** 78653

Phone (512) 278-1990 **Fax** (512) 278-0354

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

EDDIE M GLOVER
12349 JOHNSON RD
MANOR TX 78653

PHONE: (512) 278-0354 **FAX:** (512) 278-0354

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE C
License Exp Dt: 01/02/2018

County **TRAVIS** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 105020

CLARE CREEK SENIOR LIVING
2209 TERRANDYNE DRIVE
PFLUGERVILLE **TX** 78660

Phone (512) 852-1254 **Fax** (512) 761-4751

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

CLARE HEALTHCARE CORP
2209 TERRADYNE DR
PFLUGERVILLE TX 78660

PHONE: (512) 852-1254 **FAX:** (512) 761-4751

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/11/2016

County **TRAVIS** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 104144

FAMILY TREE ASSISTED LIVING ,LLC
15309 DELAHUNTY
PFLUGERVILLE **TX** 78660

Phone (512) 721-5352 **Fax** (512) 251-1811

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

FAMILY TREE ASSISTED LIVING, LLC
400-B TOPEKA COURT
NOLANVILLE TX 76559

PHONE: **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/01/2018

County **TRAVIS** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 105483

GRACELAND SENIOR LIVING
17228 SANDWICK DRIVE
PFLUGERVILLE **TX** 78660

Phone (512) 736-6206 **Fax**

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

JEFFREY MILLER, A SOLE PROPRIETOR
17228 SANDWICK DRIVE
PFLUGERVILLE TX 78660

PHONE: (361) 542-1588 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/02/2017

County **TRAVIS** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 100306

HEATHERWILDE ASSISTED LIVING
401 S HEATHERWILDE BLVD
PFLUGERVILLE **TX** 78660

Phone (512) 251-1640 **Fax** (512) 251-1642

TOTAL Lic Capacity: 40 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 40 **TITLE 18/19:** 0

Owner Information

PM MANAGEMENT - PFLUGERVILLE AL LLC
1703 W 5TH ST ,STE 800
AUSTIN TX 78703

PHONE: (512) 634-4941 **FAX:** (877) 639-9530

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/01/2016

County **TRAVIS** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 000896

HEATHERWILDE ASSISTED LIVING
401 S HEATHERWILDE BLVD
PFLUGERVILLE **TX** 78660

Phone (512) 251-1640 **Fax** (512) 251-1642

TOTAL Lic Capacity: 20 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 20 **TITLE 18/19:** 0

Owner Information

PM MANAGEMENT - PFLUGERVILLE AL LLC
1703 W 5TH ST ,STE 800
AUSTIN TX 78703

PHONE: (512) 634-4941 **FAX:** (877) 639-9530

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 11/01/2016

County **TRAVIS** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 105183

KNIGHT'S ASSISTED LIVING, LLC
20816 WINDMILL RIDGE ST
PFLUGERVILLE **TX** 78660

Phone (512) 721-5865 **Fax** (512) 721-5018

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

KNIGHT'S ASSISTED LIVING LLC
20816 WINDMILL RIDGE
PFLUGERVILLE TX 78666

PHONE: (512) 788-6834 **FAX:** (512) 721-5018

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/20/2016

County **TRAVIS** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 105781

MALLARD HOME CARE
19705 MALLARD POND TRAIL
PFLUGERVILLE **TX** 78660

Phone (512) 202-3320 **Fax**

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

MALLARD HOME CARE, LLC
1225 TOWN CENTER DR. ,APT. #1101
PFLUGERVILLE TX 78660

PHONE: (940) 736-0532 **FAX:** (512) 721-5018

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/12/2018

County **TRAVIS** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 105497

SERENITY SENIOR LIVING
900 RAMBLE CREEK DR.
PFLUGERVILLE **TX** 78660

Phone (512) 989-5816 **Fax** (512) 989-5816

TOTAL Lic Capacity: 11 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 11 **TITLE 18/19:** 0

Owner Information

CHRISTOPHER G WILLIS
900 RAMBLE CREEK DR
PFLUGERVILLE TX 78660

PHONE: (512) 814-6323 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/01/2017

County **TRAVIS** Reg Svcs: SOUTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 105870

BELMONT VILLAGE WEST LAKE HILLS TENANT, LLC
4310 BEE CAVE ROAD
WEST LAKE HILLS **TX** 78746

Phone (512) 347-1700 **Fax** (512) 347-1701

TOTAL Lic Capacity: 183 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 34 **TITLE19:** 0
PRIVATE Beds: 183 **TITLE 18/19:** 0

Owner Information

BELMONT VILLAGE WEST LAKE HILLS TENANT, LLC
4500 DORR STREET
TOLEDO OH 43615

PHONE: (419) 247-2800 **FAX:** (419) 247-2826

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/01/2017

County **TYLER** Reg Svcs: BEAUMONT GERIATRIC Region 05 - BEAUMONT

Facility Information: **Facility ID:** 030269

THE ORCHARD
805 W DOGWOOD ST
WOODVILLE **TX** 75979-4743

Phone (409) 283-5678 **Fax** (409) 283-2044

TOTAL Lic Capacity: 55 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 55 **TITLE 18/19:** 0

Owner Information

WOODVILLE I ENTERPRISES LLC
1701 RIVER RUN ,STE 304
FORT WORTH TX 76107

PHONE: (817) 348-8959 **FAX:** (817) 348-0466

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/01/2016

County **UPSHUR** Reg Svcs: TYLER SE TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 100559

THE BRADFORD HOUSE
1704 N BRADFORD ST
GILMER **TX** 75644

Phone (903) 843-7601 **Fax** (903) 843-4871

TOTAL Lic Capacity: 50 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 50 **TITLE 18/19:** 0

Owner Information

THE MADERA CORPORATION
387 NECTARINE RD
GILMER TX 75644

PHONE: (903) 725-7660 **FAX:** (903) 843-4871

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/05/2018

County **UPSHUR** Reg Svcs: TYLER SE TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 102729

WESLEY HOUSE
231 QUAIL DRIVE
GILMER **TX** 75644

Phone (903) 734-1784 **Fax** (903) 734-1752

TOTAL Lic Capacity: 86 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 26 **TITLE19:** 0
PRIVATE Beds: 86 **TITLE 18/19:** 0

Owner Information

WESLEY PARTNERS LTD
PO BOX 612
MOUNT VERNON TX 75457

PHONE: (903) 537-4116 **FAX:** (903) 270-6227

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/20/2017

County **UVALDE** Reg Svcs: TEAM Y Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 000862

214 MARTIN AN ASSISTED RESIDENCE
214 MARTIN ST
UVALDE **TX** 78801

Phone (830) 278-1134 **Fax** (830) 279-0956

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

214 MARTIN LLC
214 MARTIN ST
UVALDE TX 78801

PHONE: (210) 826-8548 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 08/12/2017

County **UVALDE** Reg Svcs: TEAM Y Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 103846

THE VERANDA
201 HAM
UVALDE **TX** 78801

Phone (830) 278-8220 **Fax**

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 17 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

UALC LLC
18843 REDLAND ROAD
SAN ANTONIO TX 78259

PHONE: (210) 499-5627 **FAX:** (210) 499-5327

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/18/2016

County **VAL VERDE** Reg Svcs: TEAM Z Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 105102

SOUTHWEST ASSISTED LIVING
1088 AMISTAD BOULEVARD
DEL RIO **TX** 78840

Phone (830) 775-6400 **Fax**

TOTAL Lic Capacity: 26 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 26 **TITLE 18/19:** 0

Owner Information

SOUTHWEST ASSISTED LIVING DEL RIO LLC
710 GIBBS STREET
DEL RIO TX 78840

PHONE: (830) 778-9418 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/03/2018

County **VAL VERDE** Reg Svcs: TEAM Z Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 105079

SOUTHWEST ASSISTED LIVING MEMORY CARE
78 TOMAHAWK TRAIL
DEL RIO **TX** 78840
Phone (830) 775-6400 **Fax**

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 12 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

SOUTHWEST ASSISTED LIVING DEL RIO LLC
710 GIBBS STREET
DEL RIO TX 78840
PHONE: (830) 778-9418 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/14/2016

County **VAN ZANDT** Reg Svcs: TYLER SW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 105759

CP 13 (TX) LLC
1833 SOUTH TRADE DAYS BLVD.
CANTON **TX** 75103
Phone (903) 567-2942 **Fax**

TOTAL Lic Capacity: 30 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 30 **TITLE 18/19:** 0

Owner Information

CP 13 (TX) LLC
3131 MCKINNEY AVE. ,STE. 475
DALLAS TX 75204
PHONE: (214) 347-7140 **FAX:** (214) 347-7142
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/30/2016

County **VAN ZANDT** Reg Svcs: TYLER SW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 105785

CP ASSISTED LIVING 1 (TX) LLC
1835 SOUTH TRADE DAYS BLVD.
CANTON **TX** 75103
Phone (903) 567-2942 **Fax**

TOTAL Lic Capacity: 30 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 30 **TITLE 18/19:** 0

Owner Information

CP ASSISTED LIVING 1 (TX) LLC
1835 SOUTH TRADE DAYS BLVD
CANTON TX 75103
PHONE: **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/02/2018

County **VAN ZANDT** Reg Svcs: TYLER SW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 030034

FREE STATE CRESTWOOD
1448 HOUSTON ST
WILLS POINT **TX** 75169
Phone (903) 873-5400 **Fax** (903) 873-4404

TOTAL Lic Capacity: 72 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 72 **TITLE 18/19:** 0

Owner Information

CRESTWOOD SCC LLC
600 N PEARL ST ,STE 1100
DALLAS TX 75201
PHONE: (214) 252-7600 **FAX:** (214) 252-7599
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/01/2017

County **VICTORIA** Reg Svcs: TEAM V Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 106070

BRIGHTWATER SENIOR LIVING OF VICTORIA
1303 N JOHN STOCKBAUER DRIVE
VICTORIA **TX** 77904
Phone (361) 500-6651 **Fax** (888) 295-5253

TOTAL Lic Capacity: 109 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 28 **TITLE19:** 0
PRIVATE Beds: 109 **TITLE 18/19:** 0

Owner Information

VICTORIA AL-MC GROUP LLC
1303 N JOHN STOCKBAUER DRIVE
VICTORIA TX 77904
PHONE: (361) 500-6651 **FAX:** (888) 295-5253
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/13/2017

County **VICTORIA** Reg Svcs: TEAM V Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 000789

BROOKDALE VICTORIA
9606 N E ZAC LENTZ PKWY
VICTORIA **TX** 77904
Phone (361) 582-2100 **Fax** (361) 582-2200

TOTAL Lic Capacity: 30 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 30 **TITLE 18/19:** 0

Owner Information

ARC VICTORIA LP
111 WESTWOOD PLACE ,#400
BRENTWOOD TN 37027
PHONE: (615) 221-2250 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 07/25/2018

County **VICTORIA** Reg Svcs: TEAM V Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 102979

BROOKDALE VICTORIA
9606 N E ZAC LENTZ PKWY
VICTORIA **TX** 77904
Phone (361) 582-2100 **Fax** (361) 582-2220

TOTAL Lic Capacity: 25 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 25 **TITLE19:** 0
PRIVATE Beds: 25 **TITLE 18/19:** 0

Owner Information

ARC VICTORIA LP
111 WESTWOOD PLACE ,#400
BRENTWOOD TN 37027
PHONE: (615) 221-2250 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/20/2018

County **VICTORIA** Reg Svcs: TEAM V Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 000334

ELMCROFT OF VICTORIA
411 E LARKSPUR
VICTORIA **TX** 77904
Phone (361) 576-0444 **Fax** (361) 576-2551

TOTAL Lic Capacity: 99 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 99 **TITLE 18/19:** 0

Owner Information

ESL VICTORIA OPERATIONS LLC
9510 ORMSBY STATION RD ,STE 101
LOUISVILLE KY 40223
PHONE: (502) 753-6004 **FAX:** (502) 753-6104
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/03/2017

County **VICTORIA** Reg Svcs: TEAM V Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 101060

SODALIS ELDER LIVING VICTORIA 1
4409 N. STOCKBAUER ROAD
VICTORIA **TX** 77904
Phone (361) 580-3151 **Fax** (361) 580-1201

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

ALZ CARE LLC
195 S ACADEMY
NEW BRAUNFELS TX 78130
PHONE: **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/11/2017

County **VICTORIA** Reg Svcs: TEAM V Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 105046

SODALIS ELDER LIVING VICTORIA II
4409 N JOHN STOCKBAUER RD
VICTORIA **TX** 77904
Phone (361) 572-3336 **Fax** (361) 572-3433

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

ALZ CARE LLC
195 S ACADEMY
NEW BRAUNFELS TX 78130
PHONE: **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/25/2018

County **VICTORIA** Reg Svcs: TEAM V Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 000400

THE DEVEREUX FOUNDATION
120 DAVID WADE DR
VICTORIA **TX** 77905-2666
Phone (361) 575-8271 **Fax** (361) 575-6520

TOTAL Lic Capacity: 64 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 64 **TITLE 18/19:** 0

Owner Information

THE DEVEREUX FOUNDATION
2012 RENAISSANCE BLVD
KING OF PRUSSIA PA 19406
PHONE: (610) 520-3000 **FAX:** (361) 575-6520
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/21/2016

County **VICTORIA** Reg Svcs: TEAM V Region 08 - SAN ANTONIO

Facility Information: **Facility ID:** 101763

THE DEVEREUX FOUNDATION
120 DAVID WADE DR
VICTORIA **TX** 77905
Phone (361) 575-8271 **Fax** (361) 575-6520

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

THE DEVEREUX FOUNDATION
2012 RENAISSANCE BLVD
KING OF PRUSSIA PA 19406
PHONE: (610) 520-3000 **FAX:** (361) 575-6520
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/21/2017

County **WALKER** Reg Svcs: BEAUMONT GERIATRIC Region 06 - HOUSTON

Facility Information: **Facility ID:** 105146

CARRIAGE INN-HUNTSVILLE
2805 LAKE ROAD
HUNTSVILLE **TX** 77340
Phone (936) 295-0600 **Fax**

TOTAL Lic Capacity: 22 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 22 **TITLE 18/19:** 0

Owner Information

BRIDGEWOOD HUNTSVILLE LLC
6363 WOODWAY ,STE 410
HOUSTON TX 77057
PHONE: (713) 623-6767 **FAX:** (713) 623-6772
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/20/2016

County **WALKER** Reg Svcs: BEAUMONT GERIATRIC Region 06 - HOUSTON

Facility Information: **Facility ID:** 105397

MRC CREEKSIDE
1433 VETERANS MEMORIAL PARKWAY
HUNTSVILLE **TX** 77340
Phone (936) 295-0216 **Fax** (936) 291-2907

TOTAL Lic Capacity: 56 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 18 **TITLE19:** 0
PRIVATE Beds: 56 **TITLE 18/19:** 0

Owner Information

MRC TOWNCREEK
1433 VETERANS MEMORIAL PKWY
HUNTSVILLE TX 77340
PHONE: (281) 363-2600 **FAX:** (281) 292-6360
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/11/2017

County **WALKER** Reg Svcs: BEAUMONT GERIATRIC Region 06 - HOUSTON

Facility Information: **Facility ID:** 101846

THE LEXINGTON CENTER
679 I-45 SOUTH
HUNTSVILLE **TX** 77340
Phone (936) 295-4488 **Fax** (936) 293-8755

TOTAL Lic Capacity: 56 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 56 **TITLE 18/19:** 0

Owner Information

GREATER HORIZONS I TEXAS LIMITED PARTNERSHIP
679 I-45 SOUTH
HUNTSVILLE TX 77340
PHONE: (936) 295-4488 **FAX:** (936) 293-8755
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 06/30/2017

County **WALKER** Reg Svcs: BEAUMONT GERIATRIC Region 06 - HOUSTON

Facility Information: **Facility ID:** 104372

PECAN GROVE
929 STATE HIGHWAY 150
NEW WAVERLY **TX** 77358
Phone (936) 337-4334 **Fax** (936) 344-9502

TOTAL Lic Capacity: 14 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 14 **TITLE 18/19:** 0

Owner Information

KNEWMAN HOLDINGS, LLC DBA PECAN GROVE
929 F SH 150
NEW WAVERLY TX 77358
PHONE: (936) 337-4334 **FAX:** (936) 344-9502
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/13/2016

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

Facility Information: **Facility ID:** 100784

ANDERSON HOME
1752 FM 1489
BROOKSHIRE **TX** 77423
Phone (281) 375-2100 **Fax** (281) 375-2160

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

BRIARWOOD - BROOKWOOD INC
1752 FM 1489
BROOKSHIRE TX 77423
PHONE: (281) 375-2100 **FAX:** (281) 375-2160
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/04/2016

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

Facility Information: **Facility ID:** 100782

DEREK HOME
1752 FM 1489
BROOKSHIRE **TX** 77423
Phone (281) 375-2100 **Fax** (281) 375-2160

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

BRIARWOOD - BROOKWOOD INC
1752 FM 1489
BROOKSHIRE TX 77423
PHONE: (281) 375-2100 **FAX:** (281) 375-2160
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/04/2016

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

Facility Information: **Facility ID:** 100783

FOLLETT HOME
1752 FM 1489
BROOKSHIRE **TX** 77423

Phone (281) 375-2100 **Fax** (281) 375-2160

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

BRIARWOOD - BROOKWOOD INC
1752 FM 1489
BROOKSHIRE TX 77423

PHONE: (281) 375-2100 **FAX:** (281) 375-2160

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/04/2017

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

Facility Information: **Facility ID:** 100786

JAMAIL HOME
1752 FM 1489
BROOKSHIRE **TX** 77423

Phone (281) 375-2100 **Fax** (281) 375-2160

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

BRIARWOOD - BROOKWOOD INC
1752 FM 1489
BROOKSHIRE TX 77423

PHONE: (281) 375-2100 **FAX:** (281) 375-2160

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/04/2016

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

Facility Information: **Facility ID:** 100780

KILROY HOME
1752 FM 1489
BROOKSHIRE **TX** 77423

Phone (281) 375-2100 **Fax** (281) 375-2160

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

BRIARWOOD - BROOKWOOD INC
1752 FM 1489
BROOKSHIRE TX 77423

PHONE: (281) 375-2100 **FAX:** (281) 375-2160

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/04/2016

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

Facility Information: **Facility ID:** 100781

MEADOWS HOME
1752 FM 1489
BROOKSHIRE **TX** 77423

Phone (281) 375-2100 **Fax** (281) 375-2160

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

BRIARWOOD - BROOKWOOD INC
1752 FM 1489
BROOKSHIRE TX 77423

PHONE: (281) 375-2100 **FAX:** (281) 375-2160

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/04/2017

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

Facility Information: **Facility ID:** 050035

THE INN
1752 FM 1489
BROOKSHIRE **TX** 77423

Phone (281) 375-2100 **Fax** (281) 375-2160

TOTAL Lic Capacity: 34 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 34 **TITLE 18/19:** 0

Owner Information

BRIARWOOD - BROOKWOOD INC
1752 FM 1489
BROOKSHIRE TX 77423

PHONE: (281) 375-2100 **FAX:** (281) 375-2160

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/20/2017

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

Facility Information: **Facility ID:** 100785

TUTTLE HOME
1752 FM 1489
BROOKSHIRE **TX** 77423

Phone (281) 375-2100 **Fax** (281) 375-2160

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

BRIARWOOD - BROOKWOOD INC
1752 FM 1489
BROOKSHIRE TX 77423

PHONE: (281) 375-2100 **FAX:** (281) 375-2160

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/04/2017

County **WALLER** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 104848

WEEKLEY HOME
1752 FM 1489
BROOKSHIRE **TX** 77423

Phone (281) 375-2100 **Fax**

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

BRIARWOOD - BROOKWOOD INC
1752 FM 1489
BROOKSHIRE TX 77423

PHONE: (281) 375-2100 **FAX:** (281) 375-2160

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 06/27/2017

County **WALLER** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000867

WILLOW RIVER FARMS
4073 FM 3318
BROOKSHIRE **TX** 77423

Phone (713) 525-8300 **Fax** (979) 885-1007

TOTAL Lic Capacity: 53 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 53 **TITLE 18/19:** 0

Owner Information

THE CENTER SERVING PERSONS WITH MENTAL RETARDATION
3550 WEST DALLAS
HOUSTON TX 77019

PHONE: (713) 525-8400 **FAX:** (713) 525-8334

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/10/2018

County **WALLER** Reg Svcs: UNIT 15 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030241

V S BROWN HOUSE
1119 SMITH ST
WALLER **TX** 77484

Phone (936) 931-1625 **Fax** (936) 931-1625

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

JEANNETTE BATCHELDER
1119 SMITH ST
WALLER TX 77484

PHONE: (936) 372-2278 **FAX:** (936) 931-1253

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/20/2017

County **WASHINGTON** Reg Svcs: BRENHAM Region 07 - AUSTIN

Facility Information: **Facility ID:** 030327

ARGENT COURT
2815 VICTORY LN
BRENHAM **TX** 77833

Phone (979) 836-8000 **Fax** (979) 836-1900

TOTAL Lic Capacity: 57 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 57 **TITLE 18/19:** 0

Owner Information

ARGENT BRENHAM OPERATIONS LLC
8301 BROADWAY ,STE 319
SAN ANTONIO TX 78209

PHONE: (210) 829-7121 **FAX:** (830) 372-4477

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/15/2018

County **WASHINGTON** Reg Svcs: BRENHAM Region 07 - AUSTIN

Facility Information: **Facility ID:** 101116

RUTH DALLMEYER LA ROCHE MANOR
1700 EAST STONE
BRENHAM **TX** 77833

Phone (979) 836-5442 **Fax** (979) 836-5501

TOTAL Lic Capacity: 58 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 22 **TITLE19:** 0
PRIVATE Beds: 58 **TITLE 18/19:** 0

Owner Information

LUTHERAN SOCIAL SERVICES OF THE SOUTH INC
8305 CROSS PARK DR
AUSTIN TX 78745

PHONE: (512) 459-1000 **FAX:** (512) 706-7576

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/27/2016

County **WHARTON** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 030194

MERIDIAN ASSISTED LIVING
3515 WEST LOOP 2765
EL CAMPO **TX** 77437

Phone (979) 541-5488 **Fax** (979) 541-5115

TOTAL Lic Capacity: 44 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 44 **TITLE 18/19:** 0

Owner Information

RJ MERIDIAN CARE OF EL CAMPO LLC
25009 OAKHURST DR
SPRING TX 77386

PHONE: (281) 465-0636 **FAX:** (281) 465-0748

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/01/2016

County **WHARTON** Reg Svcs: UNIT 11 Region 06 - HOUSTON

Facility Information: **Facility ID:** 000838

ELMCROFT OF WHARTON
1930 BRIAR LN
WHARTON **TX** 77488

Phone (979) 532-5800 **Fax** (979) 532-2322

TOTAL Lic Capacity: 100 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 100 **TITLE 18/19:** 0

Owner Information

BRIAR LANE OPERATIONS, LLC
700 N HURSTBOURNE PKWY ,STE 200
LOUISVILLE KY 40223

PHONE: (502) 753-6004 **FAX:** (502) 753-6104

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/01/2017

County **WHEELER** Reg Svcs: HIGH PLAINS GERI 1 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 101737

SHAMROCK GENERAL HOSPITAL
1000 SOUTH MAIN
SHAMROCK **TX** 79079

Phone (806) 256-2114 **Fax** (806) 256-2423

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

SOUTH WHEELER COUNTY HOSPITAL DISTRICT
PO BOX 511
SHAMROCK TX 79079

PHONE: (806) 256-2114 **FAX:** (806) 256-2423

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/04/2016

County **WHEELER** Reg Svcs: HIGH PLAINS GERI 1 Region 01 - LUBBOCK

Facility Information: **Facility ID:** 101195

PARKVIEW HOSPITAL
901 S SWEETWATER
WHEELER **TX** 79096

Phone (806) 826-5581 **Fax** (806) 826-3201

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

NORTH WHEELER COUNTY HOSPITAL DISTRICT
PO BOX 1030
WHEELER TX 79096

PHONE: (806) 826-5581 **FAX:** (806) 826-3201

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/21/2018

County **WICHITA** Reg Svcs: WICHITA FALLS GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 000840

ARBOR HOUSE
1525 HIGHWAY 79 SOUTH
WICHITA FALLS **TX** 76302

Phone (940) 723-5035 **Fax** (940) 767-1688

TOTAL Lic Capacity: 58 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 58 **TITLE 18/19:** 0

Owner Information

VERITAS INCARE, LLC
6933 CRUMPLER BLVD ,STE A
OLIVE BRANCH MS 38654

PHONE: (662) 895-1801 **FAX:** (662) 895-1804

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/01/2017

County **WICHITA** Reg Svcs: WICHITA FALLS GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 000861

BROOKDALE MIDWESTERN
918 MIDWESTERN PKWY
WICHITA FALLS **TX** 76302-2210

Phone (940) 322-0918 **Fax** (940) 322-8765

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

BROOKDALE SENIOR LIVING COMMUNITIES INC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214

PHONE: (414) 918-5441 **FAX:** (414) 918-6076

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/01/2017

County **WICHITA** Reg Svcs: WICHITA FALLS GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 000385

BROOKDALE SIKES LAKE
2649 PLAZA PKWY
WICHITA FALLS **TX** 76308

Phone (940) 696-1351 **Fax** (940) 696-1785

TOTAL Lic Capacity: 158 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 30 **TITLE19:** 0
PRIVATE Beds: 158 **TITLE 18/19:** 0

Owner Information

ESC IV LP
111 WESTWOOD PL ,STE 400
BRENTWOOD TN 37027

PHONE: (414) 918-5441 **FAX:** (414) 918-5054

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/30/2017

County **WICHITA** Reg Svcs: WICHITA FALLS GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 105746

THE WOOD GROUP
5402 CARLSON STREET
WICHITA FALLS **TX** 76308

Phone (940) 716-9801 **Fax** (940) 716-9847

TOTAL Lic Capacity: 4 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 4 **TITLE 18/19:** 0

Owner Information

TWG INVESTMENTS LTD
3610 BARNETT RD
WICHITA FALLS TX 76310

PHONE: (940) 767-0463 **FAX:** (940) 767-0466

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 02/25/2018

County **WICHITA** Reg Svcs: WICHITA FALLS GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 030316

VIBRANT RETIREMENT LIVING
5100 KELL BLVD
WICHITA FALLS **TX** 76310

Phone (940) 691-8181 **Fax** (940) 691-6770

TOTAL Lic Capacity: 85 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 85 **TITLE 18/19:** 0

Owner Information

CSH WICHITA FALLS LLC
6737 W. WASHINGTON ST. ,STE. 2300
MILWAUKEE WI 53214

PHONE: (414) 918-5000 **FAX:** (414) 918-6076

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/30/2017

County **WICHITA** Reg Svcs: WICHITA FALLS GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 030030

WOOD LIVING CENTER OF WICHITA FALLS
1400 6TH ST
WICHITA FALLS **TX** 76301

Phone (940) 766-3877 **Fax** (940) 767-3861

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

WOOD CARE CENTERS INC
3610 BARNETT RD
WICHITA FALLS TX 76310

PHONE: (940) 767-0463 **FAX:** (940) 767-0466

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/18/2016

County **WILBARGER** Reg Svcs: WICHITA FALLS GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 030315

EAGLE FLATS VILLAGE
4501 COLLEGE DR
VERNON **TX** 76384

Phone (940) 552-8181 **Fax** (940) 552-6288

TOTAL Lic Capacity: 78 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 78 **TITLE 18/19:** 0

Owner Information

SANDHILL VERNON, LLC
815 BRAZOS STREET ,SUITE 500
AUSTIN TX 78701

PHONE: (650) 996-7801 **FAX:** (877) 692-7555

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/17/2017

County **WILLIAMSON** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 030159

ANDERSON MILL ASSISTED LIVING LLC
11009 EL SALIDO PKWY
AUSTIN **TX** 78750

Phone (512) 250-1853 **Fax** (512) 250-1853

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

ANDERSON MILL ASSISTED LIVING LLC
11009 EL SALIDO PKWY
AUSTIN TX 78750

PHONE: (512) 250-1853 **FAX:** (512) 250-1853

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/19/2017

County **WILLIAMSON** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 030303

ASHWOOD ASSISTED LIVING
12151 HUNTERS CHASE DR
AUSTIN **TX** 78729

Phone (512) 336-4100 **Fax** (512) 336-4155

TOTAL Lic Capacity: 135 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 135 **TITLE 18/19:** 0

Owner Information

BETHANY PLACE I LTD
PO BOX 3186
MIDLAND TX 79702

PHONE: (432) 683-1824 **FAX:** (432) 683-1732

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/05/2018

County **WILLIAMSON** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 030306

BROOKDALE ROUND ROCK
8005 CORNERWOOD DR
AUSTIN **TX** 78717
Phone (512) 238-7200 **Fax** (512) 238-8593

TOTAL Lic Capacity: 74 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 74 **TITLE 18/19:** 0

Owner Information

CSH ROUND ROCK LLC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214
PHONE: (414) 918-5000 **FAX:** (414) 918-6076
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/30/2017

County **WILLIAMSON** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 030374

VIBRANT RETIREMENT LIVING
8005 CORNERWOOD DR
AUSTIN **TX** 78717
Phone (512) 238-7200 **Fax** (512) 238-8593

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 12 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

CSH ROUND ROCK LLC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214
PHONE: (414) 918-5000 **FAX:** (414) 918-6076
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/30/2017

County **WILLIAMSON** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 105401

ARIA MEMORY CARE OF CEDAR PARK
1201 ARROW POINT DRIVE
CEDAR PARK **TX** 78613
Phone (512) 213-6070 **Fax** (866) 395-4441

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 60 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

ARROWPOINT II, LP
1201 ARROW POINT DR
CEDAR PARK TX 78613
PHONE: (512) 213-6070 **FAX:** (866) 395-4441
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/03/2017

County **WILLIAMSON** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 106346

ASSISTED LIVING BY COVENANT HOUSE
100 SHADY TRAILS PASS
CEDAR PARK **TX** 78613
Phone (512) 250-9108 **Fax**

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

FRONTERA ADMINISTRATIVE SERVICES, INC
2900 N QUINLAN PARK RD ,STE 240 - 326
AUSTIN TX 78732
PHONE: (512) 750-7807 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/17/2018

County **WILLIAMSON** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 106027

AVALON CARE GROUP - CEDAR PARK I
2215 S LAKELINE
CEDAR PARK **TX** 78613
Phone (214) 752-7050 **Fax** (214) 752-7054

TOTAL Lic Capacity: 32 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 32 **TITLE19:** 0
PRIVATE Beds: 32 **TITLE 18/19:** 0

Owner Information

ATKINSON MANAGEMENT LLC
1625 N STEMMONS FRWY
DALLAS TX 75207
PHONE: (214) 752-7050 **FAX:** (214) 752-7054
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/27/2017

County **WILLIAMSON** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 102655

CEDAR RIDGE ALZHEIMERS SPECIAL CARE CENTER
2100 LAKELINE BLVD
CEDAR PARK **TX** 78613
Phone (512) 258-5157 **Fax** (512) 258-1310

TOTAL Lic Capacity: 66 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 66 **TITLE19:** 0
PRIVATE Beds: 66 **TITLE 18/19:** 0

Owner Information

CEDAR PARK CARE GROUP LP
5101 NE 82ND AVE ,STE 200
VAN COUVER WA 98682
PHONE: (360) 254-9442 **FAX:** (360) 254-1770
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/19/2018

County **WILLIAMSON** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 104870

ISLE AT CEDAR RIDGE
2200 S LAKELINE BLVD
CEDAR PARK **TX** 78613

Phone (512) 219-0200 **Fax** (512) 219-0466

TOTAL Lic Capacity: 57 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 57 **TITLE 18/19:** 0

Owner Information

CHP ISLE AT CEDAR RIDGE TX TENANT CORP
450 S. ORANGE AVE
ORLANDO FL 32801

PHONE: (407) 650-1000 **FAX:** (407) 540-2544

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/28/2018

County **WILLIAMSON** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 030240

POINTE AT CEDAR PARK
450 DISCOVERY BLVD
CEDAR PARK **TX** 78613

Phone (512) 259-6525 **Fax** (512) 260-7365

TOTAL Lic Capacity: 60 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 60 **TITLE 18/19:** 0

Owner Information

LSREF GOLDEN OPS 26 (TX) LLC
3500 LENOX ROAD NE ,STE 510
ATLANTA GA 30326

PHONE: (770) 754-9660 **FAX:** (770) 754-3085

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/15/2017

County **WILLIAMSON** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 101583

SHENANDOAH VILLA
1623 SHENANDOAH DR.
CEDAR PARK **TX** 78613

Phone (512) 257-7526 **Fax** (512) 257-1673

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

SHENANDOAH VILLA LLC
1623 SHENANDOAH VILLA
CEDAR PARK TX 78613

PHONE: (512) 257-7526 **FAX:** (512) 257-1673

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 03/09/2018

County **WILLIAMSON** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 106075

SUNDANCE AT BRUSHY CREEK
3000 GLACIER PASS LN.
CEDAR PARK **TX** 78613

Phone (713) 542-6700 **Fax**

TOTAL Lic Capacity: 48 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 48 **TITLE19:** 0
PRIVATE Beds: 48 **TITLE 18/19:** 0

Owner Information

HUNTINGTON CREEK CAPITAL VI, LLC
5301 VILLAGE CREEK DR. ,STE. A
PLANO TX 75093

PHONE: (713) 542-6700 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 11/25/2016

County **WILLIAMSON** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 106257

US MEMORY CARE - CEDAR PARK
800-C BAR RANCH TRAIL
CEDAR PARK **TX** 78613

Phone (214) 782-9994 **Fax**

TOTAL Lic Capacity: 75 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 75 **TITLE19:** 0
PRIVATE Beds: 75 **TITLE 18/19:** 0

Owner Information

USMC CEDAR PARK LLC
14881 QUORUM DR ,STE 250
PLANO TX 75254

PHONE: (214) 782-9994 **FAX:** (214) 782-9569

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/07/2017

County **WILLIAMSON** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 030408

ASSISTED LIVING AT TALLWOOD
101 TALLWOOD
GEORGETOWN **TX** 78628-8315

Phone (512) 948-7600 **Fax** (512) 948-7600

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

REAVIS ASSISTED LIVING LLC
101 TALLWOOD DR
GEORGETOWN TX 78626-8315

PHONE: (512) 948-7600 **FAX:** (512) 948-7600

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/28/2016

County **WILLIAMSON** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 106160

AUTUMN LEAVES OF GEORGETOWN
3600 WILLIAMS DRIVE
GEORGETOWN **TX** 78628

Phone (512) 688-5113 **Fax** (512) 688-5145

TOTAL Lic Capacity: 50 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 50 **TITLE19:** 0
PRIVATE Beds: 50 **TITLE 18/19:** 0

Owner Information

GEORGETOWN MEMORY CARE LLC
545 E JOHN CARPENTER FREEWAY ,STE 500
IRVING TX 75062

PHONE: (214) 845-4500 **FAX:** (214) 845-4501

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/10/2017

County **WILLIAMSON** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 000329

BROOKDALE GEORGETOWN
2600 E UNIVERSITY AVE
GEORGETOWN **TX** 78626

Phone (512) 863-7700 **Fax** (512) 868-0182

TOTAL Lic Capacity: 54 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 54 **TITLE 18/19:** 0

Owner Information

BROOKDALE SENIOR LIVING COMMUNITIES INC
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214

PHONE: (414) 918-5441 **FAX:** (414) 918-6076

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/01/2017

County **WILLIAMSON** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 104046

GEORGETOWN LIVING
2700 SHELL RD
GEORGETOWN **TX** 78628

Phone (512) 863-9888 **Fax** (512) 863-8222

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

MPH TEXAS GROUP INC.
2700 SHELL RD
GEORGETOWN TX 78628

PHONE: (512) 818-7277 **FAX:** (512) 863-8222

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/22/2017

County **WILLIAMSON** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 104973

GEORGETOWN LIVING II
2700 SHELL RD
GEORGETOWN **TX** 78628

Phone (512) 843-0117 **Fax** (512) 863-8222

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

MPH TEXAS GROUP INC.
2700 SHELL RD
GEORGETOWN TX 78628

PHONE: (512) 818-7277 **FAX:** (512) 863-8222

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/01/2018

County **WILLIAMSON** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 105556

LEGACY AT GEORGETOWN
4907 WILLIAMS DR.
GEORGETOWN **TX** 78633

Phone (512) 686-1694 **Fax**

TOTAL Lic Capacity: 156 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 42 **TITLE19:** 0
PRIVATE Beds: 156 **TITLE 18/19:** 0

Owner Information

SNR 25 LEGACY AT GEORGETOWN LEASING LLC
1345 AVE OF THE AMERICAS ,48TH FL
NEW YORK NY 10105

PHONE: (569) 304-5033 **FAX:** (972) 608-9715

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/01/2017

County **WILLIAMSON** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 000319

PARK PLACE ASSISTED LIVING
101 FM 971
GEORGETOWN **TX** 78626

Phone (512) 868-6275 **Fax** (512) 948-0006

TOTAL Lic Capacity: 48 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 48 **TITLE 18/19:** 0

Owner Information

PARK PLACE RETIREMENT HOME LLC
211 N BROADWAY ,STE 2035
ST LOUIS MO 63102

PHONE: (314) 588-7518 **FAX:** (314) 588-7321

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/01/2017

County **WILLIAMSON** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 105653

SEDRO TRAIL ASSISTED LIVING AND MEMORY CARE
292 SEDRO TRL
GEORGETOWN **TX** 78633
Phone (512) 943-4837 **Fax**

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 9 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

SEDRO TRAIL ASSISTED LIVING AND MEMORY CARE LLC
292 SEDRO TRL
GEORGETOWN TX 78633
PHONE: (512) 943-4837 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/14/2017

County **WILLIAMSON** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 103423

THE CABINS AT ROCKY HOLLOW
1650 CR 245
GEORGETOWN **TX** 78633
Phone (254) 793-2311 **Fax** (254) 793-2554

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

THE LODGE AT ROCKY HOLLOW II INC
1650 CR 245
GEORGETOWN TX 78633
PHONE: (512) 868-7885 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/13/2016

County **WILLIAMSON** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 102467

THE LODGE AT ROCKY HOLLOW INC
1650 CR 245
GEORGETOWN **TX** 78633
Phone (254) 793-2311 **Fax** (254) 793-2554

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

THE LODGE AT ROCKY HOLLOW INC
1650 CR 245
GEORGETOWN TX 78633
PHONE: (254) 793-2311 **FAX:** (254) 793-2554
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 02/08/2018

County **WILLIAMSON** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 104746

THE WESLEYAN AT ESTRELLA ASSISTED LIVING
109 ESTRELLA CROSSING
GEORGETOWN **TX** 78628
Phone (512) 943-9804 **Fax** (512) 943-9808

TOTAL Lic Capacity: 75 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 20 **TITLE19:** 0
PRIVATE Beds: 75 **TITLE 18/19:** 0

Owner Information

WESLEYAN HOMES, INC
1811 N AUSTIN AVE
GEORGETOWN TX 78626
PHONE: (512) 868-1205 **FAX:** (512) 868-1039
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/21/2017

County **WILLIAMSON** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 105479

TIFFIN HOUSE II
90 WOODCREST RD
GEORGETOWN **TX** 78633
Phone (512) 818-7697 **Fax** (512) 869-7762

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 12 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

TIFFIN HOUSE II, LLC
90 WOODCREST RD.
GEORGETOWN TX 78633
PHONE: (512) 818-7697 **FAX:**
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/23/2017

County **WILLIAMSON** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 104055

TIFFIN HOUSE LLC
84 WOODCREST RD
GEORGETOWN **TX** 78633
Phone (512) 869-7788 **Fax** (512) 869-7762

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 12 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

TIFFIN HOUSE LLC
84 WOODCREST RD
GEORGETOWN TX 78633
PHONE: (512) 869-7788 **FAX:** (512) 869-7762
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/18/2017

County **WILLIAMSON** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 106164

LEGACY AT CRYSTAL FALLS
1841 CRYSTAL FALLS PARKWAY
LEANDER **TX** 78641

Phone (512) 487-7049 **Fax**

TOTAL Lic Capacity: 138 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 24 **TITLE19:** 0
PRIVATE Beds: 138 **TITLE 18/19:** 0

Owner Information

LEGACY MT LLC
675 BERING DR ,STE 550
HOUSTON TX 77057

PHONE: (713) 425-5423 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/01/2018

County **WILLIAMSON** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 000549

OUR HOUSE OF CENTRAL TEXAS
1905 S WEST DR
LEANDER **TX** 78641

Phone (512) 259-4886 **Fax**

TOTAL Lic Capacity: 11 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 11 **TITLE 18/19:** 0

Owner Information

NANCY LUONGO
2819 S WALKER DR
LEANDER TX 78641

PHONE: (512) 260-8197 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 06/17/2016

County **WILLIAMSON** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 103482

RIVA RIDGE MEMORY CARE CENTER
801 RIVA RIDGE DR
LEANDER **TX** 78641

Phone (512) 259-1330 **Fax** (512) 986-5024

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 12 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

KNM SENIOR CARE SERVICES LLC
1424 RIO GRANDE DR
ALLEN TX 75013

PHONE: (972) 741-1852 **FAX:** (512) 986-5024

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/01/2017

County **WILLIAMSON** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 103490

CASA ESPERANZA INC DBA HOPE HOUSE
1705 CR 285
LIBERTY HILL **TX** 78642

Phone (512) 515-6889 **Fax**

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

CASA ESPERANZA INC
PO BOX 457
LIBERTY HILL TX 78642

PHONE: (512) 515-6889 **FAX:** (512) 515-6793

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/09/2017

County **WILLIAMSON** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 101068

A SERENE SETTING
2101 CROSS CREEK TRL
ROUND ROCK **TX** 78681

Phone (512) 716-0108 **Fax** (512) 716-0108

TOTAL Lic Capacity: 10 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 10 **TITLE 18/19:** 0

Owner Information

REYNALD B CRUZ
2101 CROSSS CREEK TRL
ROUND ROCK TX 78681

PHONE: (512) 716-0108 **FAX:** (512) 716-0108

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 03/26/2017

County **WILLIAMSON** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 030013

A TOUCH OF HOME
4301 CRESTRIDGE DR
ROUND ROCK **TX** 78681

Phone (512) 218-0042 **Fax** (512) 218-0039

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

SCOTT ENTERPRISES, INC.
4301 CRESTRIDGE DR.
ROUND ROCK TX 78681

PHONE: (512) 218-0042 **FAX:** (512) 218-0039

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 10/15/2017

County **WILLIAMSON** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 030121

COURT AT ROUND ROCK ASSISTED LIVING COMMUNITY
2700 SUNRISE RD
ROUND ROCK **TX** 78664

Phone (512) 310-0002 **Fax** (512) 310-0002

TOTAL Lic Capacity: 73 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 73 **TITLE 18/19:** 0

Owner Information

LSREF GOLDEN OPS 26 (TX) LLC
3500 LENOX ROAD NE ,STE 510
ATLANTA GA 30326

PHONE: (770) 754-9660 **FAX:** (770) 754-3085

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 01/15/2017

County **WILLIAMSON** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 102973

FAIRWAY VISTA
1017 HIDDEN VIEW PLACE
ROUND ROCK **TX** 78665

Phone (512) 220-7316 **Fax** (512) 220-7317

TOTAL Lic Capacity: 8 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 8 **TITLE 18/19:** 0

Owner Information

SHELLY R DEHN
20227 MCSHEPHERD ROAD
GEORGETOWN TX 78626

PHONE: (512) 869-2289 **FAX:** (512) 220-7316

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/04/2017

County **WILLIAMSON** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 104424

FAIRWAY VISTA II
1019 HIDDEN VIEW PL
ROUND ROCK **TX** 78665

Phone (512) 220-7316 **Fax** (512) 220-7317

TOTAL Lic Capacity: 9 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 9 **TITLE 18/19:** 0

Owner Information

FAIRWAY ASSISTED LIVING LLC
1019 HIDDEN VIEW PL
ROUND ROCK TX 78665

PHONE: (512) 220-7316 **FAX:** (512) 220-7317

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/21/2017

County **WILLIAMSON** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 103931

HAMPTON SENIOR LIVING, LLC
1905 HAMPTON LN
ROUND ROCK **TX** 78664-6648

Phone **Fax**

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

HAMPTON SENIOR LIVING, LLC
1905 HAMPTON LANE
ROUND ROCK TX 78664

PHONE: (513) 394-8146 **FAX:** (512) 672-6200

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/10/2017

County **WILLIAMSON** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 106513

POET'S WALK ROUND ROCK
4050 SUNRISE ROAD
ROUND ROCK **TX** 78665

Phone (512) 255-6009 **Fax** (512) 255-6039

TOTAL Lic Capacity: 70 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 70 **TITLE19:** 0
PRIVATE Beds: 70 **TITLE 18/19:** 0

Owner Information

CHANDLER NJ TE LLC
515 PLAINFIELD AVE ,SUITE 200
EDISON NJ 08817

PHONE: (732) 582-0400 **FAX:** (732) 582-0268

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/12/2018

County **WILLIAMSON** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 105871

ROUND ROCK ASSISTED LIVING
16708 MARSALA SPRINGS DRIVE
ROUND ROCK **TX** 78681

Phone (512) 218-5952 **Fax**

TOTAL Lic Capacity: 12 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 12 **TITLE 18/19:** 0

Owner Information

PEABODY PLACE LLC
16708 MARSALA SPRINGS DRIVE
ROUND ROCK TX 78681

PHONE: (512) 983-8677 **FAX:**

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 05/12/2016

County **WILLIAMSON** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 105693

SAINT MARY'S ASSISTED LIVING FACILITY
1826 RACHEL LANE
ROUND ROCK **TX** 78664
Phone (512) 246-3556 **Fax** (512) 218-4744

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

Owner Information

ABBE ESTIFANOS D
18701 DRY LAKE LANE
PFLUGERVILLE TX 78664
PHONE: (512) 909-7759 **FAX:** (512) 218-4744
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 12/11/2016

County **WILLIAMSON** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 030118

THE COTTAGES AT CHANDLER CREEK I
2401 NORTH A W GRIMES BLVD
ROUND ROCK **TX** 78665
Phone (512) 218-9757 **Fax** (512) 218-9759

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

CHANDLER CREEK COTTAGES, LTD
4514 TRAVIS ST ,STE 211
DALLAS TX 75205
PHONE: (214) 526-0021 **FAX:** (214) 526-7965
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/08/2016

County **WILLIAMSON** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 030119

THE COTTAGES AT CHANDLER CREEK II
2401 N AW GRIMES BLVD
ROUND ROCK **TX** 78665
Phone (512) 218-9757 **Fax** (512) 218-9759

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 16 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

CHANDLER CREEK COTTAGES, LTD
4514 TRAVIS ST ,STE 211
DALLAS TX 75205
PHONE: (214) 526-0021 **FAX:** (214) 526-7965
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 10/08/2017

County **WILLIAMSON** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 104692

THE COTTAGES AT CHANDLER CREEK III
2351 NORTH A.W. GRIMES BLVD
ROUND ROCK **TX** 78665
Phone (512) 218-9757 **Fax** (512) 218-8768

TOTAL Lic Capacity: 54 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 54 **TITLE19:** 0
PRIVATE Beds: 54 **TITLE 18/19:** 0

Owner Information

CHANDLER CREEK COTTAGES II LTD
4514 TRAVIS ST
DALLAS TX 75205
PHONE: (214) 526-0021 **FAX:** (512) 526-7985
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/21/2017

County **WILLIAMSON** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 106171

TRAN'S SENIOR OASIS LLC
2304 LIVE OAK CIRCLE
ROUND ROCK **TX** 78681
Phone (512) 310-8727 **Fax** (512) 792-9893

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

Owner Information

TRAN'S SENIOR OASIS LLC
2304 LIVE OAK CIRCLE
ROUND ROCK TX 78681
PHONE: (512) 310-8727 **FAX:** (512) 792-9893
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/10/2017

County **WILLIAMSON** Reg Svcs: TEMPLE Region 07 - AUSTIN

Facility Information: **Facility ID:** 104858

UNIVERSITY VILLAGE MEMORY CARE
4701 CAMPUS VILLAGE DRIVE
ROUND ROCK **TX** 78665
Phone (512) 248-2222 **Fax**

TOTAL Lic Capacity: 74 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 74 **TITLE19:** 0
PRIVATE Beds: 74 **TITLE 18/19:** 0

Owner Information

UV MEMORY CARE LLC
8310-1 CAPITOL OF TEXAS HWY N ,STE 275
AUSTIN TX 78731
PHONE: (512) 335-0600 **FAX:** (512) 342-0600
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 08/18/2017

County **WILLIAMSON** Reg Svcs: NORTH AUSTIN Region 07 - AUSTIN

Facility Information: **Facility ID:** 105170

WYOMING SPRINGS ASSISTED LIVING AND MEMORY CARE
7230 WYOMING SPRINGS DR
ROUND ROCK **TX** 78681

Phone (512) 765-7733 **Fax** (512) 218-0073

TOTAL Lic Capacity: 114 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 36 **TITLE19:** 0
PRIVATE Beds: 114 **TITLE 18/19:** 0

Owner Information

PM MANAGEMENT - ROUND ROCK AL, LLC
600 NORTH PEARL ST ,STE 1100
DALLAS TX 75201

PHONE: (214) 252-7600 **FAX:** (214) 252-7599

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/11/2016

County **WILLIAMSON** Reg Svcs: BRENHAM Region 07 - AUSTIN

Facility Information: **Facility ID:** 101695

SPJST ASSISTED LIVING FACILITY
505 E LAKE DR
TAYLOR **TX** 76574

Phone (512) 352-6940 **Fax** (512) 352-6947

TOTAL Lic Capacity: 64 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 64 **TITLE 18/19:** 0

Owner Information

S. P. J. S. T. REST HOME
PO BOX 850
TAYLOR TX 76574

PHONE: (512) 352-6337 **FAX:** (512) 352-7209

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/04/2017

County **WISE** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000473

THE RESIDENCES AT SENIOR CARE
2106 15TH ST
BRIDGEPORT **TX** 76426

Phone (940) 683-6307 **Fax** (940) 683-5307

TOTAL Lic Capacity: 36 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 36 **TITLE 18/19:** 0

Owner Information

SCC PARTNERS, INC.
4311 OAKLAWN #400
DALLAS TX 75219

PHONE: (972) 303-9000 **FAX:** (972) 303-9700

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 07/31/2018

County **WISE** Reg Svcs: TEAM 3 Region 03 - ARLINGTON

Facility Information: **Facility ID:** 000362

GOVERNOR'S RIDGE
300 E DEVEREAUX ST
DECATUR **TX** 76234

Phone (940) 627-1104 **Fax** (940) 627-1159

TOTAL Lic Capacity: 70 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 70 **TITLE 18/19:** 0

Owner Information

LIVE OAKS HOLDINGS LLC
1230 ROSECRANS AVE ,STE 405
MANHATTAN BEACH CA 90266

PHONE: (310) 725-0120 **FAX:** (310) 469-0114

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/01/2016

County **WOOD** Reg Svcs: TYLER NW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 010219

THE GARDENS AT HAWKINS ALC
830 NORTH BEAULAH ST
HAWKINS **TX** 75765

Phone (903) 769-9105 **Fax** (903) 769-9019

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

CARROLL PARTNERS INVESTMENT INC
648 N BEAULAH
HAWKINS TX 75765

PHONE: (903) 769-9105 **FAX:** (903) 769-9019

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/25/2016

County **WOOD** Reg Svcs: TYLER NW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 000564

THE GARDENS AT HAWKINS ALC
648 N BEAULAH ST
HAWKINS **TX** 75765

Phone (903) 769-9105 **Fax** (903) 769-9019

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

CARROLL PARTNERS INVESTMENT INC
648 N BEAULAH
HAWKINS TX 75765

PHONE: (903) 769-9105 **FAX:** (903) 769-9019

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 06/06/2017

County **WOOD** Reg Svcs: TYLER NW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 000584

THE GARDENS AT HAWKINS ALC
698 N BEAULAH ST
HAWKINS **TX** 75765
Phone (903) 769-9105 **Fax** (903) 769-9019

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

CARROLL PARTNERS INVESTMENT INC
648 N BEAULAH
HAWKINS TX 75765
PHONE: (903) 769-9105 **FAX:** (903) 769-9019
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 01/24/2017

County **WOOD** Reg Svcs: TYLER NW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 010397

THE GARDENS AT HAWKINS ALC
830 N BEAULAH ST
HAWKINS **TX** 75765
Phone (903) 769-9105 **Fax** (903) 769-9019

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

CARROLL PARTNERS INVESTMENT INC
648 N BEAULAH
HAWKINS TX 75765
PHONE: (903) 769-9105 **FAX:** (903) 769-9019
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 04/16/2016

County **WOOD** Reg Svcs: TYLER SE TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 050618

WESLEY HOUSE
1031 E GOODE BOX 143
QUITMAN **TX** 75783
Phone (903) 763-1303 **Fax** (903) 763-2403

TOTAL Lic Capacity: 50 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 50 **TITLE 18/19:** 0

Owner Information

WESLEY PARTNERS LTD
PO BOX 612
MOUNT VERNON TX 75457
PHONE: (903) 537-4116 **FAX:** (903) 270-6227
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 05/19/2017

County **WOOD** Reg Svcs: TYLER SE TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 105574

AUTUMN WIND ASSISTED LIVING
135 AUTUMN WIND CT
WEST MINEOLA **TX** 75773
Phone (903) 569-1111 **Fax** (903) 569-6007

TOTAL Lic Capacity: 90 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 90 **TITLE 18/19:** 0

Owner Information

AUTUMN WIND PARTNERS
135 AUTUMN WIND CT
MINEOLA TX 75773
PHONE: (903) 569-1111 **FAX:** (903) 569-6007
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 09/06/2017

County **WOOD** Reg Svcs: TYLER NW TEAM Region 04 - TYLER

Facility Information: **Facility ID:** 104275

AUTUMN WIND ASSISTED LIVING
1004 E COKE RD
WINNSBORO **TX** 75494
Phone (903) 342-3388 **Fax** (903) 342-3389

TOTAL Lic Capacity: 69 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 69 **TITLE 18/19:** 0

Owner Information

AWAL 2012 OPCO, LLC
3801 HULEN STREET ,SUITE 202
FT WORTH TX 76107
PHONE: (817) 386-8888 **FAX:** (817) 549-0020
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B
License Exp Dt: 12/29/2016

County **YOUNG** Reg Svcs: WICHITA FALLS GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 030296

BROOKDALE GRAHAM
1015 CLIFF DR
GRAHAM **TX** 76450
Phone (940) 549-8181 **Fax** (940) 549-1171

TOTAL Lic Capacity: 80 **TITLE 18:** 0 **ICF/IID:** 0
Cert Alzh Capacity: 0 **TITLE19:** 0
PRIVATE Beds: 80 **TITLE 18/19:** 0

Owner Information

CSH GRAHAM LP
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214
PHONE: (414) 918-5000 **FAX:** (414) 918-6076
PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE A
License Exp Dt: 04/30/2017

County **YOUNG** Reg Svcs: WICHITA FALLS GERIATRIC Region 02 - ABILENE

Facility Information: **Facility ID:** 030297

BROOKDALE GRAHAM
1015 CLIFF DR
GRAHAM **TX** 76450

Phone (940) 549-8181 **Fax** (940) 549-1171

TOTAL Lic Capacity: 16 **TITLE 18:** 0 **ICF/IID:** 0

Cert Alzh Capacity: 16 **TITLE19:** 0

PRIVATE Beds: 16 **TITLE 18/19:** 0

Owner Information

CSH GRAHAM LP
6737 W WASHINGTON ST ,STE 2300
MILWAUKEE WI 53214

PHONE: (414) 918-5000 **FAX:** (414) 918-6076

PROGRAM TYPE: ASSISTED LIVING **SERVICE TYPE** TYPE B

License Exp Dt: 04/30/2016