# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

# As of 08/2024

ALAMANCE	Alamance Health Care Center
Twin Lakes Community	Alamance Operator LLC
Lutheran Retirement Ministries of Alamance County NC	Administrator Name: Kyle Swim
Administrator Name: Alice Lauren Davis Cook	MAIL: 1987 Hilton Road, , Burlington, NC, 27217
MAIL: 3802 Wade Coble Drive, , Burlington, NC, 27215	SITE: 1987 Hilton Road, Burlington, NC, 27217
SITE: 3802 Wade Coble Drive, Burlington, NC, 27215	Contact Name: Kyle Swim
Contact Name: Lauren Cook	(732) 905-6440 Fax: (336) 226-6274 NH0529
(336) 538-1401 Fax: (336) 538-1523 NH0351	Expiry Date: 31-Dec-24
Expiry Date: 31-Dec-24	Nursing Facility Beds Total: 180
Nursing Facility Beds Total: 104	Adult Care Home Beds Total: 0
Adult Care Home Beds Total: 0	Liberty Commons Nursing & Rehabilitation Center of
Compass Healthcare and Rehab Hawfields, Inc.	Alamance County
Compass Healthcare and Rehab Hawfields, Inc.	Liberty Commons Nursing & Rehabilitation Center of Alamance County LLC
Administrator Name: Josh Bowman	Administrator Name: Kristin N. Stover
MAIL: 2502 South NC 119, , Mebane, NC, 27302	MAIL: 791 Boone Station Drive, , Burlington, NC, 27215
SITE: 2502 South NC 119, Mebane, NC, 27302	SITE: 791 Boone Station Drive, Burlington, NC, 27215
Contact Name: Josh Bowman	Contact Name: Kristin N. Stover
(336) 578-4701 Fax: (336) 578-4728 NH0364	(336) 586-9850 Fax: (336) 586-9811 NH0588
Expiry Date: 31-Dec-24	Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 117	Nursing Facility Beds Total: 122
Adult Care Home Beds Total: 0	Adult Care Home Beds Total: 0
White Oak Manor-Burlington	Edgewood Place at the Village at Brookwood
NHC HealthCare - Burlington, LLC	Alamance Extended Care Inc
Administrator Name: Newman McDade	Administrator Name: April Mayberry
MAIL: 323 Baldwin Road, , Burlington, NC, 27217	MAIL: 1820 Brookwood Avenue, , Burlington, NC, 27215
SITE: 323 Baldwin Road, Burlington, NC, 27217	SITE: 1820 Brookwood Avenue, Burlington, NC, 27215
Contact Name: Newman B. McDade	Contact Name: April Mayberry
(336) 229-5571 Fax: (336) 229-0964 NH0397	(336) 570-8452 Fax: (336) 570-8460 NH0596
Expiry Date: 31-Dec-24	Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 160	Nursing Facility Beds Total: 51
Adult Care Home Beds Total: 0	Adult Care Home Beds Total: 24
Peak Resources - Alamance	ALEXANDER
Peak Resources Alamance Inc	Valley Nursing and Rehabilitation Center
Administrator Name: Ivy Person-Davis	Valley Nursing Healthcare, LLC
MAIL: 215 College Street, , Graham, NC, 27523	Administrator Name: Sandra Loftin
SITE: 215 College Street, Graham, NC, 27523	MAIL: 581 NC Hwy. 16 South, , Taylorsville, NC, 28681
Contact Name: Ivy Davis	SITE: 581 NC Hwy. 16 South, Taylorsville, NC, 28681
(336) 228-8394 Fax: (336) 228-8170 NH0429	Contact Name: Sandra Loftin
Expiry Date: 31-Dec-24	(828) 632-8146 Fax: (828) 635-1819 NH0381
Nursing Facility Beds Total: 142	Expiry Date: 31-Dec-24
Adult Care Home Beds Total: 0	Nursing Facility Beds Total: 183
	Adult Care Home Beds Total: 0

ALLEGHANY

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

#### As of 08/2024

#### Lotus Village Center for Nursing and Rehabilitation

Combs Street Operating Company, LLC Administrator Name: Brenda Edwards MAIL: 141 Washington Avenue, , Lawrence, NY, 11559 SITE: 179 Combs Street, Sparta, NC, 28675 Contact Name: Brenda Edwards (336) 372-2441 Fax: (336) 372-7755 NH0413 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 90 Adult Care Home Beds Total: 0

#### ANSON

#### Wadesboro Health & Rehab Center

Wadesboro Health & Rehab Center, LLC Administrator Name: Lois L Lee MAIL: 2051 Country Club Road, , Wadesboro, NC, 28170 SITE: 2051 Country Club Road, Wadesboro, NC, 28170 Contact Name: Leanna Lee (704) 694-4106 Fax: (704) 694-6726 NH0090 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 66 Adult Care Home Beds Total: 0 Anson Health and Rehabilitation Anson Health and Rehabilitation LLC Administrator Name: Kim Mooneyham MAIL: 405 S Greene Street, , Wadesboro, NC, 28170 SITE: 405 S Greene Street, Wadesboro, NC, 28170 Contact Name: Kim Mooneyham (704) 695-3301 Fax: (704) 694-9493 NH0642 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 95 Adult Care Home Beds Total: 0

## ASHE

## Margate Health and Rehab Center

Margate Health and Rehab Center LLC Administrator Name: Grayson Hill MAIL: 540 Waugh Street, , Jefferson, NC, 28640 SITE: 540 Waugh Street, Jefferson, NC, 28640 Contact Name: Grayson Hill (336) 246-5581 Fax: (336) 246-5997 NH0459 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 210 Adult Care Home Beds Total: 0 AVERY

Life Care Center of Banner Elk
Banner Elk Operations LLC
Administrator Name: Lynn Kilpatrick
MAIL: P.O. Box 2199, 185 Norwood Hollow Road, Banner Elk, NC, 28604
SITE: 185 Norwood Hollow Road, Banner Elk, NC, 28604
Contact Name: Lynn Kilpatrick
(828) 898-5136 Fax: (828) 898-8426 NH0362
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 118
Adult Care Home Beds Total: 0
BEAUFORT
<b>Ridgewood Living &amp; Rehabilitation Center</b>
Ridgewood Healthcare LLC
Administrator Name: Lisa Hartley
MAIL: 1624 Highland Drive, , Washington, NC, 27889
SITE: 1624 Highland Drive, Washington, NC, 27889
Contact Name: Chavi Kresh
(252) 946-9570 Fax: (252) 946-3715 NH0387
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 128
Adult Care Home Beds Total: 0
<b>River Trace Nursing and Rehabilitation Center</b>
Tar River LTC Group LLC
Administrator Name: Jackie Wooland
MAIL: 250 Lovers Lane, , Washington, NC, 27889
SITE: 250 Lovers Lane, Washington, NC, 27889
Contact Name: Jackie Wooland
(252) 975-1636 Fax: (252) 975-5960 NH0345
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 140
Adult Care Home Beds Total: 10
BERTIE
Windsor Rehabilitation and Healthcare Center

Windsor Opco LLC

Administrator Name: Tracie D. Seward

(252) 794-5146 Fax: (252) 794-9409

Contact Name: Tracie D. Seward

Nursing Facility Beds Total: 82

Adult Care Home Beds Total: 0

Expiry Date: 31-Dec-24

MAIL: 1306 South King Street, , Windsor, NC, 27983

NH0491

SITE: 1306 South King Street, Windsor, NC, 27983

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

## As of 08/2024

#### **Three Rivers Health and Rehabilitation Center**

Three Rivers Health and Rehabilitation Center LLC Administrator Name: Penny Brown MAIL: 1403 Conner Drive, , Windsor, NC, 27983 SITE: 1403 Conner Drive, Windsor, NC, 27983 Contact Name: Penny Brown (252) 794-4441 Fax: (252) 794-2800 NH0522 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 60 Adult Care Home Beds Total: 20

#### BLADEN

#### **Bladen East Health and Rehab**

Bladen East Health and Rehab. LLC Administrator Name: Shannon Henderson MAIL: 804 South Poplar Street, , Elizabethtown, NC, 28337 SITE: 804 South Poplar Street, Elizabethtown, NC, 28337 Contact Name: Shannon Henderson (910) 862-8100 Fax: (910) 862-8143 NH0420 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 90 Adult Care Home Beds Total: 30 **Elizabethtown Healthcare & Rehabilitation Center** Liberty Commons Nsg & Rehab Ctr of Bladen Co, LLC Administrator Name: Lori Barrow MAIL: 208 Mercer Mill Road, , Elizabethtown, NC, 28337 SITE: 208 Mercer Mill Road, Elizabethtown, NC, 28337 Contact Name: Lori Barrow (910) 862-8181 Fax: (910) 862-4860 NH0328 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 94 Adult Care Home Beds Total: 0

#### BRUNSWICK

## Liberty Commons Nursing & Rehab Center of Southport LLC Liberty Healthcare Group LLC Administrator Name: Daniell R. Peters

MAIL: 630 Fodale Avenue, PO Box 10249, Southport, NC, 28461 SITE: 630 Fodale Avenue, Southport, NC, 28461 Contact Name: Danielle Peters (910) 457-9581 Fax: (910) 457-9583 NH0322 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 99 Adult Care Home Beds Total: 17

Autumn Care of Shallotte
Autumn Corporation
Administrator Name: Bethany Viner
MAIL: 237 Mulberry Street, , Shallotte, NC, 28470
SITE: 237 Mulberry Street, Shallotte, NC, 28470
Contact Name: Bethany Viner
(910) 754-8858 Fax: (910) 755-5059 NH0456
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 100
Adult Care Home Beds Total: 10
Brunswick Cove Nursing Center
Brunswick Cove Living Center LLC
Administrator Name: Alice Dale
MAIL: 1478 River Road, , Winnabow, NC, 28479
SITE: 1478 River Road, Winnabow, NC, 28479
Contact Name: Alice Dale
(910) 371-9894 Fax: (910) 371-9609 NH0478
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 175
Adult Care Home Beds Total: 40
Brunswick Health & Rehab Center
Brunswick Health & Rehab Center LLC
Administrator Name: John Ehle
MAIL: 9600 No. 5 School Road, , Ash, NC, 28420
SITE: 9600 No. 5 School Road, Ash, NC, 28420
Contact Name: john ehle
(910) 287-6007 Fax: (910) 287-3155 NH0655
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 100
Adult Care Home Beds Total: 0
Brunswick Rehabilitation and Healthcare Center
Brunswick Operator LLC
Administrator Name: Ty Lellock
MAIL: 1070 Old Ocean Highway, , Bolivia, NC, 28422
SITE: 1070 Old Ocean Highway, Bolivia, NC, 28422
Contact Name: Ty Lellock
(910) 755-5955 Fax: (910) 755-8600 NH0626
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 90
Adult Care Home Beds Total: 0
BUNCOMBE

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

NC State Veterans Home-Black Mountain
NC Dept of Military&Veterans Aff NC Div of Veterans Aff
Administrator Name: Richard Hartline
MAIL: 1626 Jeurgens Court, Legal Dept, Norcross, GA, 30093
SITE: 62 Lake Eden Road, Black Mountain, NC, 28711
Contact Name: Richard Hartline
(828) 257-6800 Fax: (828) 257-6860 NH0631
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 100
Adult Care Home Beds Total: 0
The Oaks at Sweeten Creek
Oaks at Sweeten Creek HealthCare, LLC
Administrator Name: Karen E. Rollenhagen
MAIL: 3864 Sweeten Creek Road, , Arden, NC, 28704
SITE: 3864 Sweeten Creek Road, Arden, NC, 28704
Contact Name: Karen K. Rollenhagen
(828) 681-0904 Fax: (828) 681-1671 NH0575
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 100
Adult Care Home Beds Total: 0
The Greens at Weaverville
Greens at Weaverville LLC
Administrator Name: Shana R. Payne
MAIL: 78 Weaver Boulevard, , Weaverville, NC, 28787
SITE: 78 Weaver Boulevard, Weaverville, NC, 28787
Contact Name: Shana R. Payne
(828) 645-4297 Fax: (828) 521-7405 NH0532
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 122
Adult Care Home Beds Total: 10
Swannanoa Valley Health and Rehabilitation
Asheville US Seventy NC Opco LLC
Administrator Name: Holly Self
MAIL: 1984 US 70 Highway, , Swannanoa, NC, 28778
SITE: 1984 US 70 Highway, Swannanoa, NC, 28778
Contact Name: Holly Self
(828) 298-2214 Fax: (828) 298-2037 NH0528
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 106
Adult Care Home Beds Total: 0

The Laurels of Summit Ridge
The Laurels of Summit Inn Inc
Administrator Name: Justin P. Morrison
MAIL: 100 Riceville Road, , Asheville, NC, 28805
SITE: 100 Riceville Road, Asheville, NC, 28805
Contact Name: Justin Morrison
(828) 299-1110 Fax: (828) 299-4077 NH0540
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 60
Adult Care Home Beds Total: 52
River Bend Health and Rehabilitation
Asheville Health and Rehabilitation SNF LLC
Administrator Name: Theodore I. Marcus
MAIL: 8 Melissa Lee Drive, , Jackson, NJ, 08527
SITE: 213 Richmond Hill Drive, Asheville, NC, 28806
Contact Name: Theodore Marcus
(828) 652-3032 Fax: (828) 232-0416 NH0541
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 100
Adult Care Home Beds Total: 50
Emerald Ridge Rehabilitation and Care Center
Emerald Ridge HealthCare LLC
Administrator Name: Candace Fisher
MAIL: 25 Reynolds Mountain Boulevard, , Asheville, NC, 28804
SITE: 25 Reynolds Mountain Blvd., Asheville, NC, 28804
Contact Name: Charlene Graham Johnson
(828) 645-6619 Fax: (828) 645-3767 NH0551
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 100
Adult Care Home Beds Total: 0
Givens Health Center
The Givens Estates Inc
Administrator Name: Robert E. Underwood Jr.
MAIL: 2360 Sweeten Creek Road, , Asheville, NC, 28803
SITE: 600 Barrett Lane, Asheville, NC, 28803
Contact Name: Robert E. Underwood Jr.
(828) 771-2902 Fax: (828) 771-2901 NH0484
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 70
Adult Care Home Beds Total: 0

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

## As of 08/2024

1 77 1/1

1.5.1.1.1.4

#### The Laurels of GreenTree Ridge

The Laurels of Greentree Ridge Inc Administrator Name: Christi Ocke MAIL: 70 Sweeten Creek Road, , Asheville, NC, 28803 SITE: 70 Sweeten Creek Road, Asheville, NC, 28803 Contact Name: Christi Ocke (828) 274-7646 Fax: (828) 277-4752 NH0463 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 98 Adult Care Home Beds Total: 2 Flesher's Fairview Health Care Center Inc Flesher's Fairview Health Care Center Inc Administrator Name: Cheryl Mitchell MAIL: 3016 Cane Creek Road, , Fairview, NC, 28730 SITE: 3016 Cane Creek Road, Fairview, NC, 28730 Contact Name: Cheri Mitchell (828) 628-2800 Fax: (828) 628-3887 NH0517 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 106 Adult Care Home Beds Total: 14 **Bear Mountain Health and Rehabilitation** Asheville Beaverdam NC Opco LLC Administrator Name: Kimberly B. Smith MAIL: 500 Beaverdam Road, , Asheville, NC, 28804 SITE: 500 Beaverdam Road, Asheville, NC, 28804 Contact Name: Kimb (828) 254-8833 Fax: (828) 254-9923 NH0321 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 77 Adult Care Home Beds Total: 0 Aston Park Health Care Center Inc Aston Park Health Care Center Inc Administrator Name: Marsha McClure MAIL: 380 Brevard Road, , Asheville, NC, 28806 SITE: 380 Brevard Road, Asheville, NC, 28806 Contact Name: Janice Ratcliff (828) 253-4437 Fax: (828) 255-8635 NH0262 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 120 Adult Care Home Beds Total: 19

StoneCreek Health and Rehabilitation
StoneCreek Health and Rehabilitation LLC
Administrator Name: Michela L. Wilson
MAIL: 455 Victoria Road, , Asheville, NC, 28801
SITE: 455 Victoria Road, Asheville, NC, 28801
Contact Name: Michela L. Wilson
(828) 252-0099 Fax: (828) 641-9831 NH0291
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 120
Adult Care Home Beds Total: 0
Deerfield Episcopal Retirement Community Inc
Deerfield Episcopal Retirement Community Inc
Administrator Name: Brian King
MAIL: 1617 Hendersonville Road, , Asheville, NC, 28803
SITE: 1617 Hendersonville Road, Asheville, NC, 28803
Contact Name: brian king
(828) 210-4582 Fax: (828) 210-1281 NH0087
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 62
Adult Care Home Beds Total: 62
Brooks-Howell Home
United Methodist Women
Administrator Name: Hanna S. Rawls
MAIL: 266 Merrimon Avenue, , Asheville, NC, 28801
SITE: 266 Merrimon Avenue, Asheville, NC, 28801
Contact Name: Hanna S. Rawls
(828) 645-4297 Fax: (828) 287-3668 NH0107
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 58
Adult Care Home Beds Total: 0
Givens Highland Farms
Givens Highland Farms LLC
Administrator Name: Kristine R. Hoke
MAIL: 200 Tabernacle Road, , Black Mountain, NC, 2871
SITE: 200 Tabernacle Road, Black Mountain, NC, 28711
Contact Name: Kristine Hoke MBA, LNHA
(828) 357-2006 Fax: (828) 357-1054 NH0147
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 60
Adult Care Home Beds Total: 0

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

#### As of 08/2024

#### Pisgah Manor Health Care Center

Liberty Healthcare Group, LLC Administrator Name: Michelle G. Iacono MAIL: 104 Holcombe Cove Road., Candler, NC, 28715 SITE: 104 Holcombe Cove Road, Candler, NC, 28715 Contact Name: Michelle G. Iacono (828) 667-9851 Fax: (828) 667-9858 NH0184 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 118 Adult Care Home Beds Total: 0 **Elevate Health and Rehabilitation** Asheville Victoria NC Opco LLC Administrator Name: Roxanne M. Burgener MAIL: 91 Victoria Road, , Asheville, NC, 28801 SITE: 91 Victoria Road, Asheville, NC, 28801 Contact Name: Roxanne M. Burgener (336) 692-0910 Fax: (828) 285-0437 NH0233 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 120 Adult Care Home Beds Total: 0 **Mountain Ridge Health and Rehab** Regency Care of Black Mountain LLC Administrator Name: David L. Hunt MAIL: 611 Old US Hwy 70 E, , Black Mountain, NC, 28711 SITE: 611 Old US Hwy 70 E, Black Mountain, NC, 28711 Contact Name: Stephanie G Brendell (828) 669-9991 Fax: (828) 669-9939 NH0235 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 97 Adult Care Home Beds Total: 3

#### BURKE

# Autumn Care of Drexel

Autumn Corporation Administrator Name: Teresa W. Lowman MAIL: 307 Oakland Avenue, , Morganton, NC, 28655 SITE: 307 Oakland Avenue, Morganton, NC, 28655 Contact Name: Teresa Lowman (828) 433-6180 Fax: (828) 433-6672 NH0347 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 100 Adult Care Home Beds Total: 20

Magnolia Lane Nursing and Rehabilitation Center
Granite Falls LTC LLC
Administrator Name: Heidi N. Hinton
MAIL: 107 Magnolia Drive, , Morganton, NC, 28655
SITE: 107 Magnolia Drive, Morganton, NC, 28655
Contact Name: Heidi N. Hinton
(828) 437-8760 Fax: (828) 438-6698 NH0343
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 121
Adult Care Home Beds Total: 0
Grace Ridge
Grace Lifecare Inc
Administrator Name: McKayla B. Vance
MAIL: 500 Lenoir Road, , Morganton, NC, 28655
SITE: 500 Lenoir Road, Morganton, NC, 28655
Contact Name: McKayla B. Vance
(828) 580-8300 Fax: (828) 580-8309 NH0476
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 25
Adult Care Home Beds Total: 47
Grace Heights Health and Rehabilitation
Grace Heights Rehab and Skilled Nursing Center, LLC
Administrator Name: Cynthia L. Alfaro
MAIL: 109 Foothills Drive, , Morganton, NC, 28655
SITE: 109 Foothills Drive, Morganton, NC, 28655
Contact Name: Cynthia Alfaro
(704) 747-9049 Fax: (828) 580-7009 NH0408
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 120
Adult Care Home Beds Total: 0
College Pines Health and Rehabilitation
College Pines Rehab and Skilled Nursing Center, LLC
Administrator Name: Cathy Lewis
MAIL: 95 Locust Street, , Connelly Springs, NC, 28612
SITE: 95 Locust Street, Connelly Springs, NC, 28612
Contact Name: Cathy Lewis
(828) 580-6800 Fax: (828) 580-6803 NH0553
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 100
Adult Care Home Beds Total: 4

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

## As of 08/2024

## **Carolina Rehab Center of Burke**

Carolina Burke Operator LLC Administrator Name: Heather McGroarty MAIL: 3647 Miller Bridge Road, , Connelly Springs, NC, 28612 SITE: 3647 Miller Bridge Road, Connelly Springs, NC, 28612 Contact Name: Heather McGroarty (732) 905-6440 Fax: (828) 397-2349 NH0610 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 90 Adult Care Home Beds Total: 0

#### CABARRUS

# The Gardens of Taylor Glen Retirement Community Baptist Retirement Homes of North Carolina Inc Administrator Name: Ryan C. Jernigan MAIL: 3700 Taylor Glen Lane, , Concord, NC, 28027 SITE: 3700 Taylor Glen Lane, Concord, NC, 28027 Contact Name: Ryan C. Jernigan (704) 788-6510 Fax: (704) 788-6508 NH0607 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 24 Adult Care Home Beds Total: 24 **PruittHealth-Town Center** PruittHealth-Town Center LLC Administrator Name: Rhonda Hargrave MAIL: 1626 Jeurgens Court, Legal Dept, Norcross, GA, 30093 SITE: 6300 Roberta Road, Harrisburg, NC, 28075 Contact Name: Rhonda Hargrave (704) 455-5553 Fax: (704) 455-5679 NH0604 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 70 Adult Care Home Beds Total: 0 **Transitional Health Services of Kannapolis** Kannapolis HealthCare LLC Administrator Name: Ken F. Speller MAIL: 1810 Concord Lake Road, , Kannapolis, NC, 28083 SITE: 1810 Concord Lake Road, Kannapolis, NC, 28083 Contact Name: Charlene Johnson (704) 933-3781 Fax: (704) 933-5002 NH0453 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 107 Adult Care Home Beds Total: 0

The Greens at Cabarrus
Greens at Cabarrus LLC
Administrator Name: Cindy Pittmon
MAIL: 250 Bishop Lane, , Concord, NC, 28025
SITE: 250 Bishop Lane, Concord, NC, 28025
Contact Name: Cindy Pittmon
(704) 788-6400 Fax: (704) 788-6403 NH0498
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 90
Adult Care Home Beds Total: 0
Cabarrus Health and Rehabilitation Center
Concord Operator LLC
Administrator Name: Robert Johnson Jr
MAIL: 430 Brookwood Avenue, NE, , Concord, NC, 28025
SITE: 430 Brookwood Avenue, NE, Concord, NC, 28025
Contact Name: Robert Johnson Jr
(704) 999-2239 Fax: (704) 788-6331 NH0247
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 120
Adult Care Home Beds Total: 0
<b>Concord Rehabilitation and Nursing Center</b>
Accordius Health at Concord LLC
Administrator Name: James D. Carter
MAIL: 515 Lake Concord Road NE, , Concord, NC, 28025
SITE: 515 Lake Concord Road NE, Concord, NC, 28025
Contact Name: James D. Carter
(704) 784-4494 Fax: (704) 784-9669 NH0179
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 120
Adult Care Home Beds Total: 0
Five Oaks Rehabilitation and Care Center
Five Oaks SNF Operations LLC
Administrator Name: Jonathan R. Thomas
MAIL: 413 Winecoff School Road, , Concord, NC, 28027
SITE: 413 Winecoff School Road, Concord, NC, 28027
Contact Name: Jonathan Thomas
(704) 788-2131 Fax: (704) 786-1557 NH0027
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 160
Adult Care Home Beds Total: 24
CALDWELL

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

# As of 08/2024

Gateway Rehabilitation and Healthcare	Croatan Ridge Nursing and Rehabilitation Center
Gateway HealthCare LLC	River Neuse Group LLC
Administrator Name: Kenneth W. Shaw	Administrator Name: Alison Switzer
MAIL: 2030 Harper Avenue Northwest, , Lenoir, NC, 28645	MAIL: 210 Foxhall Rd., , Newport, NC, 28570
SITE: 2030 Harper Avenue Northwest, Lenoir, NC, 28645	SITE: 210 Foxhall Rd., Newport, NC, 28570
Contact Name: Kenneth W. Shaw	Contact Name: Alison Switzer
(828) 754-3888 Fax: (828) 754-4068 NH0485	(252) 223-2560 Fax: (252) 223-4208 NH0583
Expiry Date: 31-Dec-24	Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 100	Nursing Facility Beds Total: 64
Adult Care Home Beds Total: 0	Adult Care Home Beds Total: 0
Lenoir Health and Rehabilitation Center	PruittHealth - Crystal Coast, LLC
Lenoir Operator LLC	PruittHealth - Crystal Coast, LLC
Administrator Name: Mirana Lambert	Administrator Name:
MAIL: 322 Nuway Circle, , Lenoir, NC, 28645	MAIL: 2416 US highway 70 East, , Beaufort, NC, 28516
SITE: 322 Nuway Circle, Lenoir, NC, 28645	SITE: 2416 US HIghway 70 East, Beaufort, NC, 28516
Contact Name: Mirana Lambert	Contact Name:
(828) 758-7326 Fax: (828) 757-0938 NH0407	Fax: NH0600
Expiry Date: 31-Dec-24	Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 120	Nursing Facility Beds Total: 104
Adult Care Home Beds Total: 0	Adult Care Home Beds Total: 0
Hickory Falls Health and Rehabilitation	Crystal Bluffs Rehabilitation and Health Care Center
Granite Falls Health and Rehabilitation LLC	Century Care of the Crystal Coast Inc
Administrator Name: Brandee Fulbright	Administrator Name: Logan Dunn
MAIL: 100 Sunset Street, , Granite Falls, NC, 28630	MAIL: 4010 Bridges Street Extension, , Morehead City, NC
SITE: 100 Sunset Street, Granite Falls, NC, 28630	28557
Contact Name: Brandee Fulbright	SITE: 4010 Bridges Street Extension, Morehead City, NC, 28557
(828) 396-2387 Fax: (828) 396-9578 NH0380	Contact Name: Logan Dunn
Expiry Date: 31-Dec-24	(252) 726-0031 Fax: (252) 726-5831 NH0227
Nursing Facility Beds Total: 120	Expiry Date: 31-Dec-24
Adult Care Home Beds Total: 0	Nursing Facility Beds Total: 92
Shaire Nursing Center	Adult Care Home Beds Total: 0
The Shaire Center Inc	CASWELL
Administrator Name: Michael Jason Haire	Yanceyville Rehabilitation and Healthcare Center
MAIL: P.O. Box 668, , Hudson, NC, 28638	Yanceyville Opco LLC
SITE: 1450 Shaire Center Drive, Lenoir, NC, 28645	Administrator Name: Loie Leopardi
Contact Name: Jason Haire	MAIL: 1086 Main Street North, , Yanceyville, NC, 27379
(828) 728-4673 Fax: (828) 728-0878 NH0578	SITE: 1086 Main Street North, Yanceyville, NC, 27379
Expiry Date: 31-Dec-24	Contact Name: Loie Lepardi
Nursing Facility Beds Total: 60	(336) 694-5916 Fax: (336) 694-7475 NH0434
Adult Care Home Beds Total: 0	Expiry Date: 31-Dec-24
CARTERET	Nursing Facility Beds Total: 157
	Adult Care Home Beds Total: 0

#### CATAWBA

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

## As of 08/2024

#### The Greens at Viewmont

Greens at Viewmont LLC Administrator Name: Lisa L. Fitzgerald MAIL: 220 13th Ave. Place NW, , Hickory, NC, 28601 SITE: 220 13th Ave. Place NW, Hickory, NC, 28601 Contact Name: Lisa L. Fitzgerald (828) 328-5646 Fax: (828) 328-6189 NH0409 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 104 Adult Care Home Beds Total: 0 **Abernethy Laurels** EveryAge Administrator Name: Ashley Jones MAIL: 102 Leonard Avenue, , Newton, NC, 28658 SITE: 102 Leonard Avenue, Newton, NC, 28658 Contact Name: Ashley Jones (828) 464-8260 Fax: (828) 465-8636 NH0191 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 174 Adult Care Home Beds Total: 18 **Trinity Ridge** Lutheran Home-Hickory West Inc Administrator Name: Hannah Huffman MAIL: 2140 Medical Park Drive, , Hickory, NC, 28602 SITE: 2140 Medical Park Drive, Hickory, NC, 28602 Contact Name: Hannah Huffman (828) 322-6995 Fax: (828) 294-6003 NH0162 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 120 Adult Care Home Beds Total: 0 **Trinity Village** Lutheran Home-Hickory Inc Administrator Name: Kendra P. Hendren MAIL: 1265 21st Street, NE, , Hickory, NC, 28601 SITE: 1265 21st Street, NE, Hickory, NC, 28601 Contact Name: Kendra P. Hendren (704) 880-6166 Fax: (828) 327-0512 NH0068 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 104 Adult Care Home Beds Total: 90

The Greens at Hic	kory	
Greens at Hickory	/ LLC	
Administrator Na	me: Lasheena Webb	
MAIL: 3031 Tate	Boulevard, SE, , Hicko	ory, NC, 28602
SITE: 3031 Tate	Boulevard, SE, Hickory	, NC, 28602
Contact Name: L	asheena Webb	
(828) 845-5554	Fax: (828) 322-6023	NH0337
Expiry Date: 31-I	Dec-24	
Nursing Facility I	Beds Total: 150	
Adult Care Home	Beds Total: 20	
Conover Nursing a	and Rehabilitation Cen	iter
Brosis Manageme	ent of Catawba Inc	
Administrator Na	me: Todd Roper	
MAIL: P.O. Box	1718, , Conover, NC, 28	8613
SITE: 920 4th Str	eet S.W., Conover, NC,	28613
Contact Name: T	odd Roper	
(828) 695-8282	Fax: (828) 468-5188	NH0603
Expiry Date: 31-l	Dec-24	
Nursing Facility I	Beds Total: 90	
Adult Care Home	Beds Total: 0	

# CHATHAM

The Arbor Galloway Ridge Inc Administrator Name: Dianne Armstrong MAIL: 3000 Galloway Ridge Road, , Pittsboro, NC, 27312 SITE: 300 Clynelish Close, Pittsboro, NC, 27312 Contact Name: Dianne M Armstrong (910) 986-2421 Fax: (919) 542-7521 NH0619 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 40 Adult Care Home Beds Total: 51 **Siler City Center** SunBridge Regency-North Carolina LLC Administrator Name: John Alvarez MAIL: 900 West Dolphin Street, , Siler City, NC, 27344 SITE: 900 West Dolphin Street, Siler City, NC, 27344 Contact Name: John Alvarez (919) 663-3431 Fax: (919) 663-5785 NH0395 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 150 Adult Care Home Beds Total: 0

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

## As of 08/2024

#### **Carolina Meadows Health Center**

Carolina Meadows Inc Administrator Name: Adam T. Melton MAIL: 500 Carolina Meadows, , Chapel Hill, NC, 27517 SITE: 500 Carolina Meadows, Chapel Hill, NC, 27514 Contact Name: Adam T. Melton (919) 260-6239 Fax: (919) 932-9074 NH0490 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 90 Adult Care Home Beds Total: 0

#### The Laurels of Chatham

Laurel Health Care Company of Chatham NC Inc Administrator Name: John Jarrell MAIL: 72 Chatham Business Park, , Pittsboro, NC, 27312 SITE: 72 Chatham Business Park, Pittsboro, NC, 27312 Contact Name: john jarrell (919) 542-6677 Fax: (910) 642-0120 NH0523 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 140 Adult Care Home Beds Total: 0

#### **CHEROKEE**

**Murphy Rehabilitation & Nursing** Murphy Rehabilitation, Inc Administrator Name: Kelly R Roberts MAIL: 230 NC Highway 141, , Murphy, NC, 28906 SITE: 230 NC Highway 141, Murphy, NC, 28906 Contact Name: Kelly Roberts (828) 835-7580 Fax: (828) 835-7680 NH0652 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 134 Adult Care Home Beds Total: 0 Valley View Care and Rehabilitation Center Valley View HealthCare LLC Administrator Name: Amy Stanley MAIL: 551 Kent Street, , Andrews, NC, 28901 SITE: 551 Kent Street, Andrews, NC, 28901 Contact Name: Amy Stanley (828) 321-3075 Fax: (828) 321-3196 NH0535 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 76 Adult Care Home Beds Total: 0

#### **CHOWAN**

**Chowan River Nursing and Rehabilitation Center** Tar River LTC Group Administrator Name: Bayonle S. Akingbule MAIL: 1341 Paradise Road, P O Box 566, Edenton, NC, 27932 SITE: 1341 Paradise Road, Edenton, NC, 27932 Contact Name: Bayonle S. Akingbule (252) 482-7481 Fax: (252) 482-7674 NH0369 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 130 Adult Care Home Beds Total: 0

## CLAY

# **Clay County Care Center**

Clay County Healthcare, LLC Administrator Name: Traci D. Pollard MAIL: 86 Valley Hideaway Drive, , Hayesville, NC, 28904 SITE: 86 Valley Hideaway Drive, Hayesville, NC, 28904 Contact Name: Traci D. Pollard (828) 389-9941 Fax: (828) 389-3712 NH0542 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 90 Adult Care Home Beds Total: 0

## **CLEVELAND**

White Oak Manor-Kings Mountain NHC HealthCare - Kings Mountain, LLC Administrator Name: Brittney T. Grigg MAIL: 716 Sipes Street, , Kings Mountain, NC, 28086 SITE: 716 Sipes Street, Kings Mountain, NC, 28086 Contact Name: Brittney T. (704) 739-8132 Fax: (704) 739-8133 NH0396 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 154 Adult Care Home Beds Total: 0 White Oak Manor-Shelby NHC HealthCare - Shelby LLC Administrator Name: Crystal C. Lombardo MAIL: 401 North Morgan Street, , Shelby, NC, 28150 SITE: 401 North Morgan Street, Shelby, NC, 28150 Contact Name: Crystal C. Lombardo (704) 482-7326 Fax: (704) 487-7193 NH0398 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 160 Adult Care Home Beds Total: 0

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

## As of 08/2024

#### **Peak Resources-Shelby**

Century Care of Shelby Inc Administrator Name: Tara D. Coley MAIL: 1101 North Morgan Street, , Shelby, NC, 28150 SITE: 1101 North Morgan Street, Shelby, NC, 28150 Contact Name: Tara D. Coley (704) 482-5396 Fax: (704) 482-5823 NH0405 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 100 Adult Care Home Beds Total: 0 **Cleveland Pines** AHSNF. Inc. Administrator Name: Kathryn G. Dotson MAIL: 1404 North Lafayette Street, , Shelby, NC, 28150 SITE: 1404 North Lafayette Street, Shelby, NC, 28150 Contact Name: Tracey Piercey (980) 487-1500 Fax: (980) 487-1553 NH0524 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 120 Adult Care Home Beds Total: 0

#### COLUMBUS

## Shoreland Health Care and Retirement Center Inc

Shoreland Health Care and Retirement Center Inc Administrator Name: Erica Schacht MAIL: 200 Flowers-Pridgen Drive, , Whiteville, NC, 28472 SITE: 200 Flowers-Pridgen Drive, Whiteville, NC, 28472 Contact Name: Erica L. Schacht (910) 642-4300 Fax: (910) 642-4405 NH0510 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 89 Adult Care Home Beds Total: 10 Premier Living and Rehab Center Premier Living and Rehab Center LLC Administrator Name: Tabitha M. Reaves MAIL: 106 Cameron Street, , Lake Waccamaw, NC, 28450 SITE: 106 Cameron Street, Lake Waccamaw, NC, 28450 Contact Name: Tabitha M. Reaves (910) 646-3132 Fax: (919) 646-4071 NH0246 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 127 Adult Care Home Beds Total: 15

Liberty Commons Nursing and Rehab Ctr of Columbus Cty
Liberty Commons Nsg and Rehab Ctr of Columbus Cty LLC
Administrator Name: Tracey Jones
MAIL: 1402 Pinckney Street, , Whiteville, NC, 28472
SITE: 1402 Pinckney Street, Whiteville, NC, 28472
Contact Name: Tracey Jones
(910) 642-4245 Fax: (910) 642-7187 NH0283
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 107
Adult Care Home Beds Total: 40
CRAVEN
Riverpoint Crest Nursing and Rehabilitation Center
River Neuse Group LLC
Administrator Name: Deryn Smith
MAIL: 2600 Old Cherry Point Road, , New Bern, NC, 28563
SITE: 2600 Old Cherry Point Road, New Bern, NC, 28563
Contact Name: Deryn Smith
(252) 637-4730 Fax: (252) 637-0289 NH0344
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 105
Adult Care Home Beds Total: 18
PruittHealth-Trent
PruittHealth-Trent LLC
Administrator Name: Lisa Bullock
MAIL: 1626 Jeurgens Court, , Norcross, GA, 30093
SITE: 836 Hospital Drive, New Bern, NC, 28560
Contact Name: Lisa Bullock
(252) 638-6001 Fax: (252) 638-9304 NH0311
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 116
Adult Care Home Beds Total: 0
PruittHealth-Neuse
PruittHealth-Neuse LLC
Administrator Name: Lisa Burkhart
MAIL: 1626 Jeurgens Court, Legal Dept, Norcross, GA, 30093
SITE: 1303 Health Drive, New Bern, NC, 28560
Contact Name: Lisa Burkhart
(252) 634-3852 Fax: (252) 638-1485 NH0496
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 110
Adult Care Home Beds Total: 0

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

Cherry Point Bay Nursing and Rehabilitation Center
River Neuse Group LLC
Administrator Name: Melissa D. Ross-Merkel
MAIL: 110 McCotter Blvd., , Havelock, NC, 28532
SITE: 110 McCotter Blvd., Havelock, NC, 28532
Contact Name: Melissa D. Ross-Merkel
(252) 444-4631 Fax: (252) 444-5831 NH0579
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 70
Adult Care Home Beds Total: 0
Bayview Nursing & Rehabilitation Center
Century Care of New Bern Inc
Administrator Name: Jennifer Cuthrell
MAIL: 3003 Kensington Park Drive, , New Bern, NC, 28560
SITE: 3003 Kensington Park Drive, New Bern, NC, 28560
Contact Name: Jennifer L Cuthrell
(252) 631-5501 Fax: (252) 638-9308 NH0567
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 60
Adult Care Home Beds Total: 12
CUMBERLAND
Woodlands Nursing and Rehabilitation Center
Liberty Healthcare Group LLC
Liberty Healthcare Group LLC
Liberty Healthcare Group LLC Administrator Name: Sandra M. Pate
Liberty Healthcare Group LLC Administrator Name: Sandra M. Pate MAIL: 400 Pelt Drive, , Fayetteville, NC, 28301
Liberty Healthcare Group LLC Administrator Name: Sandra M. Pate MAIL: 400 Pelt Drive, , Fayetteville, NC, 28301 SITE: 400 Pelt Drive, Fayetteville, NC, 28301
Liberty Healthcare Group LLC Administrator Name: Sandra M. Pate MAIL: 400 Pelt Drive, , Fayetteville, NC, 28301 SITE: 400 Pelt Drive, Fayetteville, NC, 28301 Contact Name: Sandra Pate
Liberty Healthcare Group LLC Administrator Name: Sandra M. Pate MAIL: 400 Pelt Drive, , Fayetteville, NC, 28301 SITE: 400 Pelt Drive, Fayetteville, NC, 28301 Contact Name: Sandra Pate (919) 851-8000 Fax: (910) 822-0535 NH0577
Liberty Healthcare Group LLC Administrator Name: Sandra M. Pate MAIL: 400 Pelt Drive, , Fayetteville, NC, 28301 SITE: 400 Pelt Drive, Fayetteville, NC, 28301 Contact Name: Sandra Pate (919) 851-8000 Fax: (910) 822-0535 NH0577 Expiry Date: 31-Dec-24
Liberty Healthcare Group LLC Administrator Name: Sandra M. Pate MAIL: 400 Pelt Drive, , Fayetteville, NC, 28301 SITE: 400 Pelt Drive, Fayetteville, NC, 28301 Contact Name: Sandra Pate (919) 851-8000 Fax: (910) 822-0535 NH0577 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 80
Liberty Healthcare Group LLC Administrator Name: Sandra M. Pate MAIL: 400 Pelt Drive, , Fayetteville, NC, 28301 SITE: 400 Pelt Drive, Fayetteville, NC, 28301 Contact Name: Sandra Pate (919) 851-8000 Fax: (910) 822-0535 NH0577 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 80 Adult Care Home Beds Total: 20
Liberty Healthcare Group LLC Administrator Name: Sandra M. Pate MAIL: 400 Pelt Drive, , Fayetteville, NC, 28301 SITE: 400 Pelt Drive, Fayetteville, NC, 28301 Contact Name: Sandra Pate (919) 851-8000 Fax: (910) 822-0535 NH0577 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 80 Adult Care Home Beds Total: 20 <b>NC State Veterans Home-Fayetteville</b>
Liberty Healthcare Group LLC Administrator Name: Sandra M. Pate MAIL: 400 Pelt Drive, , Fayetteville, NC, 28301 SITE: 400 Pelt Drive, Fayetteville, NC, 28301 Contact Name: Sandra Pate (919) 851-8000 Fax: (910) 822-0535 NH0577 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 80 Adult Care Home Beds Total: 20 <b>NC State Veterans Home-Fayetteville</b> NC Dept of Military&Veterans Aff NC Div of Veterans Aff
Liberty Healthcare Group LLC Administrator Name: Sandra M. Pate MAIL: 400 Pelt Drive, , Fayetteville, NC, 28301 SITE: 400 Pelt Drive, Fayetteville, NC, 28301 Contact Name: Sandra Pate (919) 851-8000 Fax: (910) 822-0535 NH0577 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 80 Adult Care Home Beds Total: 20 <b>NC State Veterans Home-Fayetteville</b> NC Dept of Military&Veterans Aff NC Div of Veterans Aff Administrator Name: Whitney Bell
Liberty Healthcare Group LLC Administrator Name: Sandra M. Pate MAIL: 400 Pelt Drive, , Fayetteville, NC, 28301 SITE: 400 Pelt Drive, Fayetteville, NC, 28301 Contact Name: Sandra Pate (919) 851-8000 Fax: (910) 822-0535 NH0577 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 80 Adult Care Home Beds Total: 20 <b>NC State Veterans Home-Fayetteville</b> NC Dept of Military&Veterans Aff NC Div of Veterans Aff Administrator Name: Whitney Bell MAIL: 214 Cochran Avenue, , Fayetteville, NC, 28301
Liberty Healthcare Group LLC Administrator Name: Sandra M. Pate MAIL: 400 Pelt Drive, , Fayetteville, NC, 28301 SITE: 400 Pelt Drive, Fayetteville, NC, 28301 Contact Name: Sandra Pate (919) 851-8000 Fax: (910) 822-0535 NH0577 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 80 Adult Care Home Beds Total: 20 <b>NC State Veterans Home-Fayetteville</b> NC Dept of Military&Veterans Aff NC Div of Veterans Aff Administrator Name: Whitney Bell MAIL: 214 Cochran Avenue, , Fayetteville, NC, 28301 SITE: 214 Cochran Avenue, Fayetteville, NC, 28301
Liberty Healthcare Group LLC Administrator Name: Sandra M. Pate MAIL: 400 Pelt Drive, , Fayetteville, NC, 28301 SITE: 400 Pelt Drive, Fayetteville, NC, 28301 Contact Name: Sandra Pate (919) 851-8000 Fax: (910) 822-0535 NH0577 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 80 Adult Care Home Beds Total: 20 <b>NC State Veterans Home-Fayetteville</b> NC Dept of Military&Veterans Aff NC Div of Veterans Aff Administrator Name: Whitney Bell MAIL: 214 Cochran Avenue, , Fayetteville, NC, 28301 SITE: 214 Cochran Avenue, Fayetteville, NC, 28301 Contact Name: Whitney Bell
Liberty Healthcare Group LLC Administrator Name: Sandra M. Pate MAIL: 400 Pelt Drive, , Fayetteville, NC, 28301 SITE: 400 Pelt Drive, Fayetteville, NC, 28301 Contact Name: Sandra Pate (919) 851-8000 Fax: (910) 822-0535 NH0577 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 80 Adult Care Home Beds Total: 20 <b>NC State Veterans Home-Fayetteville</b> NC Dept of Military&Veterans Aff NC Div of Veterans Aff Administrator Name: Whitney Bell MAIL: 214 Cochran Avenue, , Fayetteville, NC, 28301 SITE: 214 Cochran Avenue, Fayetteville, NC, 28301 Contact Name: Whitney Bell (910) 482-4131 Fax: (910) 822-0979 NH0585

Carolina Rehab Center of Cumberland
Carolina Cumberland Operator LLC
Administrator Name: Cindy Maher
MAIL: 4600 Cumberland Road, , Fayetteville, NC, 28306
SITE: 4600 Cumberland Road, Fayetteville, NC, 28306
Contact Name: Cindy Maher
(730) 905-6440 Fax: (910) 429-1710 NH0593
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 136
Adult Care Home Beds Total: 0
Autumn Care of Fayetteville
Autumn Care of Fayetteville, LLC
Administrator Name: Barbara Collins
MAIL: 1401 Seventy First School Road, , Fayetteville, NC 28314
SITE: 1401 Seventy First School Road, Fayetteville, NC, 28314
Contact Name: Barbara Collins
(910) 867-4960 Fax: (910) 867-4980 NH0629
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 90
Adult Care Home Beds Total: 0
The Carrolton of Fayetteville
The Carrolton of Fayetteville, LLC
Administrator Name: Dan Cotten
MAIL: 2461 Legion Road, , Fayetteville, NC, 28306
SITE: 2461 Legion Road, Fayetteville, NC, 28306
Contact Name: Dan Cotten
(910) 474-4381 Fax: (910) 425-3165 NH0501
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 120
Adult Care Home Beds Total: 0
Village Green Health and Rehabilitation
Village Green Health and Rehabilitation, LLC
Administrator Name: Makinna J. Zybas
MAIL: 1601 Purdue Drive, , Fayetteville, NC, 28304
SITE: 1601 Purdue Drive, Fayetteville, NC, 28304
Contact Name: Makinna Zybas
(910) 486-5000 Fax: (910) 485-6388 NH0502
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 170
Adult Care Home Beds Total: 0

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

## As of 08/2024

Haymount Rehabilitation & Nursing Center Inc	Whispering Pines Nursing & Rehabilitation Center			
Haymount Rehabilitation & Nursing Center Inc	Cumberland Care Inc			
Administrator Name: Tiffany Glover	Administrator Name: Katidra L. Ingram			
MAIL: 2346 Barrington Circle, , Fayetteville, NC, 28303	MAIL: 523 Country Club Drive, , Fayetteville, NC, 28301			
SITE: 2346 Barrington Circle, Fayetteville, NC, 28303	SITE: 523 Country Club Drive, Fayetteville, NC, 28301			
Contact Name: Tiffany Glover	Contact Name: Katidra L. Ingram			
(910) 689-0150 Fax: (910) 689-0160 NH0454	(910) 488-0711 Fax: (910) 482-8302 NH0001			
Expiry Date: 31-Dec-24	Expiry Date: 31-Dec-24			
Nursing Facility Beds Total: 98	Nursing Facility Beds Total: 86			
Adult Care Home Beds Total: 14	Adult Care Home Beds Total: 2			
Bethesda Health Care Facility	CURRITUCK			
Jactom Inc	Currituck Health & Rehab Center			
Administrator Name: Caroline Horne	Currituck Health & Rehab Center, LLC			
MAIL: 3532 Dunn Road, , Eastover, NC, 28312	Administrator Name: Karen E. Jackson			
SITE: 3532 Dunn Road, Eastover, NC, 28312	MAIL: 3907 Caratoke Hwy, , Barco, NC, 27917			
Contact Name: Caroline Horne	SITE: 3907 Caratoke Hwy, Barco, NC, 27917			
(910) 323-3223 Fax: (910) 321-6084 NH0254	Contact Name: Karen Jackson			
Expiry Date: 31-Dec-24	(252) 457-0500 Fax: (252) 457-0501 NH0445			
Nursing Facility Beds Total: 85	Expiry Date: 31-Dec-24			
Adult Care Home Beds Total: 0	Nursing Facility Beds Total: 100			
Liberty Healthcare Services of Golden Years Nursing	Adult Care Home Beds Total: 0			
Center, LLC	DARE			
Liberty Healthcare Group, LLC	Peak Resources-Outer Banks			
Administrator Name: Marc Cooper	Peak Resources-Outer Banks Inc			
MAIL: P.O. Box 40, , Falcon, NC, 28342	Administrator Name: Melissa Harrison			
SITE: 7348 North West Street, Falcon, NC, 28342	MAIL: 430 West Health Center Drive, , Nags Head, NC,			
Contact Name: Marc Cooper	27959			
(910) 980-1271 Fax: (910) 980-1141 NH0076	SITE: 430 West Health Center Drive, Nags Head, NC, 27959			
Expiry Date: 31-Dec-24	Contact Name: Melissa Harrison			
Nursing Facility Beds Total: 58	(252) 441-3116 Fax: (252) 441-3367 NH0372			
Adult Care Home Beds Total: 0	Expiry Date: 31-Dec-24			
Highland House Rehabilitation and Healthcare	Nursing Facility Beds Total: 126			
Liberty Commons Nursing and Rehabilitation Center of	Adult Care Home Beds Total: 0			
Highland House, LLC	DAVIDSON			
Administrator Name: Tonya R. Drake	Piedmont Crossing			
MAIL: 1700 Pamalee Drive, , Fayetteville, NC, 28301	EveryAge			
SITE: 1700 Pamalee Drive, Fayetteville, NC, 28301	Administrator Name: Marissa K. McNally			
Contact Name: Tonya Drake MAIL: 100 Hedrick Drive, , Thomasville, NC, 27				
(910) 488-2295 Fax: (910) 488-0776 NH0117	SITE: 100 Hedrick Drive, Thomasville, NC, 27360			
Expiry Date: 31-Dec-24	Contact Name: Marissa K. McNally			
Nursing Facility Beds Total: 106	(336) 472-2017 Fax: (336) 474-3895 NH0390			
Adult Care Home Beds Total: 53	Expiry Date: 31-Dec-24			
	Nursing Facility Beds Total: 104			

Page: 13

Adult Care Home Beds Total: 20

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

## As of 08/2024

**Pine Acres Center for Nursing and Rehabilitation** Brian Center Lane Operating Company, LLC Administrator Name: Stephanie Clontz MAIL: 141 Washington Ave, , Lawrence, NY, 11559 SITE: 279 Brian Center Lane, Lexington, NC, 27292 Contact Name: Stephanie Clontz (336) 249-7521 Fax: (336) 249-3645 NH0010 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 106 Adult Care Home Beds Total: 0 **Abbotts Creek Center** SunBridge Regency-North Carolina LLC Administrator Name: Angela S. Compton MAIL: 877 Hill Everhart Rd., , Lexington, NC, 27295 SITE: 877 Hill Everhart Rd., Lexington, NC, 27295 Contact Name: Angela S. Compton (336) 248-6644 Fax: (336) 248-3113 NH0099 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 64 Adult Care Home Beds Total: 0 **Davidson Health & Rehab Center** Davidson Health & Rehab Center, LLC Administrator Name: Alyce E. Hopping MAIL: 4748 Old Salisbury Rd., , Lexington, NC, 27295 SITE: 4748 Old Salisbury Rd., Lexington, NC, 27295 Contact Name: Alyce E. Hopping (336) 956-1132 Fax: (336) 300-7795 NH0094 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 100 Adult Care Home Beds Total: 0 **Pine Ridge Health and Rehabilitation Center** Spruce LTC Group LLC Administrator Name: Lisa Johnson MAIL: 706 Pineywood Road, , Thomasville, NC, 27360 SITE: 706 Pineywood Road, Thomasville, NC, 27360 Contact Name: Lisa Johnson (336) 475-9116 Fax: (336) 475-9120 NH0187 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 140 Adult Care Home Beds Total: 14

Mountain Vista Health Park
Mountain Vista Health Park Inc
Administrator Name: Cynthia H. Montgomery
MAIL: P.O.Box 1547, , Denton, NC, 27239
SITE: 106 Mountain Vista Health Park Road, Denton, NC, 27239
Contact Name: Cindy Montgomery
(336) 859-2181 Fax: (336) 859-4053 NH0259
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 60
Adult Care Home Beds Total: 60
Magnolia Gardens Center for Nursing and Rehabilitation
Blair Street Operating Company, LLC
Administrator Name: Eric Parker
MAIL: 141 Washington Ave, , Lawrence, NY, 11559
SITE: 1028 Blair Street, Thomasville, NC, 27360
Contact Name: Eric Parker
(336) 472-7771 Fax: (336) 450-1594 NH0292
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 120
Adult Care Home Beds Total: 0
Lexington Health Care Center
Lexington Operator LLC
Administrator Name: Alexandra Garrett
MAIL: 17 Cornelia Drive, , Lexington, NC, 27292
SITE: 17 Cornelia Drive, Lexington, NC, 27292
Contact Name: Alexandra Garrett
(732) 905-6440 Fax: (336) 242-1349 NH0527
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 100
Adult Care Home Beds Total: 0
AVIE
Bermuda Village Retirement Center
ML Bermuda Village, LLC
Administrator Name: Stewart R. Reed

MAIL: 142 Bermuda Village Drive, , Bermuda Run, NC,

SITE: 142 Bermuda Village Drive, Bermuda Run, NC, 27006

NH0519

DA

27006

Contact Name: Stewart R. Reed

(704) 754-1551 Fax:

Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 36 Adult Care Home Beds Total: 21

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

## As of 08/2024

Bermuda Commons Nursing and Rehabilitation Center
Liberty Commons Nsg and Rehab Ctr of Davie County LLC
Administrator Name: Valerie O'Donnell
MAIL: 316 NC Hwy. 801 South, , Advance, NC, 27006
SITE: 316 NC Hwy. 801 South, Advance, NC, 27006
Contact Name: Valerie ODonnell
(765) 499-3560 Fax: (336) 998-0243 NH0560
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 117
Adult Care Home Beds Total: 10
Davie Nursing and Rehabilitation Center
Davie Nursing and Rehabilitation Center, LLC
Administrator Name: Darin Asbill
MAIL: 498 Madison Road, , Mocksville, NC, 27028
SITE: 498 Madison Road, Mocksville, NC, 27028
Contact Name: Darin Asbill
(336) 751-3535 Fax: (336) 751-0028 NH0221
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 96
Adult Care Home Beds Total: 12
DUPLIN
Kenansville Rehabilitation and Healthcare Center
Kenansville Opco, LLC
Administrator Name: Tabitha T. Moses
MAIL: 209 Beasley Street, , Kenansville, NC, 28349
SITE: 209 Beasley Street, Kenansville, NC, 28349
Contact Name: Tabitha Moses
(919) 851-8000 Fax: (910) 296-1016 NH0308
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 92
Adult Care Home Beds Total: 0
Warsaw Nursing & Rehab Center
RBM Opco of Warsaw LLC
Administrator Name: Momin Afrede

MAIL: 214 Lanefield Road, , Warsaw, NC, 28398

NH0418

SITE: 214 Lanefield Road, Warsaw, NC, 28398

Contact Name: Momin Afrede

Nursing Facility Beds Total: 100

Adult Care Home Beds Total: 0

Expiry Date: 31-Dec-24

(910) 293-3144 Fax: (910) 293-4424

Wallace Rehabilitation and Healthcare Center WLC Opco LLC Administrator Name: Megan Freeman MAIL: 647 S East Railroad St, , Wallace, NC, 24866 SITE: 647 S East Railroad St, Wallace, NC, 24866 Contact Name: Megan Freeman (910) 285-9700 Fax: (910) 285-5156 NH0481 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 80 Adult Care Home Beds Total: 0 **DURHAM** Southpoint Rehabilitation and Healthcare Center Southpoint Opco LLC Administrator Name: Jill O. Strickland MAIL: 6000 Fayetteville Road, , Durham, NC, 27713 SITE: 6000 Fayetteville Road, Durham, NC, 27713 Contact Name: Jill O. Strickland (919) 544-9021 Fax: (919) 544-0345 NH0514 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 140 Adult Care Home Beds Total: 0 **PruittHealth-Durham** PruittHealth-Durham LLC Administrator Name: Tanya McPhaul MAIL: 1626 Jeurgens Court, Legal Dept, Norcross, GA, 30093 SITE: 3100 Erwin Road, Durham, NC, 27705 Contact Name: Tanya McPhaul (919) 383-1546 Fax: (919) 383-0862 NH0412 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 125 Adult Care Home Beds Total: 0 Accordius Health at Rose Manor LLC Accordius Health at Rose Manor LLC Administrator Name: Larry Celeste MAIL: 4230 North Roxboro Street, , Durham, NC, 27704 SITE: 4230 North Roxboro Street, Durham, NC, 27704 Contact Name: Larry Celeste (919) 477-9805 Fax: (919) 479-5261 NH0152 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 111 Adult Care Home Beds Total: 0

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

## As of 08/2024

#### **Durham Nursing & Rehabilitation Center**

Durham Rehab Operations LLC Administrator Name: Donald G. Brown MAIL: 411 South Lasalle Street. , Durham, NC, 27705 SITE: 411 South Lasalle Street, Durham, NC, 27705 Contact Name: Donald G. Brown (919) 383-5521 Fax: (919) 383-8580 NH0136 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 126 Adult Care Home Beds Total: 0 **Pettigrew Rehabilitation Center** Pettigrew Rehabilitation Center LLC Administrator Name: Maya Campbell MAIL: 1515 West Pettigrew Street, , Durham, NC, 27705 SITE: 1515 West Pettigrew Street, Durham, NC, 27705 Contact Name: Maya Campbell (919) 286-0751 Fax: (919) 286-3061 NH0119 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 96 Adult Care Home Beds Total: 0 Hillcrest Convalescent Center Inc Hillcrest Convalescent Center Inc Administrator Name: Thomas Ted SMith MAIL: 1417 West Pettigrew Street, , Durham, NC, 27705 SITE: 1417 West Pettigrew Street, Durham, NC, 27705 Contact Name: William Hoover (919) 286-7705 Fax: (919) 286-3772 NH0038 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 120 Adult Care Home Beds Total: 34 **Treyburn Rehabilitation Center** Treyburn Rehabilitation Center, LLC Administrator Name: Steven Kerley MAIL: 2059 Torredge Road, , Durham, NC, 27712 SITE: 2059 Torredge Road, Durham, NC, 27712 Contact Name: Steven Kerley (919) 714-9380 Fax: (919) 471-0967 NH0562 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 132 Adult Care Home Beds Total: 0

Croasdaile Village
The United Methodist Retirement Homes Inc
Administrator Name: Sanya Alam
MAIL: 2600 Croasdaile Farm Parkway, , Durham, NC, 27705
SITE: 2600 Croasdaile Farm Parkway, Durham, NC, 27705
Contact Name: Sanya Alam
(919) 384-2608 Fax: (919) 384-2503 NH0587
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 104
Adult Care Home Beds Total: 0
Carver Living Center
Carver Healthcare LLC
Administrator Name: Richard B. Vanderhoof
MAIL: 303 East Carver Street, , Durham, NC, 27704
SITE: 303 East Carver Street, Durham, NC, 27704
Contact Name: Richard B. Vanderhoof
(919) 471-3558 Fax: (919) 477-5133 NH0543
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 232
Adult Care Home Beds Total: 0
The Forest at Duke
The Forest at Duke Inc
Administrator Name: Lee Ann Bailey-Clayton
MAIL: 2701 Pickett Road, , Durham, NC, 27705
SITE: 2701 Pickett Road, Durham, NC, 27705
Contact Name: Lee Ann Bailey-Clayton
(919) 419-4090 Fax: (919) 433-2300 NH0536
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 58
Adult Care Home Beds Total: 32
The Cedars of Chapel Hill
The Cedars of Chapel Hill Club Inc
Administrator Name: Gavin Locklear
MAIL: 100 Cedar Club Circle, , Chapel Hill, NC, 27517
SITE: 101 Green Cedar Lane, Chapel Hill, NC, 27517
Contact Name: Gavin Locklear
(919) 259-7903 Fax: (919) 259-7943 NH0615
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 74
Adult Care Home Beds Total: 4
EDGECOMBE

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

Prodigy Transitional Rehab	Mill Creek Center for Nursing and Rehabilitation		
Tarboro Care LLC	Brian Center Lane Operating Company, LLC		
Administrator Name: Robert Vernon	Administrator Name: Megan M. Afton		
MAIL: 911 Western Boulevard, , Tarboro, NC, 27886	MAIL: 141 Washington Ave, , Lawrence, NY, 11559		
SITE: 911 Western Boulevard, Tarboro, NC, 27886	SITE: 4911 Brian Center Lane, Winston-Salem, NC, 27106		
Contact Name: Rob Vernon	Contact Name: Megan M. Afton		
(252) 823-2041 Fax: (252) 823-0904 NH0327	(336) 744-5674 Fax: (336) 744-7569 NH0266		
Expiry Date: 31-Dec-24	Expiry Date: 31-Dec-24		
Nursing Facility Beds Total: 118	Nursing Facility Beds Total: 66		
Adult Care Home Beds Total: 0	Adult Care Home Beds Total: 14		
The Jane at Tarboro	Trinity Glen		
WELL Trevi Albemarle SNF LLC	Lutheran Home - Winston-Salem Inc		
Administrator Name: Craig B. Mitchell	Administrator Name: Logan M. Wilmouth		
MAIL: 200 Trade Street, , Tarboro, NC, 27886	MAIL: 849 Waterworks Road, , Winston-Salem, NC, 27101		
SITE: 200 Trade Street, Tarboro, NC, 27886	SITE: 849 Waterworks Road, Winston-Salem, NC, 27101		
Contact Name: Craig B. Mitchell	Contact Name: Logan Wilmouth		
(252) 823-2799 Fax: (252) 823-6555 NH0352	(336) 595-2166 Fax: (336) 595-2169 NH0058		
Expiry Date: 31-Dec-24	Expiry Date: 31-Dec-24		
Nursing Facility Beds Total: 0	Nursing Facility Beds Total: 117		
Adult Care Home Beds Total: 56	Adult Care Home Beds Total: 0		
Edgecombe Health Center by Harborview	PruittHealth-High Point		
Edgecombe Health Center by Harborview, LLC	PruittHealth-High Point LLC		
Administrator Name: Caroline Flythe	Administrator Name: NONE		
MAIL: 1000 Western Boulevard, , Tarboro, NC, 27886	MAIL: 1626 Jeurgens Court, Legal Dept, Norcross, GA,		
SITE: 1000 Western Boulevard, Tarboro, NC, 27886	30093 SITE: 2560 Advantage Way, Winston Solam, NC, 27102		
Contact Name: Caroline flythe	SITE: 3560 Advantage Way, Winston Salem, NC, 27103		
(252) 823-0401 Fax: (252) 823-1819 NH0288	Contact Name: Lynethia Holley		
Expiry Date: 31-Dec-24	(770) 279-6200 Fax: NH0021		
Nursing Facility Beds Total: 159	Expiry Date: 31-Dec-24		
Adult Care Home Beds Total: 0	Nursing Facility Beds Total: 100		
FORSYTH	Adult Care Home Beds Total: 0		
Piney Grove Nursing and Rehabilitation Center	Brookridge Retirement Community		
Snowshoe LTC Group LLC	Baptist Retirement Homes of North Carolina Inc		
Administrator Name: Everett B. Bays	Administrator Name: Jessica C. Nathan		
MAIL: 728 Piney Grove Road, , Kernersville, NC, 27284	MAIL: 1199 Hayes Forest Drive, , Winston Salem, NC, 27106		
SITE: 728 Piney Grove Road, Kernersville, NC, 27284	SITE: 1199 Hayes Forest Drive, Winston Salem, NC, 27106 Contact Name: Jessica Nathan		
Contact Name: Everett B. Bays			
(336) 996-4038 Fax: (336) 996-6993 NH0256	(336) 759-1044 Fax: (336) 759-9276 NH0067		
Expiry Date: 31-Dec-24	Expiry Date: 31-Dec-24		
Nursing Facility Beds Total: 92	Nursing Facility Beds Total: 77		
Adult Care Home Beds Total: 0	Adult Care Home Beds Total: 36		

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

Willow Valley Center for Nursing and Rehabilitation
West First Street Operating Company, LLC
Administrator Name: Arelys Clark
MAIL: 141 Washington Ave, , Lawrence, NY, 11559
SITE: 1900 West First Street, Winston Salem, NC, 27104
Contact Name: Arelys Clark
(336) 724-2821 Fax: (336) 725-8314 NH0125
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 230
Adult Care Home Beds Total: 0
Salemtowne
Moravian Home, Inc
Administrator Name: Kristin J. Stathers
MAIL: 1000 Salemtowne Drive, , Winston-Salem, NC, 27106
SITE: 1550 Babcock Drive, Winston-Salem, NC, 27106
Contact Name: Kristin J. Stathers
(336) 767-8130 Fax: (336) 767-4090 NH0154
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 100
Adult Care Home Beds Total: 20
Silas Creek Rehabilitation Center
Silas Creek Rehabilitation Center LLC
Administrator Name: John Walder
MAIL: 3350 Silas Creek Parkway, , Winston Salem, NC, 27103
SITE: 3350 Silas Creek Parkway, Winston Salem, NC, 27103
Contact Name: John Walder
(336) 765-0550 Fax: (336) 765-0826 NH0203
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 90
Adult Care Home Beds Total: 0
Cedar Hills Center for Nursing and Rehabilitation
Clemmons Road Operating Company, LLC
Administrator Name: Jacqueline M. Livermore
MAIL: 141 Washington Ave, , Lawrence, NY, 11559
SITE: 3905 Clemmons Road, Clemmons, NC, 27012
Contact Name: Jacqueline Livermore
(336) 575-4315 Fax: (336) 766-8666 NH0404
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 94
Adult Care Home Beds Total: 0

Summerstone Health and Rehab Center
Liberty Commons of Kernersville, LLC
Administrator Name: Susan C. Hollett
MAIL: 485 Veterans Way, , Kernersville, NC, 27284
SITE: 485 Veterans Way, Kernersville, NC, 27284
Contact Name: Susan C. Hollett
(336) 515-3000 Fax: (336) 315-3036 NH0423
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 120
Adult Care Home Beds Total: 0
The Oaks
LCN & RC OF THE OAKS LLC
Administrator Name: Garrett
MAIL: 901 Bethesda Road, , Winston Salem, NC, 27103
SITE: 901 Bethesda Road, Winston Salem, NC, 27103
Contact Name: Garrett
(336) 768-2211 Fax: (336) 774-6545 NH0439
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 131
Adult Care Home Beds Total: 0
Arbor Acres United Methodist Retirement Community Inc
Arbor Acres United Methodist Retirement Community Inc
Administrator Name: Shonette Pettiford
MAIL: 1250 Arbor Road, , Winston Salem, NC, 27104
SITE: 1250 Arbor Road, Winston Salem, NC, 27104
Contact Name: Shonette Pettiford
(336) 724-7921 Fax: (336) 721-1042 NH0378
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 83
Adult Care Home Beds Total: 106
Homestead Hills
Homestead Hill Retirement Limited Partnership
Administrator Name: Raven Jackson
MAIL: 2101 Homestead Hills Drive, , Winston Salem, NC, 27103
SITE: 2101 Homestead Hills Drive, Winston Salem, NC, 27103
Contact Name: Raven Jackson
(336) 354-0820 Fax: (336) 659-8506 NH0633
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 40
Adult Care Home Beds Total: 0

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

Louisburg Healthcare & Rehabilitation Center				
Liberty Commons Nsg and Rehab Ctr of Franklin Co, LLC				
Administrator Name: Deidra A. Sykes				
MAIL: 202 Smoketree Way, , Louisburg, NC, 27549				
SITE: 202 Smoketree Way, Louisburg, NC, 27549				
Contact Name: Deidra Sykes				
(919) 496-2188 Fax: (919) 496-3364 NH0264				
Expiry Date: 31-Dec-24				
Nursing Facility Beds Total: 92				
Adult Care Home Beds Total: 60				
GASTON				
Carolina Care Health and Rehabilitation				
Carolina Care Health and Rehabilitation LLC				
Administrator Name: Travis Alfaro				
MAIL: 111 Harrelson Road, , Cherryville, NC, 28021				
SITE: 111 Harrelson Road, Cherryville, NC, 28021				
Contact Name: Travis Alfaro				
(704) 435-4161 Fax: (704) 435-8979 NH0287				
Expiry Date: 31-Dec-24				
Nursing Facility Beds Total: 107				
Adult Care Home Beds Total: 12				
Covenant Village Inc				
Covenant Village Inc				
Administrator Name: Kevin T. Stewart				
MAIL: 1351 Robinwood Road, , Gastonia, NC, 28054				
SITE: 1351 Robinwood Road, Gastonia, NC, 28054				
Contact Name: Kim Kling				
(704) 867-2319 Fax: (704) 854-8738 NH0332				
Expiry Date: 31-Dec-24				
Nursing Facility Beds Total: 38				
Adult Care Home Beds Total: 42				
Highland Heights Health and Rehabilitation				
Accordius Health at Gastonia LLC				
Administrator Name: Shannon Brown				
MAIL: 416 North Highland Street, , Gastonia, NC, 28052				
SITE: 416 North Highland Street, Gastonia, NC, 28052				
Contact Name: Shannon Brown				
(704) 864-0371 Fax: (704) 288-0441 NH0305				
Expiry Date: 31-Dec-24				
Nursing Facility Beds Total: 118				
Adult Care Home Beds Total: 0				

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

## As of 08/2024

The Greens at Gastonia Peak Resources-Gastonia			
Greens at Gastonia LLC	Century Care of Gastonia Inc		
Administrator Name: Dereca Bryant	Administrator Name: Kimberly K. Poovey		
MAIL: 969 Cox Road, , Gastonia, NC, 28054	MAIL: 2780 X-Ray Drive, , Gastonia, NC, 28054		
SITE: 969 Cox Road, Gastonia, NC, 28054	SITE: 2780 X-Ray Drive, Gastonia, NC, 28054		
Contact Name: Dereca Bryant	Contact Name: Kimberly Poovey		
(704) 866-8596 Fax: (704) 866-8677 NH0228	(704) 861-0981 Fax: (704) 861-0388 NH0402		
Expiry Date: 31-Dec-24	Expiry Date: 31-Dec-24		
Nursing Facility Beds Total: 162	Nursing Facility Beds Total: 104		
Adult Care Home Beds Total: 0	Adult Care Home Beds Total: 0		
The Ivy at Gastonia LLC	Peak Resources-Cherryville		
The Ivy at Gastonia LLC	Century Care of Cherryville Inc		
Administrator Name: Casey Christopher	Administrator Name: Johnny L. Poovey Jr.		
MAIL: 4414 Wilkinson Boulevard, , Gastonia, NC, 28056 SITE: 4414 Wilkinson Boulevard, Gastonia, NC, 28056	MAIL: 7615 Dallas Cherryville Highway, , Cherryville, NC, 28021		
Contact Name: Ryan Coane	SITE: 7615 Dallas Cherryville Highway, Cherryville, NC, 28021		
(704) 824-5550 Fax: (704) 824-8245 NH0468	Contact Name: Johnny L. Poovey Jr.		
Expiry Date: 31-Dec-24	(704) 435-6029 Fax: (704) 435-8820 NH0403		
Nursing Facility Beds Total: 50	Expiry Date: 31-Dec-24		
Adult Care Home Beds Total: 0	Nursing Facility Beds Total: 70		
Courtland Terrace	Adult Care Home Beds Total: 57		
Caromont Health Services Inc	Gastonia Health & Rehab Center Gastonia Health & Rehab Center, LLC		
Administrator Name: Beverly D. Young			
MAIL: 2300 Aberdeen Boulevard, , Gastonia, NC, 28054	Administrator Name: Shonda L. Wingate		
SITE: 2300 Aberdeen Boulevard, Gastonia, NC, 28054	MAIL: 1770 Oak Hollow Road, , Gastonia, NC, 28054 SITE: 1770 Oak Hollow Road, Gastonia, NC, 28054		
Contact Name: Beverly D. Young			
(704) 834-4806 Fax: (704) 834-4812 NH0494	Contact Name: Shonda L. Wingate		
Expiry Date: 31-Dec-24	(704) 853-8175 Fax: (704) 852-4045 NH0547		
Nursing Facility Beds Total: 77	Expiry Date: 31-Dec-24		
Adult Care Home Beds Total: 19	Nursing Facility Beds Total: 60		
Stanley Total Living Center Inc	Adult Care Home Beds Total: 40		
Stanley Total Living Center Inc	Belaire Health Care Center		
Administrator Name: Jennifer Defelice	Belaire Operator LLC Administrator Name: Dennis Carver MAIL: 2065 Lyon Street, , Gastonia, NC, 28052 SITE: 2065 Lyon Street, Gastonia, NC, 28052 Contact Name: Dennis Carver		
MAIL: P.O. Box 489, , Stanley, NC, 28164			
SITE: 514 Old Mt Holly Road, Stanley, NC, 28164			
Contact Name: Janet Estep			
(704) 263-1986 Fax: (704) 263-8959 NH0386			
Expiry Date: 31-Dec-24	(704) 867-7300 Fax: (704) 867-3939 NH0561		
Nursing Facility Beds Total: 106	Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 80		
Adult Care Home Beds Total: 40			
	nursing facility deus 10tal: 80		

GATES

Adult Care Home Beds Total: 0

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

## As of 08/2024

#### **Gates Health and Rehabilitation Center**

Down East Living & Rehab Center LLC Administrator Name: Patrick Lancaster MAIL: 38 Carters Road. , Gatesville, NC, 27938 SITE: 38 Carters Road, Gatesville, NC, 27938 Contact Name: Patrick Lancaster (252) 357-2124 Fax: (252) 436-8692 NH0513 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 70 Adult Care Home Beds Total: 10

## GRAHAM

#### **Graham Healthcare and Rehabilitation Center**

Granite Falls LTC LLC Administrator Name: Melissa D. Ross-Merkel MAIL: 811 Snowbird Road, , Robbinsville, NC, 28771 SITE: 811 Snowbird Road, Robbinsville, NC, 28771 Contact Name: Melissa D. Ross-Merkel (828) 479-8421 Fax: (828) 479-4269 NH0495 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 80 Adult Care Home Beds Total: 23

#### GRANVILLE

## **Oxford Health and Rehabilitation Center**

Oxford Operator LLC Administrator Name: Felton Wooten MAIL: 500 Prospect Avenue, , Oxford, NC, 27565 SITE: 500 Prospect Avenue, Oxford, NC, 27565 Contact Name: Felton Wooten (919) 693-1531 Fax: (919) 693-0632 NH0447 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 160 Adult Care Home Beds Total: 20

#### GREENE

## **Greendale Forest Nursing and Rehabilitation Center**

River Neuse Group LLC Administrator Name: Caroline Mumford MAIL: 1304 South East Second Street, , Snow Hill, NC, 28580 SITE: 1304 South East Second Street, Snow Hill, NC, 28580 Contact Name: Caroline Taylor Mumford (252) 747-8126 Fax: (252) 747-8255 NH0373 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 115 Adult Care Home Beds Total: 17

٦	TI	LF	$\mathbf{n}$	D	D
*				к	
	v		~		~

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

## As of 08/2024

#### Friends Homes at Guilford

Friends Homes Inc Administrator Name: James A. Newman Jr. MAIL: 925 New Garden Rd., , Greensboro, NC, 27410 SITE: 925 New Garden Rd., Greensboro, NC, 27410 Contact Name: James A. Newman Jr. (336) 646-2098 Fax: (336) 854-9137 NH0190 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 69 Adult Care Home Beds Total: 60 Westchester Manor at Providence Place PPRC Nursing Home Inc Administrator Name: Dawn B. Cutts MAIL: 1795 Westchester Drive, , High Point, NC, 27262 SITE: 1795 Westchester Drive, High Point, NC, 27262 Contact Name: Dawn B. Cutts (336) 884-2222 Fax: (336) 888-4645 NH0155 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 129 Adult Care Home Beds Total: 0 WhiteStone: A Masonic and Eastern Star Community Masonic and Eastern Star Home of North Carolina Inc Administrator Name: Joshua Hillegass MAIL: 700 South Holden Road, , Greensboro, NC, 27407 SITE: 700 South Holden Road, Greensboro, NC, 27407 Contact Name: Joshua Hillegass (336) 547-2984 Fax: (336) 547-2999 NH0141 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 88 Adult Care Home Beds Total: 36 Maryfield Nursing Home Maryfield Incorporated Administrator Name: Vonda S. Hollingsworth MAIL: 109 Penny Road, , High Point, NC, 27260 SITE: 1315 Greensboro Road, High Point, NC, 27260 Contact Name: Vonda S. Hollingsworth (336) 821-6506 Fax: (336) 886-4036 NH0005 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 125 Adult Care Home Beds Total: 36

Clapps Nursing Center Inc
Clapp's Nursing Center Inc
Administrator Name: Madison B. Jones
MAIL: 5229 Appomatox Rd., , Pleasant Garden, NC, 27313
SITE: 5229 Appomatox Rd., Pleasant Garden, NC, 27313
Contact Name: Madison Jones
(336) 674-2252 Fax: (336) 674-9531 NH0017
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 118
Adult Care Home Beds Total: 0
Piedmont Hills Center for Nursing and Rehabilitation
Holden Road Operating Company, LLC
Administrator Name: Jennifer Regan
MAIL: 141 Washington Ave, , Lawrence, NY, 11559
SITE: 109 South Holden Road, Greensboro, NC, 27407
Contact Name: Jennifer Regan
(336) 522-5600 Fax: (336) 522-5644 NH0274
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 126
Adult Care Home Beds Total: 0
Linden Place Center for Nursing and Rehabilitation
Carolina Street Operating Company, LLC
Administrator Name: Malik Simpson
MAIL: 141 Washington Ave, , Lawrence, NY, 11559
SITE: 1201 Carolina Street, Greensboro, NC, 27401
Contact Name: Malik Simpson
(336) 522-5700 Fax: (336) 522-5636 NH0275
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 105
Adult Care Home Beds Total: 0
Guilford Health Care Center
Guilford Operator LLC
Administrator Name: Jacob Lane
MAIL: 2041 Willow Road, , Greensboro, NC, 27406
SITE: 2041 Willow Road, Greensboro, NC, 27406
Contact Name: Jacob Lane
(732) 905-6440 Fax: (336) 274-5924 NH0564
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 110
Adult Care Home Beds Total: 0

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

# As of 08/2024

Adams Farm Living & Rehabilitation	The Shannon Gray Rehabilitation & Recovery Center
Adams Farm Living Inc	Greatest Generation Inc
Administrator Name: Sherri Ingram-Bass	Administrator Name: Shannon L. Everhart
MAIL: 5100 Mackay Road, , Jamestown, NC, 27282	MAIL: 2005 Shannon Gray Court, , Jamestown, NC, 27282
SITE: 5100 Mackay Road, Jamestown, NC, 27282	SITE: 2005 Shannon Gray Court, Jamestown, NC, 27282
Contact Name: Sherri Ingram-Bass	Contact Name: Shannon L. Everhart
(336) 855-5596 Fax: (336) 500-8304 NH0581	(336) 307-4729 Fax: (336) 307-4961 NH0627
Expiry Date: 31-Dec-24	Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 120	Nursing Facility Beds Total: 150
Adult Care Home Beds Total: 0	Adult Care Home Beds Total: 0
Well-Spring	Camden Health and Rehabilitation
Well-Spring Retirement Community Inc	Camden Health and Rehabilitation, LLC
Administrator Name: Michael A. Jones Jr.	Administrator Name: Garrett J. Saake
MAIL: 3560 Wildflower Drive, , Greensboro, NC, 27410	MAIL: 1 Marithe Ct., , Greensboro, NC, 27407
SITE: 4100 Well-Spring Drive, Greensboro, NC, 27410	SITE: 1 Marithe Ct., Greensboro, NC, 27407
Contact Name: Michael Jones	Contact Name: Garrett Saake
(336) 545-5435 Fax: (336) 545-5384 NH0546	(336) 852-9700 Fax: (336) 852-9994 NH0624
Expiry Date: 31-Dec-24	Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 70	Nursing Facility Beds Total: 135
Adult Care Home Beds Total: 72	Adult Care Home Beds Total: 0
Friends Homes West	Ashton Health and Rehabilitation
Friends Homes Inc	Ashton Health and Rehabilitation, LLC
Administrator Name: Matthew H. Beam	Administrator Name: Ellen B. Rich
MAIL: 6100 West Friendly Avenue, , Greensboro, NC,	MAIL: 5533 Burlington Road, , Mcleansville, NC, 27301
27410	SITE: 5533 Burlington Road, Mcleansville, NC, 27301
SITE: 6100 West Friendly Avenue, Greensboro, NC, 27410	Contact Name: Ellen Rich
Contact Name: Hannah Davis	(336) 698-0045 Fax: (336) 698-0993 NH0625
(336) 646-2098 Fax: (336) 369-4335 NH0554	Expiry Date: 31-Dec-24
Expiry Date: 31-Dec-24	Nursing Facility Beds Total: 134
Nursing Facility Beds Total: 40	Adult Care Home Beds Total: 0
Adult Care Home Beds Total: 40	River Landing at Sandy Ridge
Maple Grove Health and Rehabilitation Center	The Presbyterian Homes Inc
Snowshoe LTC Group LLC	Administrator Name: Megan Brown
Administrator Name: Kathleen Wilson	MAIL: 1575 John Knox Drive, , Colfax, NC, 27235
MAIL: 308 West Meadowview Road, , Greensboro, NC, 27406	SITE: 1575 John Knox Drive, Colfax, NC, 27235
SITE: 308 West Meadowview Road, Greensboro, NC, 27406	Contact Name: Megan M Brown
Contact Name: Kathleen Wilson	(336) 480-5672 Fax: (336) 668-4911 NH0612
(336) 230-0534 Fax: (336) 230-1664 NH0552	Expiry Date: 31-Dec-24
Expiry Date: 31-Dec-24	Nursing Facility Beds Total: 60
Nursing Facility Beds Total: 210	Adult Care Home Beds Total: 56
Adult Care Home Beds Total: 40	

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

## As of 08/2024

# Heartland Living & Rehab @ The Moses H Cone Mem<br/>HospHeartland of Greensboro IncAdministrator Name: Jeffrey D. BlakeMAIL: 1131 North Church Street, , Greensboro, NC, 27401SITE: 1131 North Church Street, Greensboro, NC, 27401Contact Name: Jeffrey Blake(336) 358-5100Fax: (336) 358-5110NH0601Expiry Date: 31-Dec-24Nursing Facility Beds Total: 107Adult Care Home Beds Total: 37HALIFAXBryan Health and RehabOur Community Hospital Inc

Administrator Name: Kim A Stallings MAIL: P.O. Box 405, , Scotland Neck, NC, 27874 SITE: 921 Jr High School Road, Scotland Neck, NC, 27874 Contact Name: Kim A Stallings (252) 826-4144 Fax: (252) 826-2181 NH0656 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 60 Adult Care Home Beds Total: 20 Signature Healthcare of Roanoke Rapids LP Roanoke Rapids LLC Administrator Name: Ingrid L. Houston MAIL: 305 East Fourteenth Street, , Roanoke Rapids, NC, 27870 SITE: 305 East Fourteenth Street, Roanoke Rapids, NC, 27870 Contact Name: Ingrid L. Houston (252) 537-6181 Fax: (252) 535-5132 NH0312 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 108 Adult Care Home Beds Total: 0

Scotland Manor Health and Rehabilitation Center
Accordius Health at Scotland Manor LLC
Administrator Name: Joan Garvey
MAIL: 920 Junior High School Road, , Scotland Neck, NC 27874
SITE: 920 Junior High School Road, Scotland Neck, NC, 27874
Contact Name: Joan Garvey
(252) 578-2012 Fax: (252) 304-3636 NH0314
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 62
Adult Care Home Beds Total: 0
Enfield Oaks Nursing and Rehabilitation Center
Eagle Peak LTC Group
Administrator Name: N A
MAIL: 1435 Highway 258 North, , Kinston, NC, 28504
SITE: 208 Cary Street, Enfield, NC, 27823
Contact Name: Max Mason
(919) 779-5095 Fax: (252) 445-1924 NH0037
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 63
Adult Care Home Beds Total: 0
Liberty Commons Nsg and Rehab Ctr of Halifax County
Liberty Commons Nsg and Rehab Ctr of Halifax Cty LLC
Administrator Name: Veronica D. Slade
MAIL: 101 Caroline Avenue, , Weldon, NC, 27890
SITE: 101 Caroline Avenue, Weldon, NC, 27890
Contact Name: Veronica D. Slade
(252) 536-4817 Fax: (252) 536-5560 NH0469
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 50
Adult Care Home Beds Total: 25
HARNETT
The Carrolton of Dunn
The Carrolton of Dunn, LLC
Administrator Name: Danisha Lyles
MAIL: 711 Susan Tart Road, , Dunn, NC, 28334

SITE: 711 Susan Tart Road, Dunn, NC, 28334

Contact Name: Danisha Lyles

(910) 892-8843 Fax: (910) 892-6235 NH0482

Expiry Date: 31-Dec-24

Nursing Facility Beds Total: 100

Adult Care Home Beds Total: 8

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

# As of 08/2024

Lillington Health and Rehabilitation Center	•
Lillington Operator LLC	
Administrator Name: Semica N. Parker	
MAIL: 1995 E. Cornelius Harnett Blvd, , Lil 27546	llington, NC,
SITE: 1995 E. Cornelius Harnett Blvd, Lillin	ngton, NC, 27546
Contact Name: Semica N. Parker	
(910) 985-0636 Fax: (910) 983-4595 N	NH0444
Expiry Date: 31-Dec-24	
Nursing Facility Beds Total: 129	
Adult Care Home Beds Total: 106	
Emerald Health & Rehab Center	
Harnett Healthcare Group LLC	
Administrator Name: Brian Joiner	
MAIL: 54 Red Mulberry Way, , Lillington, I	NC, 27546
SITE: 54 Red Mulberry Way, Lillington, NC	С, 27546
Contact Name: Brian Joiner	
(336) 983-4900 Fax: (910) 814-8031 N	NH0144
Expiry Date: 31-Dec-24	
Nursing Facility Beds Total: 96	
Adult Care Home Beds Total: 0	
Harnett Woods Nursing and Rehabilitation	Center
Redwood LTC Group LLC	
Administrator Name: Ashley Neenan	
MAIL: P.O. Box 1597, , Dunn, NC, 28334	
SITE: 604 Lucas Road, Dunn, NC, 28334	
Contact Name: Ashley Neenan	
(910) 891-4600 Fax: (910) 891-4903 M	NH0576
Expiry Date: 31-Dec-24	
Nursing Facility Beds Total: 100	
Adult Care Home Beds Total: 0	
HAYWOOD	
Skyland Terrace and Rehabilitation	
Coolgate, Inc.	
Administrator Name: Sophia H. Brown	
MAIL: 516 Wall Street, , Waynesville, NC,	
SITE: 516 Wall Street, Waynesville, NC, 28	786
Contact Name: Sophia Brown	
	NH0520
Expiry Date: 31-Dec-24	

Nursing Facility Beds Total: 90

Adult Care Home Beds Total: 5

	Maggie Valley Nursing and Rehab
	Maggie Valley Operations LLC
	Administrator Name: Brenda K. Silvers
	MAIL: 75 Fisher Loop, , Maggie Valley, NC, 28751
	SITE: 75 Fisher Loop, Maggie Valley, NC, 28751
	Contact Name: Brenda K. Silvers
	(828) 926-4326 Fax: (828) 566-3005 NH0081
	Expiry Date: 31-Dec-24
	Nursing Facility Beds Total: 114
	Adult Care Home Beds Total: 0
	Smoky Mountain Health and Rehabilitation Center
	Snowshoe LTC Group LLC
	Administrator Name: Shayna Walters
	MAIL: 1349 Crabtree Road, , Waynesville, NC, 28785
	SITE: 1349 Crabtree Road, Waynesville, NC, 28785
	Contact Name: Shayna Walters
	(828) 454-9260 Fax: (828) 454-6998 NH0342
	Expiry Date: 31-Dec-24
	Nursing Facility Beds Total: 50
	Adult Care Home Beds Total: 0
	Autumn Care of Waynesville
	Autumn Corporation
	Administrator Name: Fred V. Collins
	MAIL: 360 Old Balsam Road, , Waynesville, NC, 28786
	SITE: 360 Old Balsam Rd., Waynesville, NC, 28786
	Contact Name: Fred V. Collins
	(336) 983-4900 Fax: (828) 452-5930 NH0366
	Expiry Date: 31-Dec-24
	Nursing Facility Beds Total: 90
	Adult Care Home Beds Total: 10
	Silver Bluff LLC
	Silver Bluff LLC
	Administrator Name: Lisa L. Leatherwood
	MAIL: 100 Silver Bluff Drive, , Canton, NC, 28716
	SITE: 100 Silver Bluff Drive, Canton, NC, 28716
	Contact Name: Lisa Leatherwood
	(828) 648-2044 Fax: (828) 648-2065 NH0458
	Expiry Date: 31-Dec-24
	Nursing Facility Beds Total: 131
	Adult Care Home Beds Total: 13
Η	ENDERSON

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

# As of 08/2024

The Laurels of Hendersonville	Valley Hill Health & Rehab Center
Laurel Health Care Company of North Carolina Inc	Valley Hill Health & Rehab Center, LLC
Administrator Name: Preston R. Harness	Administrator Name: Scarlet S. Gardner
MAIL: 290 Clear Creek Road, , Hendersonville, NC, 28792	MAIL: 1510 Hebron Road, , Hendersonville, NC, 28739
SITE: 290 Clear Creek Road, Hendersonville, NC, 28792	SITE: 1510 Hebron Road, Hendersonville, NC, 28739
Contact Name: Jonah Egbert	Contact Name: Scarlet Garndner
(828) 257-6805 Fax: (828) 696-9246 NH0480	(828) 693-8461 Fax: (828) 693-1905 NH0273
Expiry Date: 31-Dec-24	Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 100	Nursing Facility Beds Total: 150
Adult Care Home Beds Total: 20	Adult Care Home Beds Total: 0
The Greens at Hendersonville	Carolina Village Inc
Greens at Hendersonville LLC	Carolina Village Inc
Administrator Name: Melissa E. Pate	Administrator Name: Alex Tucker
MAIL: 1870 Pisgah Drive, , Hendersonville, NC, 28791	MAIL: 600 Carolina Village Road Suite Z, , Hendersonville, NC, 28792
SITE: 1870 Pisgah Drive, Hendersonville, NC, 28791 Contact Name: Melissa Pate	SITE: 600 Carolina Village Road, Hendersonville, NC, 28792
(828) 693-9796 Fax: (828) 693-1321 NH0470	Contact Name: Alex Tucker
Expiry Date: 31-Dec-24	(828) 692-6275 Fax: (828) 692-6273 NH0174
Nursing Facility Beds Total: 120	Expiry Date: 31-Dec-24
Adult Care Home Beds Total: 0	Nursing Facility Beds Total: 58
Orchard Valley Health and Rehabilitation	Adult Care Home Beds Total: 0
Hendersonville NC Opco LLC	Life Care Center of Hendersonville
Administrator Name: Steve D. Hardin Jr.	Hendersonville Medical Investors LLC
MAIL: 200 Heritage Way, , Hendersonville, NC, 28791	Administrator Name: Olivia N. Burnett
SITE: 200 Heritage Way, Hendersonville, NC, 28791	MAIL: 400 Thompson Street, , Hendersonville, NC, 28792
Contact Name: Steve D. Hardin Jr.	SITE: 400 Thompson Street, Hendersonville, NC, 28792
(828) 693-5849 Fax: (828) 697-5707 NH0382	Contact Name: Oliva N. Burnett
Expiry Date: 31-Dec-24	(828) 697-4348 Fax: (828) 696-1668 NH0565
Nursing Facility Beds Total: 134	Expiry Date: 31-Dec-24
Adult Care Home Beds Total: 0	Nursing Facility Beds Total: 80
The Lodge at Mills River	Adult Care Home Beds Total: 0
Beystone Health & Rehabilitation Company	Hendersonville Health and Rehabilitation
Administrator Name: Matthew T. Graham	Hendersonville Health and Rehabilitation LLC
MAIL: 5593 Old Haywood Road, , Mills River, NC, 28759	Administrator Name: Andrew Sprenger
SITE: 5593 Old Haywood Road, Mills River, NC, 28759	MAIL: 104 College Drive, , Flat Rock, NC, 28731
Contact Name: Matthew T. Graham	SITE: 104 College Drive, Flat Rock, NC, 28731
(828) 684-4857 Fax: (828) 654-8966 NH0394	Contact Name: Andrew Sprenger
Expiry Date: 31-Dec-24	
Nursing Facility Beds Total: 50	(828) 693-8600 Fax: (828) 693-1955 NH0586
Adult Care Home Beds Total: 0	Expiry Date: 31-Dec-24
	Nursing Facility Beds Total: 130 Adult Care Home Beds Total: 0
	Auult Cale Hollie Deus 101al. U

Page: 26

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

## As of 08/2024

#### **Fletcher Rehabilitation and Healthcare Center**

Fletcher Operator LLC Administrator Name: Timothy W. Lane MAIL: 86 Old Airport Road, , Fletcher, NC, 28732 SITE: 86 Old Airport Road, Fletcher, NC, 28732 Contact Name: Timothy Lane (828) 654-9060 Fax: (828) 654-9071 NH0608 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 90 Adult Care Home Beds Total: 0

## HERTFORD

#### Ahoskie Health and Rehabilitation Center

Accordius Health at Creekside Care LLC Administrator Name: Shanell Price MAIL: 604 Stokes Street East, Ahoskie, NC, 27910 SITE: 604 Stokes Street East, Ahoskie, NC, 27910 Contact Name: Shanell Price (252) 332-2126 Fax: (252) 272-6277 NH0299 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 151 Adult Care Home Beds Total: 0

#### HOKE

## Autumn Care of Raeford

Autumn Corporation Administrator Name: Lalister B. Bryant, III MAIL: 1206 N. Fulton Street, , Raeford, NC, 28376 SITE: 1206 North Fulton Street, Raeford, NC, 28376 Contact Name: Lalister B. Bryant, III (910) 875-4280 Fax: (910) 875-7059 NH0438 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 132 Adult Care Home Beds Total: 0

#### IREDELL

#### **Glenwood Rehabilitation and Nursing Center**

The Citadel Mooresville LLC Administrator Name: Tanya Rocquemore MAIL: 550 Glenwood Drive, , Mooresville, NC, 28115 SITE: 550 Glenwood Drive, Mooresville, NC, 28115 Contact Name: Tanya Rocquemore (704) 664-7494 Fax: (704) 664-8454 NH0435 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 130 Adult Care Home Beds Total: 30

The Greens at Maple Leaf	
Greens at Maple Leaf LLC	
Administrator Name: Jennifer K. Simon	
MAIL: 1101 Maple Care Lane, , Statesville	, NC, 28625
SITE: 1101 Maple Care Lane, Statesville, N	IC, 28625
Contact Name: Jennifer Simon	
(704) 871-0705 Fax: (704) 871-0708	NH0488
Expiry Date: 31-Dec-24	
Nursing Facility Beds Total: 94	
Adult Care Home Beds Total: 8	
Accordius Health at Statesville	
Accordius Health at Statesville LLC	
Administrator Name: Darryl P. Ehlers	
MAIL: 980 Sylvan Ave., , Englewood Cliff	s, NJ, 07632
SITE: 520 Valley Street, Statesville, NC, 28	3677
Contact Name: Rachel Kosowsky	
(201) 928-7816 Fax:	NH0176
Expiry Date: 31-Dec-24	
Nursing Facility Beds Total: 147	
Adult Care Home Beds Total: 0	
Mooresville Rehabilitation and Nursing Ce	nter
Accordius Health at Mooresville LLC	
Administrator Name: Carlton P. Smalls	
MAIL: 752 East Center Avenue, , Mooresv	ille, NC, 28115
SITE: 752 East Center Avenue, Mooresville	e, NC, 28115
Contact Name: Carlton P. Smalls	
(704) 800-0570 Fax: (704) 800-0572	NH0238
Expiry Date: 31-Dec-24	
Nursing Facility Beds Total: 131	
Adult Care Home Beds Total: 0	
Autumn Care of Statesville	
Autumn Care of Statesville, LLC	
Administrator Name: Tambria L. Rabuck	
MAIL: 2001 VanHaven Drive, , Statesville,	NC, 28625
SITE: 2001 VanHaven Drive, Statesville, N	C, 28625
Contact Name: Tambria Rabuck	
(704) 883-9700 Fax: (704) 872-9362	NH0599
Expiry Date: 31-Dec-24	
Nursing Facility Beds Total: 103	
Adult Care Home Beds Total: 10	
JACKSON	

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

## As of 08/2024

Vero	Health	&	Rehab	of	Svlva
,	II Cuitii	~	Ittitut	•••	D JI M

Vero Health X, LLC Administrator Name: Teddie D. Simmons MAIL: 417 Cloverdale Road, , Sylva, NC, 28779 SITE: 417 Cloverdale Road, Sylva, NC, 28779 Contact Name: Teddie D. Simmons (828) 631-1600 Fax: (828) 631-1641 NH0623 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 106 Adult Care Home Beds Total: 0 **Skyland Care Center** BT2 Inc Administrator Name: Melissa Dills MAIL: 193 Asheville Hwy., , Sylva, NC, 28779 SITE: 193 Asheville Hwy., Sylva, NC, 28779 Contact Name: Melissa Dills (828) 586-8935 Fax: (828) 880-8005 NH0168 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 94 Adult Care Home Beds Total: 0

#### JOHNSTON

**Smithfield Manor Nursing and Rehab** Smithfield Manor Inc Administrator Name: Katrina Stevens MAIL: P.O. Box 1940, , Smithfield, NC, 27577 SITE: 902 Berkshire Road, Smithfield, NC, 27577 Contact Name: Nathan Arnn (919) 934-3171 Fax: (919) 934-5960 NH0182 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 160 Adult Care Home Beds Total: 20 **Clayton Rehabilitation Healthcare Center** CLT Opco LLC Administrator Name: Alan D. Wrench MAIL: 204 Dairy Road, , Clayton, NC, 27520 SITE: 204 Dairy Road, Clayton, NC, 27520 Contact Name: Alan D. Wrench (919) 553-8232 Fax: (919) 553-8432 NH0475 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 90 Adult Care Home Beds Total: 0

Barbour Court Nursing and Rehabilitation Center
Birch LTC Group
Administrator Name: Truman Vereen
MAIL: 515 Barbour Road, , Smithfield, NC, 27577
SITE: 515 Barbour Road, Smithfield, NC, 27577
Contact Name: Truman Vereen
(919) 934-6017 Fax: (919) 934-2057 NH0371
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 165
Adult Care Home Beds Total: 0
Liberty Commons Nsg and Rehab Ctr of Johnston Cty
Liberty Commons Nsg & Rehab Ctr of Johnston Cty LLC
Administrator Name: Janet L. Hogue
MAIL: 2315 Highway 242 North, , Benson, NC, 27504
SITE: 2315 Highway 242 North, Benson, NC, 27504
Contact Name: Janet Hogue
(919) 207-1717 Fax: (919) 207-1529 NH0606
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 100
Adult Care Home Beds Total: 60
Springbrook Nursing and Rehabilitation Center
Everest Long Term Care LLC
Administrator Name: Michelle Batchelor
MAIL: 195 Springbrook Avenue, , Clayton, NC, 27520
SITE: 195 Springbrook Avenue, Clayton, NC, 27520
Contact Name: Michelle Batchelor
(919) 550-7200 Fax: (919) 550-7299 NH0646
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 100
Adult Care Home Beds Total: 0
JONES
Brook Stone Living Center
AM Health Care Services Inc
Administrator Name: Juanita McIntosh
MAIL: P.O. Box 429, , Pollocksville, NC, 28573
SITE: 8990 Hwy 17 South, Pollocksville, NC, 28573
Contact Name: Juanita McIntosh
(252) 224-0112 Fax: (252) 224-1076 NH0508

Expiry Date: 31-Dec-24

Nursing Facility Beds Total: 80

Adult Care Home Beds Total: 20

## LEE

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

# As of 08/2024

**Signature Healthcare of Kinston** 

Westfield Rehabilitation and Health Center
Liberty Commons Nsg and Rehab Ctr of Lee Tramway LLC
Administrator Name: Patience Osano
MAIL: 3100 Tramway Road, , Sanford, NC, 27330
SITE: 3100 Tramway Road, Sanford, NC, 27330
Contact Name: Patience osano
(919) 895-6801 Fax: (919) 775-3502 NH0285
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 83
Adult Care Home Beds Total: 0
Sanford Health & Rehabilitation Co
Sanford Health & Rehabilitation Co LLC
Administrator Name: Hannah R. McIntyre
MAIL: 2702 Farrell Road, , Sanford, NC, 27330
SITE: 2702 Farrell Road, Sanford, NC, 27330
Contact Name: Hannah R. McIntyre
(919) 776-9602 Fax: (919) 777-0753 NH0286
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 131
Adult Care Home Beds Total: 0
Liberty Commons Nsg and Rehab Ctr of Lee County LLC
Liberty Commons Nsg and Rehab Ctr of Lee Cty LLC
Administrator Name: William Watson
MAIL: 310 Commerce Drive, , Sanford, NC, 27332
SITE: 310 Commerce Drive, Sanford, NC, 27332
Contact Name: William Watson
(919) 499-2206 Fax: (919) 499-1858 NH0613
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 80
Adult Care Home Beds Total: 0
LENOIR
NC State Veterans Home-Kinston
NC Dept of Military&Veterans Aff NC Div of Veterans Aff
Administrator Name: Bonnie Ard
MAIL: 4001 Mail Service Center, , Raleigh, NC, 27699

SITE: 2150 Hull Road, Kinston, NC, 28504

(252) 939-8006 Fax: (252) 939-8104

Contact Name: Bonnie Ard

Expiry Date: 31-Dec-24

Nursing Facility Beds Total: 100

Adult Care Home Beds Total: 0

LP Kinston LLC
Administrator Name: Steven G. Jones
MAIL: 907 Cunningham Road, , Kinston, NC, 28501
SITE: 907 Cunningham Road, Kinston, NC, 28501
Contact Name: Steven G. Jones
(252) 527-5146 Fax: (252) 527-2884 NH0309
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 106
Adult Care Home Beds Total: 0
Harmony Hall Nursing and Rehabilitation Center
Redwood LTC Group LLC
Administrator Name: HOPE VICK
MAIL: 312 Warren Avenue, , Kinston, NC, 28501
SITE: 312 Warren Avenue, Kinston, NC, 28501
Contact Name: Hope Vick
(252) 523-0082 Fax: (252) 523-7474 NH0355
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 175
Adult Care Home Beds Total: 0
LINCOLN
The Greens at Lincolnton
Greens at Lincolnton LLC
Administrator Name: Sherri L. Stoltzfus
Administrator Name: Sherri L. Stoltzfus MAIL: 515 S. Generals Blvd, , Lincolnton, NC, 28093
MAIL: 515 S. Generals Blvd, , Lincolnton, NC, 28093
MAIL: 515 S. Generals Blvd, , Lincolnton, NC, 28093 SITE: 515 S. Generals Blvd, Lincolnton, NC, 28093
MAIL: 515 S. Generals Blvd, , Lincolnton, NC, 28093 SITE: 515 S. Generals Blvd, Lincolnton, NC, 28093 Contact Name: Todd Klingbiel
MAIL: 515 S. Generals Blvd, , Lincolnton, NC, 28093 SITE: 515 S. Generals Blvd, Lincolnton, NC, 28093 Contact Name: Todd Klingbiel (704) 735-8065 Fax: (704) 735-1119 NH0385
MAIL: 515 S. Generals Blvd, , Lincolnton, NC, 28093 SITE: 515 S. Generals Blvd, Lincolnton, NC, 28093 Contact Name: Todd Klingbiel (704) 735-8065 Fax: (704) 735-1119 NH0385 Expiry Date: 31-Dec-24
MAIL: 515 S. Generals Blvd, , Lincolnton, NC, 28093 SITE: 515 S. Generals Blvd, Lincolnton, NC, 28093 Contact Name: Todd Klingbiel (704) 735-8065 Fax: (704) 735-1119 NH0385 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 117
MAIL: 515 S. Generals Blvd, , Lincolnton, NC, 28093 SITE: 515 S. Generals Blvd, Lincolnton, NC, 28093 Contact Name: Todd Klingbiel (704) 735-8065 Fax: (704) 735-1119 NH0385 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 117 Adult Care Home Beds Total: 11
MAIL: 515 S. Generals Blvd, , Lincolnton, NC, 28093 SITE: 515 S. Generals Blvd, Lincolnton, NC, 28093 Contact Name: Todd Klingbiel (704) 735-8065 Fax: (704) 735-1119 NH0385 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 117 Adult Care Home Beds Total: 11 Lincolnton Rehabilitation Center
MAIL: 515 S. Generals Blvd, , Lincolnton, NC, 28093 SITE: 515 S. Generals Blvd, Lincolnton, NC, 28093 Contact Name: Todd Klingbiel (704) 735-8065 Fax: (704) 735-1119 NH0385 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 117 Adult Care Home Beds Total: 11 <b>Lincolnton Rehabilitation Center</b> Lincolnton Rehabilitation Center LLC
MAIL: 515 S. Generals Blvd, , Lincolnton, NC, 28093 SITE: 515 S. Generals Blvd, Lincolnton, NC, 28093 Contact Name: Todd Klingbiel (704) 735-8065 Fax: (704) 735-1119 NH0385 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 117 Adult Care Home Beds Total: 11 <b>Lincolnton Rehabilitation Center</b> Lincolnton Rehabilitation Center LLC Administrator Name: Timothy F. McEntire
<ul> <li>MAIL: 515 S. Generals Blvd, , Lincolnton, NC, 28093</li> <li>SITE: 515 S. Generals Blvd, Lincolnton, NC, 28093</li> <li>Contact Name: Todd Klingbiel</li> <li>(704) 735-8065 Fax: (704) 735-1119 NH0385</li> <li>Expiry Date: 31-Dec-24</li> <li>Nursing Facility Beds Total: 117</li> <li>Adult Care Home Beds Total: 11</li> <li>Lincolnton Rehabilitation Center</li> <li>Lincolnton Rehabilitation Center LLC</li> <li>Administrator Name: Timothy F. McEntire</li> <li>MAIL: 1410 East Gaston Street, , Lincolnton, NC, 28092</li> </ul>
<ul> <li>MAIL: 515 S. Generals Blvd, , Lincolnton, NC, 28093</li> <li>SITE: 515 S. Generals Blvd, Lincolnton, NC, 28093</li> <li>Contact Name: Todd Klingbiel</li> <li>(704) 735-8065 Fax: (704) 735-1119 NH0385</li> <li>Expiry Date: 31-Dec-24</li> <li>Nursing Facility Beds Total: 117</li> <li>Adult Care Home Beds Total: 11</li> <li>Lincolnton Rehabilitation Center</li> <li>Lincolnton Rehabilitation Center LLC</li> <li>Administrator Name: Timothy F. McEntire</li> <li>MAIL: 1410 East Gaston Street, Lincolnton, NC, 28092</li> <li>SITE: 1410 East Gaston Street, Lincolnton, NC, 28092</li> </ul>

Nursing Facility Beds Total: 120

Adult Care Home Beds Total: 0

NH0634

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

## As of 08/2024

#### **Cardinal Healthcare and Rehabilitation Center**

Cardinal North Carolina Healthcare LLC Administrator Name: Allen. S. Phillips MAIL: 931 North Aspen Street, , Lincolnton, NC, 28092 SITE: 931 North Aspen Street, Lincolnton, NC, 28092 Contact Name: Charlene Johnson (704) 732-7055 Fax: (704) 732-8460 NH0504 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 63 Adult Care Home Beds Total: 0

#### MACON

Macon Valley Nursing and Rehabilitation Center

Granite Falls LTC LLC Administrator Name: Jason M. Belue MAIL: 3195 Old Murphy Road, , Franklin, NC, 28734 SITE: 3195 Old Murphy Road, Franklin, NC, 28734 Contact Name: Jason M. Belue (828) 524-7806 Fax: (828) 524-0146 NH0417 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 200 Adult Care Home Beds Total: 0 **Eckerd Living Center** MH Eckerd Living Center, LLLP Administrator Name: Ava Ammons MAIL: 250 Hospital Drive, , Highlands, NC, 28741 SITE: 250 Hospital Drive, Highlands, NC, 28741 Contact Name: Ava Ammons (828) 526-1315 Fax: (828) 526-1320 NH0647 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 80 Adult Care Home Beds Total: 0

#### MADISON

**Elderberry Health Care** 

Wilkinson Care Center Inc
Administrator Name: karen cutshall
MAIL: 415 Elderberry Lane, , Marshall, NC, 28753
SITE: 415 Elderberry Lane, Marshall, NC, 28753
Contact Name: Andrew Martin
(828) 252-1790 Fax: (828) 649-9348 NH0479
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 80
Adult Care Home Beds Total: 20

Madison Health and Rehabilitation
Madison Health and Rehabilitation LLC
Administrator Name: Haley Niebes
MAIL: 345 Manor Road, , Mars Hill, NC, 28754
SITE: 345 Manor Road, Mars Hill, NC, 28754
Contact Name: Haley Niebes
(828) 689-5200 Fax: (828) 689-2958 NH0290
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 100
Adult Care Home Beds Total: 0
MARTIN
The Carrolton of Williamston
Williamston Nursing Facility Operations Company, LLC
Administrator Name: Sharon L. Davis
MAIL: 119 Gatling Street, , Williamston, NC, 27892
SITE: 119 Gatling Street, Williamston, NC, 27892
Contact Name: Sharon L. Davis
(252) 792-1616 Fax: (252) 792-1908 NH0270
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 154
Adult Care Home Beds Total: 0
MCDOWELL
Deer Park Health and Rehabilitation
Deer Park Health and Rehabilitation SNF LLC
Administrator Name: Melissa A. Cook
MAIL: 306 Deer Park Rd., , Nebo, NC, 28761
SITE: 306 Deer Park Rd., Nebo, NC, 28761
Contact Name: Melissa A. Cook
(828) 652-3032 Fax: (828) 652-7224 NH0326
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 140
Adult Care Home Beds Total: 0
Autumn Care of Marion
Autumn Corporation
Administrator Name: Tammy Wise
MAIL: 1264 Airport Road, , Marion, NC, 28752
SITE: 1264 Airport Road, Marion, NC, 28752
Contact Name: Tammy Wise

(828) 652-6701 Fax: (828) 652-1412 NH0346

Expiry Date: 31-Dec-24

Nursing Facility Beds Total: 110

Adult Care Home Beds Total: 15

#### MECKLENBURG

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

White Oak Manor-Charlotte
NHC HealthCare - Charlotte
Administrator Name: Hayden Keziah
MAIL: 4009 Craig Avenue, , Charlotte, NC, 28211
SITE: 4009 Craig Avenue, Charlotte, NC, 28211
Contact Name: Hayden E. Keziah
(704) 365-2620 Fax: (704) 365-2624 NH0350
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 180
Adult Care Home Beds Total: 0
Myers Park Nursing Center
The Citadel at Myers Park, LLC
Administrator Name: Kylie N. Conkin
MAIL: 300 Providence Road, , Charlotte, NC, 28207
SITE: 300 Providence Road, Charlotte, NC, 28207
Contact Name: Kylie N. Conkin
(704) 334-1671 Fax: (704) 323-8686 NH0319
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 133
Adult Care Home Beds Total: 0
Randolph Gardens Health and Rehabilitation
Randolph Gardens Health and Rehabilitation Pelican Health Randolph LLC
-
Pelican Health Randolph LLC
Pelican Health Randolph LLC Administrator Name: Shawnna Fairman
Pelican Health Randolph LLC Administrator Name: Shawnna Fairman MAIL: 4801 Randolph Road, , Charlotte, NC, 28211
Pelican Health Randolph LLC Administrator Name: Shawnna Fairman MAIL: 4801 Randolph Road, , Charlotte, NC, 28211 SITE: 4801 Randolph Road, Charlotte, NC, 28211
Pelican Health Randolph LLC Administrator Name: Shawnna Fairman MAIL: 4801 Randolph Road, , Charlotte, NC, 28211 SITE: 4801 Randolph Road, Charlotte, NC, 28211 Contact Name: Shawnna Fairman
Pelican Health Randolph LLC Administrator Name: Shawnna Fairman MAIL: 4801 Randolph Road, , Charlotte, NC, 28211 SITE: 4801 Randolph Road, Charlotte, NC, 28211 Contact Name: Shawnna Fairman (704) 364-8363 Fax: (704) 364-3021 NH0267
Pelican Health Randolph LLC Administrator Name: Shawnna Fairman MAIL: 4801 Randolph Road, , Charlotte, NC, 28211 SITE: 4801 Randolph Road, Charlotte, NC, 28211 Contact Name: Shawnna Fairman (704) 364-8363 Fax: (704) 364-3021 NH0267 Expiry Date: 31-Dec-24
Pelican Health Randolph LLC Administrator Name: Shawnna Fairman MAIL: 4801 Randolph Road, , Charlotte, NC, 28211 SITE: 4801 Randolph Road, Charlotte, NC, 28211 Contact Name: Shawnna Fairman (704) 364-8363 Fax: (704) 364-3021 NH0267 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 100
<ul> <li>Pelican Health Randolph LLC</li> <li>Administrator Name: Shawnna Fairman</li> <li>MAIL: 4801 Randolph Road, , Charlotte, NC, 28211</li> <li>SITE: 4801 Randolph Road, Charlotte, NC, 28211</li> <li>Contact Name: Shawnna Fairman</li> <li>(704) 364-8363 Fax: (704) 364-3021 NH0267</li> <li>Expiry Date: 31-Dec-24</li> <li>Nursing Facility Beds Total: 100</li> <li>Adult Care Home Beds Total: 0</li> </ul>
Pelican Health Randolph LLC Administrator Name: Shawnna Fairman MAIL: 4801 Randolph Road, , Charlotte, NC, 28211 SITE: 4801 Randolph Road, Charlotte, NC, 28211 Contact Name: Shawnna Fairman (704) 364-8363 Fax: (704) 364-3021 NH0267 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 100 Adult Care Home Beds Total: 0 <b>Eastover Nursing Center</b>
Pelican Health Randolph LLC Administrator Name: Shawnna Fairman MAIL: 4801 Randolph Road, , Charlotte, NC, 28211 SITE: 4801 Randolph Road, Charlotte, NC, 28211 Contact Name: Shawnna Fairman (704) 364-8363 Fax: (704) 364-3021 NH0267 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 100 Adult Care Home Beds Total: 0 <b>Eastover Nursing Center</b> Pelican Health at Charlotte, LLC
Pelican Health Randolph LLC Administrator Name: Shawnna Fairman MAIL: 4801 Randolph Road, , Charlotte, NC, 28211 SITE: 4801 Randolph Road, Charlotte, NC, 28211 Contact Name: Shawnna Fairman (704) 364-8363 Fax: (704) 364-3021 NH0267 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 100 Adult Care Home Beds Total: 0 <b>Eastover Nursing Center</b> Pelican Health at Charlotte, LLC Administrator Name: Chase Flowers
Pelican Health Randolph LLC Administrator Name: Shawnna Fairman MAIL: 4801 Randolph Road, , Charlotte, NC, 28211 SITE: 4801 Randolph Road, Charlotte, NC, 28211 Contact Name: Shawnna Fairman (704) 364-8363 Fax: (704) 364-3021 NH0267 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 100 Adult Care Home Beds Total: 0 <b>Eastover Nursing Center</b> Pelican Health at Charlotte, LLC Administrator Name: Chase Flowers MAIL: 2616 East 5th Street, , Charlotte, NC, 28204
Pelican Health Randolph LLC Administrator Name: Shawnna Fairman MAIL: 4801 Randolph Road, , Charlotte, NC, 28211 SITE: 4801 Randolph Road, Charlotte, NC, 28211 Contact Name: Shawnna Fairman (704) 364-8363 Fax: (704) 364-3021 NH0267 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 100 Adult Care Home Beds Total: 0 <b>Eastover Nursing Center</b> Pelican Health at Charlotte, LLC Administrator Name: Chase Flowers MAIL: 2616 East 5th Street, , Charlotte, NC, 28204 SITE: 2616 East 5th Street, Charlotte, NC, 28204
Pelican Health Randolph LLC Administrator Name: Shawnna Fairman MAIL: 4801 Randolph Road, , Charlotte, NC, 28211 SITE: 4801 Randolph Road, Charlotte, NC, 28211 Contact Name: Shawnna Fairman (704) 364-8363 Fax: (704) 364-3021 NH0267 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 100 Adult Care Home Beds Total: 0 <b>Eastover Nursing Center</b> Pelican Health at Charlotte, LLC Administrator Name: Chase Flowers MAIL: 2616 East 5th Street, , Charlotte, NC, 28204 SITE: 2616 East 5th Street, Charlotte, NC, 28204 Contact Name: Chase Flowers
Pelican Health Randolph LLC Administrator Name: Shawnna Fairman MAIL: 4801 Randolph Road, , Charlotte, NC, 28211 SITE: 4801 Randolph Road, Charlotte, NC, 28211 Contact Name: Shawnna Fairman (704) 364-8363 Fax: (704) 364-3021 NH0267 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 100 Adult Care Home Beds Total: 0 <b>Eastover Nursing Center</b> Pelican Health at Charlotte, LLC Administrator Name: Chase Flowers MAIL: 2616 East 5th Street, , Charlotte, NC, 28204 SITE: 2616 East 5th Street, Charlotte, NC, 28204 Contact Name: Chase Flowers (252) 626-4187 Fax: (704) 333-9394 NH0279

The Sharon at SouthPark
The Presbyterian Home at Charlotte Inc
Administrator Name: Hanna C. Crum
MAIL: 5100 Sharon Road, , Charlotte, NC, 28210
SITE: 5100 Sharon Road, Charlotte, NC, 28210
Contact Name: Hanna C. Crum
(704) 553-1670 Fax: (704) 553-1877 NH0121
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 96
Adult Care Home Beds Total: 40
University Place Nursing and Rehabilitation Center
Granite Falls LTC
Administrator Name: Tara Jackson
MAIL: 9200 Glenwater Drive, , Charlotte, NC, 28262
SITE: 9200 Glenwater Drive, Charlotte, NC, 28262
Contact Name: Tara Jackson
(704) 545-2377 Fax: (704) 548-8413 NH0016
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 207
Adult Care Home Beds Total: 10
Matthews Health & Rehab Center
Matthews Health & Rehab Center, LLC
Administrator Name: Robert McSwain
MAIL: 600 Fullwood Lane, , Matthews, NC, 28105
SITE: 600 Fullwood Lane, Matthews, NC, 28105
Contact Name: Robert "Mike" McSwain
(704) 841-4920 Fax: (704) 841-4700 NH0060
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 166
Adult Care Home Beds Total: 10
Royal Park Rehabilitation & Health Center
Liberty Commons Nsg & Rehab of Matthews LLC
Administrator Name: Nicola James
MAIL: 2700 Royal Commons Lane, , Matthews, NC, 28105
SITE: 2700 Royal Commons Lane, Matthews, NC, 28105
Contact Name: Nicola James
(704) 849-6990 Fax: (704) 443-3400 NH0063
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 159
Adult Care Home Beds Total: 0

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

## As of 08/2024

Shamrock	Nursing	Center
----------	---------	--------

Accordius Health at Midwood LLC Administrator Name: JoAnn Gibbs MAIL: 2727 Shamrock Drive, , Charlotte, NC, 28205 SITE: 2727 Shamrock Drive, Charlotte, NC, 28205 Contact Name: Jo Ann Gibbs (704) 301-8941 Fax: (704) 901-8234 NH0465 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 100 Adult Care Home Beds Total: 0 WillowBrooke Court SC Ctr at Matthews Glen **ACTS Retirement-Life Communities Inc** Administrator Name: Shacana Fleming MAIL: 740 Pavilion View Drive, , Matthews, NC, 28105 SITE: 740 Pavilion View Drive, Matthews, NC, 28105 Contact Name: Shacana Fleming (704) 845-5900 Fax: (704) 814-4519 NH0466 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 90 Adult Care Home Beds Total: 0 Hunter Woods Nursing and Rehabilitation Center Hunter Woods HealthCare LLC Administrator Name: Aaron Loney MAIL: 620 Tom Hunter Rd., , Charlotte, NC, 28213 SITE: 620 Tom Hunter Road, Charlotte, NC, 28213 Contact Name: Aaron Loney (704) 598-5136 Fax: (704) 598-5167 NH0503 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 120 Adult Care Home Beds Total: 0 Sardis Oaks AHSNF, Inc. Administrator Name: Colin C Clode MAIL: 5151 Sardis Road, , Charlotte, NC, 28270 SITE: 5151 Sardis Road, Charlotte, NC, 28270 Contact Name: Colin C Clode (704) 365-4202 Fax: (704) 364-4901 NH0483 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 124 Adult Care Home Beds Total: 0

Charlotte Health & Rehabilitation Center
Charlotte Operator LLC
Administrator Name: John C. Alschul
MAIL: 1735 Toddville Road, , Charlotte, NC, 28214
SITE: 1735 Toddville Road, Charlotte, NC, 28214
Contact Name: John Alschul
(732) 905-6440 Fax: (704) 394-4148 NH0512
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 90
Adult Care Home Beds Total: 0
Peak Resources-Charlotte
Park Village Rehab and Health Inc
Administrator Name: Amanda Pack
MAIL: 3223 Central Avenue, , Charlotte, NC, 28205
SITE: 3223 Central Avenue, Charlotte, NC, 28205
Contact Name: Amanda Pack
(704) 749-1100 Fax: (704) 749-1200 NH0426
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 142
Adult Care Home Beds Total: 0
The Pines at Davidson
The Pines at Davidson Inc
Administrator Name: Elyse M. Piscitelli
MAIL: 400 Avinger Lane, , Davidson, NC, 28036
SITE: 400 Avinger Lane, Davidson, NC, 28036
Contact Name: Elyse M. Piscitelli
(704) 896-1100 Fax: (704) 896-1119 NH0443
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 75
Adult Care Home Beds Total: 30
Southminster
Southminster Inc
Administrator Name: Yvonne Washburn
MAIL: 8919 Park Road, , Charlotte, NC, 28210
SITE: 8919 Park Road, Charlotte, NC, 28210
Contact Name: Arnoldo Marquez
(704) 551-6983 Fax: (704) 554-6706 NH0414
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 60
Adult Care Home Beds Total: 25

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

## As of 08/2024

Eastland	Nursing	Center
----------	---------	--------

Accordius Health at Charlotte LLC Administrator Name: Charles C. Cecil MAIL: 5939 Reddman Road, , Charlotte, NC, 28212 SITE: 5939 Reddman Road, Charlotte, NC, 28212 Contact Name: Cam Cecil (704) 703-6060 Fax: (704) 703-6095 NH0363 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 120 Adult Care Home Beds Total: 0 **Huntersville Oaks** AHSNF, Inc. Administrator Name: Kayla C. Hart MAIL: 12019 Verhoeff Drive, , Huntersville, NC, 28078 SITE: 12019 Verhoeff Drive, Huntersville, NC, 28078 Contact Name: Kayla Hart (704) 863-1000 Fax: (704) 863-1001 NH0377 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 168 Adult Care Home Beds Total: 0 **Huntersville Health & Rehabilitation Center** Huntersville Operator LLC Administrator Name: William Gardin MAIL: 13835 Boren Street, , Huntersville, NC, 28078 SITE: 13835 Boren Street, Huntersville, NC, 28078 Contact Name: William Gardin (704) 912-2222 Fax: (704) 912-2300 NH0648 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 90 Adult Care Home Beds Total: 0 **Autumn Care of Cornelius** Autumn Corporation Administrator Name: Joshua Wood MAIL: 19530 Mount Zion Parkway, , Cornelius, NC, 28031 SITE: 19530 Mount Zion Parkway, Cornelius, NC, 28031 Contact Name: Joan Grohowski (704) 997-2970 Fax: (704) 997-2971 NH0643 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 102 Adult Care Home Beds Total: 0

Pavilion Health Center at Brightmore
Liberty Commons Nsg & Rehab Ctr of Ballantyne LLC
Administrator Name: Alexandra Adams
MAIL: 10011 Providence Road West, , Charlotte, NC, 2827
SITE: 10011 Providence Road West, Charlotte, NC, 28277
Contact Name: Alexandra Adams
(980) 245-8500 Fax: (980) 245-8509 NH0639
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 108
Adult Care Home Beds Total: 0
Briar Creek Health Center
Charlotte SP Senior Housing OPCO LLC
Administrator Name: Kerriann J. Larmand
MAIL: One Town Center Road, Suite 300, Boca Raton, FL, 33486
SITE: 6041 Piedmont Row Drive, Charlotte, NC, 28210
Contact Name: Kerriann J. Larmand
(980) 443-2986 Fax: (980) 443-4221 NH0659
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 22
Adult Care Home Beds Total: 108
Windsor Run, LLC
Windsor Run, LLC
Administrator Name: Christopher Fitzgibbons
MAIL: 1807 Windsor Run Lane, , Matthews, NC, 28105
SITE: 1807 Windsor Run Lane, Matthews, NC, 28105
Contact Name: Christopher Fitzgibbons
(704) 443-6500 Fax: NH0660
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 36
Adult Care Home Beds Total: 10
Clear Creek Nursing & Rehabilitation Center
Spruce LTC Group LLC
Administrator Name: Hazel Jenkins
MAIL: 10506 Clear Creek Commerce Drive, , Mint Hill, NC 28227
SITE: 10506 Clear Creek Commerce Drive, Mint Hill, NC, 28227
Contact Name: Hazel Jenkins
(704) 545-2377 Fax: (704) 545-2440 NH0635
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 120
Adult Care Home Beds Total: 0

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

## As of 08/2024

#### Lakeside Health & Rehab Center

Lakeside Health & Rehab Center, LLC Administrator Name: Karisha E. Summers MAIL: 13825 Hunton Lane, , Huntersville, NC, 28078 SITE: 13825 Hunton Lane, Huntersville, NC, 28078 Contact Name: Karisha E. Summers (704) 897-2700 Fax: (704) 897-2800 NH0620 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 114 Adult Care Home Beds Total: 0 The Stewart Health Center The Cypress of Charlotte Club Inc Administrator Name: Ashton Brown MAIL: 6920 Marching Duck Drive, , Charlotte, NC, 28210 SITE: 6920 Marching Duck Drive, Charlotte, NC, 28210 Contact Name: Ashton Brown (704) 714-5545 Fax: (704) 714-5556 NH0584 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 65 Adult Care Home Beds Total: 14 **Mecklenburg Health & Rehabilitation** Mecklenburg Health and Rehabilitation, LLC Administrator Name: Alexa Knox MAIL: 2415 Sandy Porter Road, , Charlotte, NC, 28273 SITE: 2415 Sandy Porter Road, Charlotte, NC, 28273 Contact Name: Alexa Knox (704) 583-0430 Fax: (704) 583-0433 NH0570 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 100 Adult Care Home Beds Total: 0 Wilora Lake Healthcare Center Wilora Lake HealthCare LLC Administrator Name: Maher Chaik-Oughli MAIL: 6001 Wilora Lake Road, , Charlotte, NC, 28212 SITE: 6001 Wilora Lake Road, Charlotte, NC, 28212 Contact Name: Maher Chaik-Oughli (704) 563-2922 Fax: (704) 563-2814 NH0572 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 70 Adult Care Home Beds Total: 0

Asbury Health and Rehabilitation Center
Aldersgate United Methodist Retirement Community, Inc.
Administrator Name: Brooke Hodge
MAIL: 3800 Shamrock Drive, , Charlotte, NC, 28215
SITE: 3211 Bishops Way Lane, Charlotte, NC, 28215
Contact Name: Brooke Hodge
(704) 532-5200 Fax: (704) 532-3086 NH0573
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 120
Adult Care Home Beds Total: 5
Brookdale Carriage Club Providence
ARCLP-Charlotte LLC
Administrator Name: Vakesia Berrios
MAIL: 5800 Old Providence Road, , Charlotte, NC, 28226
SITE: 5804 Old Providence Road, Charlotte, NC, 28226
Contact Name: Vakesia Berrios
(704) 365-8551 Fax: (704) 366-4270 NH0574
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 42
Adult Care Home Beds Total: 2
Pineville Rehabilitation and Living Center
Pineville Healthcare LLC
Administrator Name: Lasheena Webb
MAIL: 1010 Lakeview Drive, , Pineville, NC, 28134
SITE: 1010 Lakeview Drive, Pineville, NC, 28134
Contact Name: Lasheena Webb
(704) 889-2273 Fax: (704) 889-5434 NH0521
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 106
Adult Care Home Beds Total: 10
Rockwell Park Rehabilitation and Healthcare Center
Saturn Operator LLC
Administrator Name: Mark Childs
MAIL: 1930 West Sugar Creek Road, , Charlotte, NC, 28262
SITE: 1930 West Sugar Creek Road, Charlotte, NC, 28262
Contact Name: Mark Chids
(704) 598-4480 Fax: (704) 598-4485 NH0557
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 120
Adult Care Home Beds Total: 20
MITCHELL

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

#### As of 08/2024

#### The Greens at Spruce Pines

Greens at Spruce Pines LLC Administrator Name: Jennifer R. Thomason MAIL: 218 Laurel Creek Court, , Spruce Pine, NC, 28777 SITE: 218 Laurel Creek Court, Spruce Pine, NC, 28777 Contact Name: Jennifer R. Thomason (828) 765-7312 Fax: (828) 765-7295 NH0433 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 127 Adult Care Home Beds Total: 6

## MONTGOMERY

**Autumn Care of Biscoe** 

Autumn Care of Biscoe, LLC Administrator Name: Christina Billings MAIL: 401 Lambert Road, , Biscoe, NC, 27209 SITE: 401 Lambert Road, Biscoe, NC, 27209 Contact Name: Tina Billings (910) 428-2117 Fax: (910) 428-1165 NH0411 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 141 Adult Care Home Beds Total: 10

#### MOORE

#### Penick Village

Penick Village Inc Administrator Name: Joseph L. Soto MAIL: 500 East Rhode Island Avenue, , Southern Pines, NC, 28387 SITE: 401 East Rhode Island Avenue, Southern Pines, NC, 28387 Contact Name: Joseph L Soto (910) 692-0306 Fax: (910) 692-0426 NH0127 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 50 Adult Care Home Beds Total: 42 **Pinehurst Healthcare & Rehabilitation Center** Liberty Commons Nsg & Rehab Ctr of Moore Co, LLC Administrator Name: Mysteri D. Linder MAIL: 300 Blake Boulevard, , Pinehurst, NC, 28374 SITE: 300 Blake Boulevard, Pinehurst, NC, 28374 Contact Name: Mysteri Linder-Morris (843) 599-1828 Fax: (910) 295-1438 NH0294 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 144 Adult Care Home Beds Total: 0

The Greens at Pinehurst Rehabilitation & Living Center
Pinehurst OpCo, LLC
Administrator Name: Howard Staples
MAIL: 205 Rattlesnake Trail, , Pinehurst, NC, 28374
SITE: 205 Rattlesnake Trail, Pinehurst, NC, 28374
Contact Name: Howard Staples
(910) 295-1781 Fax: (910) 295-1071 NH0230
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 120
Adult Care Home Beds Total: 0
Peak Resources-Pinelake
Carthage Healthcare Inc
Administrator Name: Thaddeus R Morgan
MAIL: 801 Pinehurst Avenue, , Carthage, NC, 28327
SITE: 801 Pinehurst Avenue, Carthage, NC, 28327
Contact Name: Thad Morgan
(910) 947-5155 Fax: (910) 947-5631 NH0539
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 90
Adult Care Home Beds Total: 20
St Joseph of The Pines Health Center
St. Joseph of the Pines Inc
Administrator Name: Raymond Esteves
MAIL: 103 Gossman Road, , Southern Pines, NC, 28374
SITE: 103 Gossman Road, Southern Pines, NC, 28374
Contact Name: Raymond Esteves
(910) 246-1000 Fax: (910) 246-1333 NH0589
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 176
Adult Care Home Beds Total: 0
Inn at Quail Haven Village
Quail Haven Healthcare Center of Pinehurst LLC
Administrator Name: Crystal Floyd
MAIL: 155 Blake Blvd, , Pinehurst, NC, 28374
SITE: 155 Blake Boulevard, Pinehurst, NC, 28374
Contact Name: Crystal Hofstetter
(910) 295-2294 Fax: (910) 295-2379 NH0605
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 60
Adult Care Home Beds Total: 0

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

## As of 08/2024

#### Dahlia Gardens Center for Nursing and Rehabilitation

Pee Dee Road Operating Company LLC Administrator Name: Lauren E. Fink MAIL: 141 Washington Ave, , Lawrence, NY, 11559 SITE: 915 Pee Dee Road, Aberdeen, NC, 28315 Contact Name: Lauren E. Fink (910) 944-8999 Fax: (910) 944-0809 NH0597 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 90 Adult Care Home Beds Total: 10

## NASH

Autumn Care of Nash Autumn Corporation Administrator Name: Christopher Lanier MAIL: 1210 Eastern Avenue, , Nashville, NC, 27856 SITE: 1210 Eastern Avenue, Nashville, NC, 27856 Contact Name: Chris Lanier (252) 462-0070 Fax: (252) 462-0673 NH0602 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 60 Adult Care Home Beds Total: 20 **Rocky Mount Rehabilitation Center** Rocky Mount Rehabilitation Center LLC Administrator Name: Calvin Arrington Jr. MAIL: 160 S Winstead Avenue, , Rocky Mount, NC, 27804 SITE: 160 S Winstead Avenue, Rocky Mount, NC, 27804 Contact Name: Eileen Tau (252) 443-7667 Fax: (252) 443-2915 NH0313 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 117 Adult Care Home Beds Total: 0 The Lodge at Rocky Mount Rocky Mount Health and Rehabilitation LLC Administrator Name: Amanda S. Frye MAIL: 3322 Village Road, , Rocky Mount, NC, 27804 SITE: 3322 Village Road, Rocky Mount, NC, 27804 Contact Name: Amanda S. Frye (252) 442-4156 Fax: (252) 407-8478 NH0122 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 100 Adult Care Home Beds Total: 15

The Carrolton of Nash
The Carrolton of Nash, LLC
Administrator Name: Charles M. Downey Roberson
MAIL: 7369 Hunter Hill Road, , Rocky Mount, NC, 27804
SITE: 7369 Hunter Hill Road, Rocky Mount, NC, 27804
Contact Name: Charles M. Downey Roberson
(252) 443-0867 Fax: (252) 443-0247 NH0437
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 141
Adult Care Home Beds Total: 9
NEW HANOVER
NorthChase Nursing and Rehabilitation Center
Redwood LTC Group LLC
Administrator Name: Sarah B. Revis
MAIL: 3015 Enterprise Drive, , Wilmington, NC, 28405
SITE: 3015 Enterprise Drive, Wilmington, NC, 28405
Contact Name: Sarah Revis
(910) 791-3451 Fax: (910) 791-4845 NH0436
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 140
Adult Care Home Beds Total: 0
August Healthcare at Wilmington
Accordius Health at Wilmington LLC
Administrator Name: Debra F. Griggs
MAIL: 820 Wellington Avenue, , Wilmington, NC, 28401
SITE: 820 Wellington Avenue, Wilmington, NC, 28401
Contact Name: Debra F. Griggs
(910) 343-0425 Fax: (910) 762-1791 NH0392
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 120
Adult Care Home Beds Total: 0
Davis Health Care Center
Cornelia Nixon Davis Inc
Administrator Name: Leilani Capone
MAIL: 1011 Porters Neck Road, , Wilmington, NC, 28411
SITE: 1011 Porters Neck Road, Wilmington, NC, 28411
Contact Name: Charles Long
(910) 686-7195 Fax: (910) 686-7295 NH0097
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 179
Adult Care Home Beds Total: 0

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

### As of 08/2024

Cypress Pointe Rehabilitation Center	Davis Health and Wellness Center at Cambridge Village
Cypress Pointe Rehabilitation Center LLC	Cornelia Nixon Davis Inc
Administrator Name: Angela Forrai	Administrator Name: Donald F. Traflet Jr.
MAIL: 2006 South 16th Street, , Wilmington, NC, 28401	MAIL: 83 Cavalier Drive, Ste. 200, , Wilmington, NC, 28405
SITE: 2006 South 16th Street, Wilmington, NC, 28401	SITE: 83 Cavalier Drive, Ste. 200, Wilmington, NC, 28405
Contact Name: Angela Forrai	Contact Name: Donald F. Traflet Jr.
(910) 763-6271 Fax: (910) 251-9803 NH0205	(910) 679-8301 Fax: (910) 679-4864 NH0645
Expiry Date: 31-Dec-24	Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 90	Nursing Facility Beds Total: 20
Adult Care Home Beds Total: 0	Adult Care Home Beds Total: 0
Peak Resources-Wilmington, Inc.	Bradley Creek Health Center
Peak Resources-Wilmington, Inc.	630 Carolina Bay OpCo LLC
Administrator Name: Somer Hancock	Administrator Name: Taylor E. Deloney
MAIL: 2305 Silver Stream Lane, , Wilmington, NC, 28401	MAIL: 740 Diamond Shoals Rd, , Wilmington, NC, 28403
SITE: 2305 Silver Stream Lane, Wilmington, NC, 28401	SITE: 740 Diamond Shoals Road, Wilmington, NC, 28403
Contact Name: Somer Hancock	Contact Name: Taylor Deloney
(910) 362-3621 Fax: (910) 362-3679 NH0617	(910) 769-7500 Fax: (910) 769-7573 NH0649
Expiry Date: 31-Dec-24	Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 110	Nursing Facility Beds Total: 30
Adult Care Home Beds Total: 0	Adult Care Home Beds Total: 78
Trinity Grove	Autumn Care of Myrtle Grove
Lutheran Home-Wilmington Inc	Autumn Corporation
Administrator Name: James E. Parrish	Administrator Name: Robert M. Woodie
MAIL: 631 Junction Creek Drive, , Wilmington, NC, 28412	MAIL: 5725 Carolina Beach Rd., , Wilmington, NC, 28412
SITE: 631 Junction Creek Drive, Wilmington, NC, 28412	SITE: 5725 Carolina Beach Rd., Wilmington, NC, 28412
Contact Name: James Parrish (Ed)	Contact Name: Robert M. Woodie
(910) 442-3001 Fax: (910) 442-3010 NH0630	(336) 983-4900 Fax: (910) 792-1492 NH0595
Expiry Date: 31-Dec-24	Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 100	Nursing Facility Beds Total: 90
Adult Care Home Beds Total: 0	Adult Care Home Beds Total: 20
Azalea Health & Rehab Center	Liberty Commons Rehabilitation Center
Wrightsville Health Holdings LLC	Liberty Commons Nursing Center Inc
Administrator Name: Alisha M. Cook	Administrator Name: Scott Nafzger
MAIL: 3800 Independence Blvd, , Wilmington, NC, 28412	MAIL: 121 Racine Drive, , Wilmington, NC, 28403
SITE: 3800 Independence Blvd, Wilmington, NC, 28412	SITE: 121 Racine Drive, Wilmington, NC, 28403
Contact Name: Alisha M. Cook	Contact Name: Scott Nafzger
(910) 392-3110 Fax: (910) 392-3118 NH0632	(910) 452-4070 Fax: (910) 452-1864 NH0569
Expiry Date: 31-Dec-24	Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 80	Nursing Facility Beds Total: 82
Adult Care Home Beds Total: 0	Adult Care Home Beds Total: 40
	NORTHAMPTON

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

### As of 08/2024

#### Northampton Nursing and Rehabilitation Center

Tar River LTC Group LLC Administrator Name: David J. Miller MAIL: 200 Hampton Woods Complex, , Jackson, NC, 27845 SITE: Highway 305 North, Jackson, NC, 27845 Contact Name: David J. Miller (252) 534-0131 Fax: (252) 534-9926 NH0537 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 80 Adult Care Home Beds Total: 0 **Rich Square Nursing & Rehabilitation Center** Rich Square Operations, LLC Administrator Name: William K. Leverett MAIL: 300 North Main Street, , Rich Square, NC, 27869 SITE: 300 North Main Street, Rich Square, NC, 27869 Contact Name: William K. Leverett (252) 539-4161 Fax: (252) 539-6503 NH0045 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 69 Adult Care Home Beds Total: 0

#### ONSLOW

**Premier Nursing and Rehabilitation Center** Redwood LTC Group LLC Administrator Name: Melissa L. Schmidt MAIL: 225 White Street, Jacksonville, NC, 28546 SITE: 225 White Street, Jacksonville, NC, 28546 Contact Name: Tami F. Kendall (910) 353-7222 Fax: (910) 353-4183 NH0229 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 239 Adult Care Home Beds Total: 7 **Carolina Rivers Nursing and Rehabilitation Center** Maple LTC Group Administrator Name: Dale Schuffert MAIL: P.O. Box 5021, Jacksonville, NC, 28540 SITE: 1839 Onslow Drive Extension, Jacksonville, NC, 28540 Contact Name: Dale Schuffert (910) 915-6556 Fax: (910) 378-0402 NH0370 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 120 Adult Care Home Beds Total: 0 ORANGE

Parkview Health and Rehabilitation Center
Legion Road Healthcare of Orange County LLC
Administrator Name: Sekeithia Jones
MAIL: 1716 Legion Road, , Chapel Hill, NC, 27517
SITE: 1716 Legion Road, Chapel Hill, NC, 27517
Contact Name: Sekeithia Jones
(984) 234-3600 Fax: (984) 234-3523 NH0239
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 108
Adult Care Home Beds Total: 7
Pruitt Health-Carolina Point
PruittHealth-Carolina Point LLC
Administrator Name: Cherie Readus
MAIL: 1626 Jeurgens Court, Legal Dept, Norcross, GA, 30093
SITE: 5935 Mount Sinai Road, Durham, NC, 27705
Contact Name: Cherie Readus
(919) 402-2450 Fax: (919) 402-2452 NH0093
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 138
Adult Care Home Beds Total: 2
Signature HealthCARE of Chapel Hill
LP Chapel Hill LLC
Administrator Name: Moses K. Muhairwe
MAIL: 1602 East Franklin Street, , Chapel Hill, NC, 27514
SITE: 1602 East Franklin Street, Chapel Hill, NC, 27514
Contact Name: Meredith Crane
(919) 967-1418 Fax: (919) 967-1457 NH0329
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 108
Adult Care Home Beds Total: 0
Carol Woods
The Chapel Hill Residential Retirement Center Inc
Administrator Name: Jessica C. Fines-Crawford
MAIL: 750 Weaver Dairy Road, , Chapel Hill, NC, 27514
SITE: 750 Weaver Dairy Road, Chapel Hill, NC, 27514
Contact Name: Jessica C. Fines-Crawford
(919) 918-3282 Fax: (919) 918-3263 NH0258
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 30
Adult Care Home Beds Total: 65

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

# As of 08/2024

#### Peak Resources - Brookshire, Inc.

Peak Resources - Brookshire, Inc. Administrator Name: Derrick Hammon MAIL: 300 Meadowlands Drive, , Hillsborough, NC, 27278 SITE: 300 Meadowlands Drive, Hillsborough, NC, 27278 Contact Name: Derrick Hammon (919) 644-6714 Fax: (919) 644-0812 NH0545 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 80 Adult Care Home Beds Total: 20

### PAMLICO

#### **Grantsbrook Nursing and Rehabilitation Center**

River Neuse Group LLC Administrator Name: Alexandria H. Bakr MAIL: 290 Keel Road, , Grantsboro, NC, 28529 SITE: 290 Keel Road, Grantsboro, NC, 28529 Contact Name: Alexandria H. Baker (252) 745-5005 Fax: (252) 745-5344 NH0450 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 96 Adult Care Home Beds Total: 8

#### PASQUOTANK

# Laurel Park Rehabilitation and Healthcare Center

Laurel Park Opco LLC Administrator Name: Matthew D. Johnson MAIL: 901 Halstead Boulevard, , Elizabeth City, NC, 27909 SITE: 901 Halstead Boulevard, Elizabeth City, NC, 27909 Contact Name: Matthew D. Johnson (252) 338-0137 Fax: (252) 338-3459 NH0302 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 108 Adult Care Home Beds Total: 0 **Elizabeth City Health and Rehabilitation** Elizabeth City Health and Rehabilitation LLC Administrator Name: Summer H. Johnson MAIL: 1075 US Highway 17 South, , Elizabeth City, NC, 27909 SITE: 1075 US Highway 17 South, Elizabeth City, NC, 27909 Contact Name: Summer H. Johnson (252) 338-3975 Fax: (252) 338-0039 NH0040 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 170 Adult Care Home Beds Total: 0

PENDER
Woodbury Wellness Center Inc
Woodbury Wellness Center Inc
Administrator Name: Judith A. Bullard
MAIL: 2778 Country Club Drive, , Hampstead, NC, 28443
SITE: 2778 Country Club Drive, Hampstead, NC, 28443
Contact Name: Judith Anne Bullard
(910) 270-1443 Fax: (910) 270-1826 NH0300
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 112
Adult Care Home Beds Total: 100
The Laurels of Pender
The Laurels of Pender LLC
Administrator Name: Marcus G. Faison
MAIL: 311 South Campbell Street, , Burgaw, NC, 28425
SITE: 311 South Campbell Street, Burgaw, NC, 28425
Contact Name: Marcus G. Faison
(910) 259-6007 Fax: (910) 259-6111 NH0461
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 98
Adult Care Home Beds Total: 0
PERQUIMANS
Hertford Rehabilitation and Healthcare Center
Hertford Opco LLC
Administrator Name: Joseph L. Soto
MAIL: 1300 Don Juan Road, , Hertford, NC, 27944
SITE: 1300 Don Juan Road, Hertford, NC, 27944
Contact Name: Joseph L. Soto
(252) 426-5391 Fax: (252) 426-8434 NH0432
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 78
Adult Care Home Beds Total: 0
PERSON
Roxboro Healthcare & Rehabilitation Center
Liberty Commons Nsg & Rehab Ctr of Person Co, LLC
Administrator Name: Taejia Carelock
MAIL: 901 Ridge Road, , Roxboro, NC, 27573
SITE: 901 Ridge Road, Roxboro, NC, 27573
Contact Name: Taejia Carelock
(336) 599-0106 Fax: (336) 597-5788 NH0265
Expiry Date: 31-Dec-24

Nursing Facility Beds Total: 140

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

### As of 08/2024

Macgregor Downs Health Center by Harborview
Macgregor Downs Health Center by Harborview, LLC
Administrator Name: Jamie E. Bell
MAIL: 2910 MacGregor Downs Road, , Greenville, NC, 27834
SITE: 2910 MacGregor Downs Road, Greenville, NC, 27834
Contact Name: Jamie E. Bell
(252) 758-4121 Fax: (252) 417-7296 NH0271
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 152
Adult Care Home Beds Total: 0
PruittHealth-Farmville
PruittHealth-Farmville LLC
Administrator Name: Mindy Brabham
MAIL: 1626 Jeurgens Court, Legal Dept, Norcross, GA, 30093
SITE: 4351 South Main Street, Farmville, NC, 27828
Contact Name: Mindy Brabham
(828) 688-3421 Fax: (252) 753-5156 NH0304
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 56
Adult Care Home Beds Total: 0
Greenville Health and Rehabilitation Center
Greenville Operator LLC
Administrator Name: Kirk D.Rogers
MAIL: 2578 West Fifth Street, , Greenville, NC, 27834
SITE: 2578 West Fifth Street, Greenville, NC, 27834
Contact Name: Kirk Rogers
(252) 758-7100 Fax: (252) 758-1485 NH0446
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 120
Adult Care Home Beds Total: 0
Cypress Glen Retirement Community
The United Methodist Retirement Homes Inc
Administrator Name: Terry E. Hayes
MAIL: 100 Hickory Street, , Greenville, NC, 27858
SITE: 100 Hickory Street, Greenville, NC, 27858
Contact Name: Laurie H. Stallings
(252) 830-7089 Fax: (252) 830-0411 NH0473
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 30
Adult Care Home Beds Total: 30

East Carolina Rehab and Wellness
East Carolina Rehab and Wellness LLC
Administrator Name: Scott M. Cole
MAIL: 2575 West 5th Street, , Greenville, NC, 27834
SITE: 2575 West 5th Street, Greenville, NC, 27834
Contact Name: Scott M. Cole
(252) 830-9100 Fax: (252) 830-8901 NH0505
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 130
Adult Care Home Beds Total: 20
Ayden Court Nursing and Rehabilitation Center
River Neuse Group LLC
Administrator Name: Sarah C. Eason
MAIL: 128 Snow Hill Road, , Ayden, NC, 28513
SITE: 128 Snow Hill Road, Ayden, NC, 28513
Contact Name: Sarah C. Eason
(252) 746-8223 Fax: (252) 746-8013 NH0582
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 82
Adult Care Home Beds Total: 0
POLK
WillowBrooke Court SC Center at Tryon Estates
ACTS Retirement-Life Communities Inc
Administrator Name: April H. Condrey
MAIL: 619 Laurel Lake Drive, , Columbus, NC, 28722

SITE: 619 Laurel Lake Drive, Columbus, NC, 28722

NH0559

NH0367

Contact Name: Lesley Miller

Nursing Facility Beds Total: 52 Adult Care Home Beds Total: 44

Contact Name: Brian Parsons

Nursing Facility Beds Total: 99 Adult Care Home Beds Total: 0

Expiry Date: 31-Dec-24

Expiry Date: 31-Dec-24

Autumn Care of Saluda Autumn Corporation

(828) 894-5500 Fax: (828) 894-3576

Administrator Name: Lisa L. Fitzgerald

(828) 749-2261 Fax: (828) 749-9639

MAIL: 501 Esseola Drive, , Saluda, NC, 28773 SITE: 501 Esseola Drive, Saluda, NC, 28773

Page: 40

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

### As of 08/2024

#### White Oak Manor-Tryon

NHC HealthCare - Tryon LLC Administrator Name: Harrison Cecil MAIL: 70 Oak Street, , Tryon, NC, 28782 SITE: 70 Oak Street, Tryon, NC, 28782 Contact Name: harrison cecil (828) 859-9161 Fax: (828) 859-2073 NH0399 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 70 Adult Care Home Beds Total: 18

#### RANDOLPH

The Graybrier Nursing And Retirement Center Archdale Nursing Center Inc Administrator Name: Justin Percival MAIL: 116 Lane Drive, , Trinity, NC, 27370 SITE: 116 Lane Drive, Trinity, NC, 27370 Contact Name: Justin Percival (336) 431-8888 Fax: (336) 431-9053 NH0489 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 128 Adult Care Home Beds Total: 0 Asheboro Rehabilitation and Healthcare Center Asheboro OPCO LLC Administrator Name: Mark E. Johnston MAIL: 211 Blvd of the Americas, Suite 500, Lakewood, NJ, 08701 SITE: 400 Vision Drive, Asheboro, NC, 27203 Contact Name: Mark E. Johnston (336) 672-5450 Fax: (336) 672-5451 NH0448 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 100 Adult Care Home Beds Total: 0 Alpine Health and Rehabilitation of Asheboro Alpine Health and Rehabilitation of Asheboro Administrator Name: Chip Lacy-Sellers MAIL: 230 East Presnell Street, , Asheboro, NC, 27203 SITE: 230 East Presnell Street, Asheboro, NC, 27203 Contact Name: Jeff Nunn (336) 629-1447 Fax: (336) 629-1463 NH0335 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 238 Adult Care Home Beds Total: 0

Clapp's Convalescent Nursing Home Inc	
Clapp's Convalescent Nursing Home Inc	
Administrator Name: Grant Hollowell	
MAIL: 500 Mountain Top Drive, , Asheboro, NC, 27203	3
SITE: 500 Mountain Top Drive, Asheboro, NC, 27203	
Contact Name: Lexa Goss	
(336) 625-2074 Fax: (336) 625-1927 NH0020	
Expiry Date: 31-Dec-24	
Nursing Facility Beds Total: 96	
Adult Care Home Beds Total: 0	
Westwood Health and Rehabilitation Center	
Westwood HealthCare LLC	
Administrator Name: Dawson D. Joseph	
MAIL: 625 Ashland Street, , Archdale, NC, 27263	
SITE: 625 Ashland Street, Archdale, NC, 27263	
Contact Name: Dawson D. Joseph	
(336) 434-2902 Fax: (336) 434-4601 NH0556	
Expiry Date: 31-Dec-24	
Nursing Facility Beds Total: 68	
Adult Care Home Beds Total: 0	
Ramseur Rehabilitation and Healthcare Center	
Ramseur Operator LLC	
Administrator Name: Kerriann J. Larmand	
MAIL: 7166 Jordan Road, , Ramseur, NC, 27316	
SITE: 7166 Jordan Road, Ramseur, NC, 27316	
Contact Name: Kerriann J. Larmand	
(336) 824-8828 Fax: (336) 824-8208 NH0609	
Expiry Date: 31-Dec-24	
Nursing Facility Beds Total: 90	
Adult Care Home Beds Total: 0	
RICHMOND	
Richmond Pines Healthcare and Rehabilitation Center	
Spruce LTC Group LLC	
Administrator Name: Michael P. Wagner	
MAIL: Highway 177 South, P O Box 1489, Hamlet, NC, 28345	,
SITE: Highway 177 South, Hamlet, NC, 28345	
Contact Name: Michael P. Wagner	
(910) 582-0021 Fax: (910) 205-0244 NH0455	
Expiry Date: 31-Dec-24	
Nursing Facility Beds Total: 105	
Adult Care Home Beds Total: 10	

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

### As of 08/2024

#### PruittHealth-Rockingham

PuittHealth-Rockingham LLC Administrator Name: Kweilin Belitsos MAIL: 1626 Jeurgens Court, Legal Dept, Norcross, GA, 30093 SITE: 804 Long Drive, Rockingham, NC, 28379 Contact Name: Kweilin Belitsos (910) 997-4493 Fax: (910) 997-4083 NH0427 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 120 Adult Care Home Beds Total: 0

#### ROBESON

#### The Carrolton of Lumberton

The Carrolton of Lumberton, LLC Administrator Name: Maurice W. Rozier MAIL: 1170 Linkhaw Road, , Lumberton, NC, 28358 SITE: 1170 Linkhaw Road, Lumberton, NC, 28358 Contact Name: Maurice W. Rozier (910) 671-1163 Fax: (910) 671-1625 NH0472 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 90 Adult Care Home Beds Total: 5 **Pembroke Center** SunBridge Retirement Care Associates LLC Administrator Name: Syreeta Parham MAIL: 310 East Wardell Drive, , Pembroke, NC, 28372 SITE: 310 East Wardell Drive, Pembroke, NC, 28372 Contact Name: Syreeta Parham (910) 521-1273 Fax: (910) 521-3593 NH0518 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 84 Adult Care Home Beds Total: 0 Wesley Pines Retirement Community The United Methodist Retirement Homes Inc Administrator Name: Amy L. Shooter MAIL: 1000 Wesley Pines Road, , Lumberton, NC, 28358 SITE: 1000 Wesley Pines Road, Lumberton, NC, 28358 Contact Name: Amy Shooter (910) 738-9691 Fax: (910) 738-8905 NH0240 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 62 Adult Care Home Beds Total: 42

Harborview Lumberton
Harborview Lumberton, LLC
Administrator Name: Anna Williamson
MAIL: 1555 Willis Avenue, , Lumberton, NC, 28358
SITE: 1555 Willis Avenue, Lumberton, NC, 28358
Contact Name: Anna Williamson
(910) 739-6048 Fax: (910) 239-2533 NH0289
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 122
Adult Care Home Beds Total: 0
Woodhaven Nursing Center
Liberty Commons of Robeson County, LLC
Administrator Name: Ashley B. Kling
MAIL: 1150 Pine Run Drive, , Lumberton, NC, 28358
SITE: 1150 Pine Run Drive, Lumberton, NC, 28358
Contact Name: Ashley B. Kling
(910) 671-5703 Fax: NH0662
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 115
Adult Care Home Beds Total: 0
GlenFlora
North Carolina Cancer Institute Inc
Administrator Name: Austin Locklear
MAIL: 5701 Fayetteville Road, , Lumberton, NC, 28360
SITE: 5701 Fayetteville Road, Lumberton, NC, 28360
Contact Name: Austin Locklear
(910) 739-2821 Fax: (910) 738-4539 NH0533
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 52
Adult Care Home Beds Total: 20
ROCKINGHAM
Penn Nursing Center
The Moses H Cone Memorial Hospital Operating Corp
Administrator Name: Raymond Cooper
MAIL: 618-A South Main Street, , Reidsville, NC, 27320
SITE: 618-A South Main Street, Reidsville, NC, 27320
Contact Name: Raymond Cooper
(336) 951-6090 Fax: (336) 951-6008 NH0614

Expiry Date: 31-Dec-24

Nursing Facility Beds Total: 82

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

### As of 08/2024

Cypress Valley Center for Nursing and Rehabilitation
Maple Avenue Operating Company LLC
Administrator Name: Heather Halla
MAIL: 141 Washington Ave, , Lawrence, NY, 11559
SITE: 543 Maple Avenue, Reidsville, NC, 27320
Contact Name: Heather Halla
(336) 342-1382 Fax: (336) 496-4090 NH0293
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 110
Adult Care Home Beds Total: 0
Jacob's Creek Nursing and Rehabilitation Center
Granite Falls LTC LLC
Administrator Name: Tami Kendall
MAIL: (Bailey Road), 1721 Bald Hill Loop, Madison, NC, 27025
SITE: 1721 Bald Hill Loop (Bailey Road), Madison, NC, 27025
Contact Name: Tami Kendall
(336) 548-9658 Fax: (336) 548-1764 NH0092
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 170
Adult Care Home Beds Total: 0
Eden Rehabilitation and Healthcare Center
Eden Opco LLC
Administrator Name: Cassandrea Madison
MAIL: 226 North Oakland Avenue, , Eden, NC, 27288
SITE: 226 North Oakland Avenue, Eden, NC, 27288
Contact Name: Cassandrea Madison
(336) 623-1750 Fax: (336) 623-6610 NH0361
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 112
Adult Care Home Beds Total: 0
ROWAN
The Citadel Salisbury
The Citadel Salisbury LLC
Administrator Name: Sarah Flathmann
MAIL: 980 Sylvan Ave., , Englewood Cliffs, NJ, 07632
SITE: 710 Julian Road, Salisbury, NC, 28147
Contact Name: Rachel Kosowsky
(201) 928-7816 Fax: NH0441
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 160

Compass Healthcare and Rehab Rowan, LLC
Compass Healthcare and Rehab Rowan, LLC
Administrator Name: Georgeann
MAIL: 1404 South Salisbury Avenue, , Spencer, NC, 28159
SITE: 1404 South Salisbury Avenue, Spencer, NC, 28159
Contact Name: Georgeann Moore
(704) 633-3892 Fax: (704) 637-2784 NH0442
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 70
Adult Care Home Beds Total: 0
Autumn Care of Salisbury
Autumn Corporation
Administrator Name: Glenn Terry
MAIL: 1505 Bringle Ferry Road, , Salisbury, NC, 28146
SITE: 1505 Bringle Ferry Road, Salisbury, NC, 28146
Contact Name: Glenn Terry
(704) 637-5885 Fax: (704) 636-6974 NH0424
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 97
Adult Care Home Beds Total: 3
Salisbury Rehabilitation and Nursing Center
Accordius Health at Salisbury LLC
Administrator Name: Jeffrey Golden
MAIL: 635 Statesville Boulevard, , Salisbury, NC, 28144
SITE: 635 Statesville Boulevard, Salisbury, NC, 28144
Contact Name: Jeffrey Golden
(704) 633-7390 Fax: (704) 636-5525 NH0449
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 185
Adult Care Home Beds Total: 0
Big Elm Retirement and Nursing Centers
Senior Ventures & Management Inc
Administrator Name: Izabela Gignac
MAIL: 1285 West A Street, , Kannapolis, NC, 28081
SITE: 1285 West A Street, Kannapolis, NC, 28081
Contact Name: Izabela Gignac
(704) 932-0000 Fax: (704) 938-6039 NH0471
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 50
Adult Care Home Beds Total: 96

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

### As of 08/2024

Piedmont Healtl	1 & I	Rehab	Center
-----------------	-------	-------	--------

Piedmont Health & Rehab Center, LLC Administrator Name: Thomas Fitzgibbons MAIL: 610 West Fisher Street, , Salisbury, NC, 28144 SITE: 610 West Fisher Street, Salisbury, NC, 28144 Contact Name: Thomas Fitzgibbons (704) 633-2781 Fax: (704) 633-1661 NH0050 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 58 Adult Care Home Beds Total: 0 **Trinity Oaks** Lutheran Home at Trinity Oaks Inc Administrator Name: Timothy W. Cornelison MAIL: 820 Klumac Road, , Salisbury, NC, 28144 SITE: 820 Klumac Road, Salisbury, NC, 28144 Contact Name: Ann Bruce (704) 637-3784 Fax: (704) 636-9464 NH0197 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 115 Adult Care Home Beds Total: 12 NC State Veterans Home - Salisbury NC Dept of Military&Veterans Aff NC Div of Veterans Aff Administrator Name: Jonathan Mangum MAIL: P.O. Box 599, , Salisbury, NC, 28145 SITE: 1601 Brenner Avenue, Building 10, Salisbury, NC, 28144 Contact Name: Jonathan Mangum (704) 639-2303 Fax: (704) 636-4577 NH0616 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 99 Adult Care Home Beds Total: 0 The Laurels of Salisbury Oak Health Care Investors of Salisbury Inc Administrator Name: Catherine Maynard MAIL: 215 Lash Drive, , Salisbury, NC, 28147 SITE: 215 Lash Drive, Salisbury, NC, 28147 Contact Name: Catherine Maynard (704) 637-1182 Fax: (704) 638-2328 NH0538 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 60 Adult Care Home Beds Total: 20

Liberty Commons Nsg and Rehab Ctr of Rowan Cty
Liberty Commons Nsg & Rehab Ctr of Rowan Cty LLC
Administrator Name: Gary A. Henderson
MAIL: 4412 South Main Street, , Salisbury, NC, 28147
SITE: 4412 South Main Street, Salisbury, NC, 28147
Contact Name: Gary A. Henderson
(704) 637-3040 Fax: (704) 637-1583 NH0591
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 90
Adult Care Home Beds Total: 0
RUTHERFORD
Willow Ridge Rehabilitation and Living Center
Willow Ridge Healthcare LLC
Administrator Name: Penny G. McCoy
MAIL: 237 Tryon Road, , Rutherfordton, NC, 28139
SITE: 237 Tryon Road, Rutherfordton, NC, 28139
Contact Name: Penny G. McCoy
(828) 645-4297 Fax: (828) 287-3668 NH0590
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 136
Adult Care Home Beds Total: 0
Oak Grove Healthcare Center
Oak Grove HealthCare LLC
Administrator Name: Sherry S. Kennedy
MAIL: 518 Old US Hwy 221, , Rutherfordton, NC, 28139
SITE: 518 Old US Hwy 221, Rutherfordton, NC, 28139
Contact Name: Sherry S. Kennedy
(828) 287-7655 Fax: (828) 351-2294 NH0566
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 60
Adult Care Home Beds Total: 0
Fair Haven Home
Fair Haven Home Inc
Administrator Name: Daniel M. McKeithan
MAIL: 149 Fair Haven Drive, , Bostic, NC, 28018
SITE: 149 Fair Haven Drive, Bostic, NC, 28018
Contact Name: Daniel McKeithan
(828) 245-9095 Fax: (828) 245-7856 NH0531
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 30
Adult Care Home Beds Total: 37

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

### As of 08/2024

#### Hilltop Health and Rehabilitation

Rutherfordton NC Opco LLC Administrator Name: Wesley R Summerlin MAIL: 188 Oscar Justice Rd., , Rutherfordton, NC, 28139 SITE: 188 Oscar Justice Rd., Rutherfordton, NC, 28139 Contact Name: Wesley R. Summerlin (828) 286-9001 Fax: (828) 286-9070 NH0153 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 80 Adult Care Home Beds Total: 0 **Fair Haven of Forest City** Fair Haven of Forest City LLC Administrator Name: Brian Hutchison MAIL: 830 Bethany Church Road, , Forest City, NC, 28043 SITE: 830 Bethany Church Road, Forest City, NC, 28043 Contact Name: Brian Hutchison (828) 245-2852 Fax: (828) 248-2590 NH0474 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 100 Adult Care Home Beds Total: 28

#### SAMPSON

#### Mary Gran Nursing Center

Liberty Healthcare Services of Mary Gran Nsg Ctr LLC Administrator Name: Marilynn D. Spell MAIL: 120 Southwood Drive, P.O. Box 379, Clinton, NC, 28329 SITE: 120 Southwood Drive, Clinton, NC, 28329 Contact Name: Marilynn Daughtry Spell (910) 592-7981 Fax: (910) 592-3538 NH0089 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 212 Adult Care Home Beds Total: 30 Southwood Nursing and Retirement Center Liberty Healthcare Services of Southwood Nsg Ctr LLC Administrator Name: Taylor D. Baxley MAIL: 2334 S 41st Street, Wilmington, NC, 28403 SITE: 180 Southwood Drive, Clinton, NC, 28328 Contact Name: Taylor Baxley (910) 592-8165 Fax: (910) 596-2253 NH0571 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 100 Adult Care Home Beds Total: 0 SCOTLAND

Scottish Pines Rehabilitation and Nursing Center
Century Care of Laurinburg Inc
Administrator Name: Margaret Dickerson
MAIL: 620 Johns Road, , Laurinburg, NC, 28352
SITE: 620 Johns Road, Laurinburg, NC, 28352
Contact Name: Margaret Dickerson
(910) 361-4000 Fax: (910) 361-4051 NH0340
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 149
Adult Care Home Beds Total: 0
Scotia Village
The Presbyterian Homes Inc
Administrator Name: Hannah Davis
MAIL: 2200 Elm Avenue, , Laurinburg, NC, 28352
SITE: 2200 Elm Avenue, Laurinburg, NC, 28352
Contact Name: Hannah Davis
(910) 266-5020 Fax: (910) 277-2025 NH0457
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 58
Adult Care Home Beds Total: 32
STANLY
STANLY Bethany Woods Nursing and Rehabilitation Center
Bethany Woods Nursing and Rehabilitation Center
Bethany Woods Nursing and Rehabilitation Center Spruce LTC Group LLC
Bethany Woods Nursing and Rehabilitation Center Spruce LTC Group LLC Administrator Name: Tou H. Lor
Bethany Woods Nursing and Rehabilitation Center Spruce LTC Group LLC Administrator Name: Tou H. Lor MAIL: 33426 Old Salisbury Road, , Albemarle, NC, 2800
Bethany Woods Nursing and Rehabilitation Center Spruce LTC Group LLC Administrator Name: Tou H. Lor MAIL: 33426 Old Salisbury Road, , Albemarle, NC, 28002 SITE: 33426 Old Salisbury Road, Albemarle, NC, 28002
Bethany Woods Nursing and Rehabilitation Center Spruce LTC Group LLC Administrator Name: Tou H. Lor MAIL: 33426 Old Salisbury Road, , Albemarle, NC, 28002 SITE: 33426 Old Salisbury Road, Albemarle, NC, 28002 Contact Name: Tou H. Lor
Bethany Woods Nursing and Rehabilitation Center Spruce LTC Group LLC Administrator Name: Tou H. Lor MAIL: 33426 Old Salisbury Road, , Albemarle, NC, 28002 SITE: 33426 Old Salisbury Road, Albemarle, NC, 28002 Contact Name: Tou H. Lor (704) 983-1195 Fax: (704) 982-0446 NH0462
Bethany Woods Nursing and Rehabilitation CenterSpruce LTC Group LLCAdministrator Name: Tou H. LorMAIL: 33426 Old Salisbury Road, , Albemarle, NC, 28002SITE: 33426 Old Salisbury Road, Albemarle, NC, 28002Contact Name: Tou H. Lor(704) 983-1195Fax: (704) 982-0446NH0462Expiry Date: 31-Dec-24
Bethany Woods Nursing and Rehabilitation Center Spruce LTC Group LLC Administrator Name: Tou H. Lor MAIL: 33426 Old Salisbury Road, , Albemarle, NC, 28002 SITE: 33426 Old Salisbury Road, Albemarle, NC, 28002 Contact Name: Tou H. Lor (704) 983-1195 Fax: (704) 982-0446 NH0462 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 180
Bethany Woods Nursing and Rehabilitation CenterSpruce LTC Group LLCAdministrator Name: Tou H. LorMAIL: 33426 Old Salisbury Road, , Albemarle, NC, 28002SITE: 33426 Old Salisbury Road, Albemarle, NC, 28002Contact Name: Tou H. Lor(704) 983-1195Fax: (704) 982-0446NH0462Expiry Date: 31-Dec-24Nursing Facility Beds Total: 180Adult Care Home Beds Total: 10
Bethany Woods Nursing and Rehabilitation CenterSpruce LTC Group LLCAdministrator Name: Tou H. LorMAIL: 33426 Old Salisbury Road, , Albemarle, NC, 28002SITE: 33426 Old Salisbury Road, Albemarle, NC, 28002Contact Name: Tou H. Lor(704) 983-1195Fax: (704) 982-0446NH0462Expiry Date: 31-Dec-24Nursing Facility Beds Total: 180Adult Care Home Beds Total: 10Stanly Manor
Bethany Woods Nursing and Rehabilitation CenterSpruce LTC Group LLCAdministrator Name: Tou H. LorMAIL: 33426 Old Salisbury Road, , Albemarle, NC, 28002SITE: 33426 Old Salisbury Road, Albemarle, NC, 28002Contact Name: Tou H. Lor(704) 983-1195Fax: (704) 982-0446NH0462Expiry Date: 31-Dec-24Nursing Facility Beds Total: 180Adult Care Home Beds Total: 10Stanly ManorAHSNF, Inc.
Bethany Woods Nursing and Rehabilitation CenterSpruce LTC Group LLCAdministrator Name: Tou H. LorMAIL: 33426 Old Salisbury Road, , Albemarle, NC, 28002SITE: 33426 Old Salisbury Road, Albemarle, NC, 28002Contact Name: Tou H. Lor(704) 983-1195Fax: (704) 982-0446NH0462Expiry Date: 31-Dec-24Nursing Facility Beds Total: 180Adult Care Home Beds Total: 10Stanly ManorAHSNF, Inc.Administrator Name: Jennifer A. Morgan
Bethany Woods Nursing and Rehabilitation CenterSpruce LTC Group LLCAdministrator Name: Tou H. LorMAIL: 33426 Old Salisbury Road, , Albemarle, NC, 28002SITE: 33426 Old Salisbury Road, Albemarle, NC, 28002Contact Name: Tou H. Lor(704) 983-1195Fax: (704) 982-0446NH0462Expiry Date: 31-Dec-24Nursing Facility Beds Total: 180Adult Care Home Beds Total: 10Stanly ManorAHSNF, Inc.Administrator Name: Jennifer A. MorganMAIL: 625 Bethany Road, , Albemarle, NC, 28001

Expiry Date: 31-Dec-24

Nursing Facility Beds Total: 90

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

#### As of 08/2024

#### **Trinity Place**

Lutheran Home-Albemarle Inc Administrator Name: Eric T. Gabriel Jr. MAIL: 24724 South Business 52, , Albemarle, NC, 28001 SITE: 24724 South Business 52, Albemarle, NC, 28001 Contact Name: Joyce Hathcock (704) 982-8191 Fax: (704) 983-1118 NH0140 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 76 Adult Care Home Beds Total: 27 **Forrest Oakes Healthcare Center** Forrest Oakes HealthCare LLC Administrator Name: Tangela L. Phillips-Lane MAIL: 620 Heathwood Drive, , Albemarle, NC, 28001 SITE: 620 Heathwood Drive, Albemarle, NC, 28001 Contact Name: Charlene Johnson (704) 983-2686 Fax: (704) 984-6458 NH0550 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 60 Adult Care Home Beds Total: 0 STOKES King Health and Rehabilitation Center

King Operator LLC Administrator Name: Jerry G. Horne MAIL: 115 White Road, , King, NC, 27021 SITE: 115 White Road, King, NC, 27021 Contact Name: Jerry Horne (336) 983-6505 Fax: (336) 985-5340 NH0555 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 96 Adult Care Home Beds Total: 24 Walnut Cove Health and Rehabilitation Center Walnut Cove HealthCare LLC Administrator Name: Nita J Davis MAIL: PO Box 158, , Walnut Cove, NC, 27052 SITE: 511 Windmill Street, Walnut Cove, NC, 27052 Contact Name: Nita J. Davis (336) 591-4353 Fax: (336) 591-7659 NH0316 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 90 Adult Care Home Beds Total: 0

Village Care of King	
Village Care of King, LLC	
Administrator Name: Amy Musick	
MAIL: 440 Ingram Road, , King, NC, 27021	
SITE: 440 Ingram Road, King, NC, 27021	
Contact Name: Amy Musick	
(336) 983-4900 Fax: (336) 983-4710 NH0507	
Expiry Date: 31-Dec-24	
Nursing Facility Beds Total: 96	
Adult Care Home Beds Total: 20	
SURRY	
Central Continuing Care	
CCC of Mount Airy Inc	
Administrator Name: Kyle Payne	
MAIL: 1287 Newsome Street, , Mount Airy, NC, 2703	0
SITE: 1287 Newsome Street, Mount Airy, NC, 27030	
Contact Name: Kyle Payne	
(336) 786-2133 Fax: (336) 786-2014 NH0516	
Expiry Date: 31-Dec-24	
Nursing Facility Beds Total: 120	
Adult Care Home Beds Total: 0	
PruittHealth-Elkin	
PruittHealth-Elkin LLC	
Administrator Name: Linda Reece	
MAIL: 1626 Jeurgens Court, Legal Dept, Norcross, GA 30093	١,
SITE: 560 Johnson Ridge Road, Elkin, NC, 28621	
Contact Name: Linda Reece	
(336) 835-7802 Fax: (336) 526-2881 NH0303	
Expiry Date: 31-Dec-24	
Nursing Facility Beds Total: 100	
Adult Care Home Beds Total: 0	
Surry Community Health Center by Harborview	
Surry Community Health Center by Harborview, LLC	
Administrator Name: Wanda Howlett	
MAIL: 542 Allred Mill Road, , Mount Airy, NC, 27030	)
SITE: 542 Allred Mill Road, Mount Airy, NC, 27030	
Contact Name: Wanda L Howlett	
(336) 789-5076 Fax: (336) 530-1360 NH0276	
Expiry Date: 31-Dec-24	
Nursing Facility Beds Total: 120	
Adult Care Home Beds Total: 0	

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

### As of 08/2024

#### **Chatham Nursing & Rehabilitation**

DGS Healthcare Elkin Inc Administrator Name: Julie Stafford MAIL: 700Johnson Ridge Road, , Elkin, NC, 28621 SITE: 700 Johnson Ridge Road, Elkin, NC, 28621 Contact Name: Julie Stafford (336) 527-7600 Fax: (336) 527-6056 NH0640 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 99 Adult Care Home Beds Total: 28

### SWAIN

#### **Mountain View Manor Nursing Center**

Southeastern Health Facilities Inc Administrator Name: Dennis C. Ramsey MAIL: 410 Buckner Branch Road, , Bryson City, NC, 28713 SITE: 410 Buckner Branch Road, Bryson City, NC, 28713 Contact Name: Dennis Ramsey (828) 488-2101 Fax: (828) 488-8502 NH0251 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 120 Adult Care Home Beds Total: 0

#### TRANSYLVANIA

#### Sapphire Ridge Health and Rehabilitation

Brevard NC Opco LLC Administrator Name: Susan Robinson MAIL: 115 N. Country Club Road, , Brevard, NC, 28712 SITE: 115 N. Country Club Road, Brevard, NC, 28712 Contact Name: Susan Robinson (828) 884-2031 Fax: (828) 884-2831 NH0277 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 147 Adult Care Home Beds Total: 0 The Oaks-Brevard The Oaks-Brevard LLC Administrator Name: Angelita A. Norman MAIL: 1626 Jeurgens Court, Legal Dept, Norcross, GA, 30093 SITE: 300 Morris Road, Brevard, NC, 28712 Contact Name: Angel Norman (470) 330-7816 Fax: (828) 877-3858 NH0563 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 110 Adult Care Home Beds Total: 10 UNION

Lake Park Nursing and Rehabilitation Center
Everest Long Term Care LLC
Administrator Name: Rafael Jackson
MAIL: 3315 Faith Church Rd., , Indian Trail, NC, 28079
SITE: 3315 Faith Church Road, Indian Trail, NC, 28079
Contact Name: Rafael Jackson
(704) 882-3420 Fax: (704) 882-5197 NH0592
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 120
Adult Care Home Beds Total: 0
PruittHealth-Union Pointe
The Heritage of Union County LLC
Administrator Name: Tyrone Lewis
MAIL: 1626 Jeurgens Court, Legal Dept, Norcross, GA, 30093
SITE: 3510 West Highway 74, Monroe, NC, 28110
Contact Name: Tyrone Lewis
(704) 291-8500 Fax: (704) 291-8501 NH0644
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 90
Adult Care Home Beds Total: 0
Jesse Helms Nursing Center
AHSNF, Inc.
Administrator Name: Linden Scotland
MAIL: 1411 Dove Street, , Monroe, NC, 28112
SITE: 1411 Dove Street, Monroe, NC, 28112
Contact Name: Linden Scotland
(980) 993-5700 Fax: (980) 993-5879 NH0657
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 70
Adult Care Home Beds Total: 0
White Oak of Waxhaw
NHC HealthCare - Waxhaw, LLC
Administrator Name: Lauren Cecil Greenwood
MAIL: 700 Howie Mine Road, , Waxhaw, NC, 28173
SITE: 700 Howie Mine Road, Waxhaw, NC, 28173
Contact Name: Lauren Cecil Greenwood
(704) 243-7640 Fax: (704) 243-7641 NH0628
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 100
Adult Care Home Beds Total: 0

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

### As of 08/2024

WA T

Monroe Rehabilitation Center LLC Administrator Name: Bryce Karstetter MAIL: 1212 Sunset Drive East, , Monroe, NC, 28112 SITE: 1212 Sunset Drive East, Monroe, NC, 28112 Contact Name: Bryce Karstetter (704) 283-8548 Fax: (704) 283-4664 NH0310 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 147 Adult Care Home Beds Total: 5 **Rock Rest Nursing & Rehabilitation** Accordius Health at Monroe LLC Administrator Name: Stacey A. McNeill MAIL: 204 Old Highway 74 East, , Monroe, NC, 28112 SITE: 204 Old Highway 74 East, Monroe, NC, 28112 Contact Name: Stacey A. McNeill (704) 800-0601 Fax: (704) 282-0935 NH0493 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 60 Adult Care Home Beds Total: 12 Autumn Care of Marshville Autumn Corporation Administrator Name: Kimberly Josephs MAIL: 311 West Phifer Street, , Marshville, NC, 28103 SITE: 311 West Phifer Street, Marshville, NC, 28103 Contact Name: Kimberly Josephs (704) 624-6643 Fax: (704) 624-2022 NH0421 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 110 Adult Care Home Beds Total: 10 VANCE

# Senior Citizens Home

Henderson SCH Operating LLC Administrator Name: Rebecca Martin MAIL: 2275 Ruin Creek Road, , Henderson, NC, 27537 SITE: 2275 Ruin Creek Road, Henderson, NC, 27537 Contact Name: Rebecca Martin (704) 834-4806 Fax: (252) 492-0911 NH0477 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 60 Adult Care Home Beds Total: 54

Camellia Gardens Center for Nursing and Rehabilitation
Beckford Drive Operating Company, LLC
Administrator Name: Natalie Desty
MAIL: 141 Washington Ave, , Lawrence, NY, 11559
SITE: 280 South Beckford Drive, Henderson, NC, 27536
Contact Name: Natalie desty
(252) 438-6141 Fax: (252) 438-6865 NH0307
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 78
Adult Care Home Beds Total: 0
Kerr Lake Nursing and Rehabilitation Center
Eagle Peak LTC Group
Administrator Name: Nancy Hughes
MAIL: PO Box 1148, , Henderson, NC, 27536
SITE: 1245 Park Avenue, Henderson, NC, 27536
Contact Name: Nancy Hughes
(252) 492-7021 Fax: (252) 492-2985 NH0353
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 92
Adult Care Home Beds Total: 23
AKE
Tower Nursing and Rehabilitation Center
Everest Long Term Care LLC
Administrator Name: Jacqueline Mitchell
MAIL: 3609 Bond Street, , Raleigh, NC, 27604

SITE: 3609 Bond Street, Raleigh, NC, 27604

NH0354

NH0317

Contact Name: Jacqueline Mitchell

Nursing Facility Beds Total: 180

Adult Care Home Beds Total: 6

Zebulon Rehabilitation Center LLC

Administrator Name: Gabriella Skillen

(919) 269-9621 Fax: (919) 269-5703

MAIL: 509 West Gannon Avenue, , Zebulon, NC, 27597

SITE: 509 West Gannon Avenue, Zebulon, NC, 27597

**Zebulon Rehabilitation Center** 

Contact Name: Steven Kerley

Nursing Facility Beds Total: 60

Adult Care Home Beds Total: 0

Expiry Date: 31-Dec-24

Expiry Date: 31-Dec-24

(919) 231-8113 Fax: (919) 231-6896

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

### As of 08/2024

Capital Nursing and Rehabilitation Center
Liberty Commons Nsg and Rehab Ctr of Wake Cty LLC
Administrator Name: Brandon Wood
MAIL: 3000 Holston Lane, , Raleigh, NC, 27610
SITE: 3000 Holston Lane, Raleigh, NC, 27610
Contact Name: Brandon Wood
(919) 865-0808 Fax: (919) 231-0943 NH0268
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 125
Adult Care Home Beds Total: 0
Sunnybrook Rehabilitation Center
Sunnybrook Rehabilitation Center LLC
Administrator Name: Kevin G. Walsh
MAIL: 25 Sunnybrook Road, , Raleigh, NC, 27610
SITE: 25 Sunnybrook Road, Raleigh, NC, 27610
Contact Name: Kevin G. Walsh
(919) 231-6150 Fax: (919) 231-8258 NH0146
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 95
Adult Care Home Beds Total: 0
Raleigh Rehabilitation Center
Raleigh Rehabilitation Center LLC
Administrator Name: Christina Jackson
MAIL: 616 Wade Avenue, , Raleigh, NC, 27605
SITE: 616 Wade Avenue, Raleigh, NC, 27605
Contact Name: Christina Jackson
(919) 828-6251 Fax: (919) 828-3294 NH0115
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 157
Adult Care Home Beds Total: 0
The Oaks at Whitaker Glen-Mayview
Whitaker Glen Inc
Administrator Name: None
MAIL: 1626 Jeurgens Court, Legal Dept, Norcross, GA, 30093
SITE: 513 East Whitaker Mill Road, Raleigh, NC, 27608
Contact Name: Lynethia NyTonya Holley
(919) 828-2348 Fax: (919) 828-7554 NH0007
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 139
Adult Care Home Beds Total: 0

The Laurels of Forest Glenn		
Oak Health Care Investors of North Carolina Inc		
Administrator Name: Darryl Taylor		
MAIL: 1101 Hartwell Street, , Garner, NC, 27529		
SITE: 1101 Hartwell Street, Garner, NC, 27529		
Contact Name: Darryl Taylor		
(919) 772-8888 Fax: (919) 772-4814 NH0506		
Expiry Date: 31-Dec-24		
Nursing Facility Beds Total: 120		
Adult Care Home Beds Total: 20		
Hillside Nursing Center of Wake Forest		
Hillside Nursing Center of Wake Forest Inc		
Administrator Name: Nicholas B. Cruz		
MAIL: P.O. Box 1826, , Wake Forest, NC, 27588		
SITE: 968 East Wait Avenue, Route 98 East, Wake Forest, NC, 27588		
Contact Name: Nicholas B. Cruz		
(919) 556-4082 Fax: (919) 554-4650 NH0525		
Expiry Date: 31-Dec-24		
Nursing Facility Beds Total: 130		
Adult Care Home Beds Total: 20		
Cary Health and Rehabilitation Center		
Cary HealthCare LLC		
Administrator Name: Jon D. Salter		
MAIL: 6590 Tryon Road, , Cary, NC, 27518		
SITE: 6590 Tryon Road, Cary, NC, 27518		
Contact Name: Jon D. Salter		
(919) 851-8000 Fax: (919) 859-6234 NH0511		
Expiry Date: 31-Dec-24		
Nursing Facility Beds Total: 120		
Adult Care Home Beds Total: 0		
Hillcrest Raleigh at Crabtree Valley		
Hillcrest Raleigh at Crabtree LLC		
Administrator Name: Lisa H. Lee		
MAIL: 3830 Blue Ridge Road, , Raleigh, NC, 27612		
SITE: 3830 Blue Ridge Road, Raleigh, NC, 27612		
Contact Name: Lisa Lee		
(919) 781-4900 Fax: (919) 424-4637 NH0428		
Expiry Date: 31-Dec-24		
Nursing Facility Beds Total: 134		
Adult Care Home Beds Total: 0		

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

### As of 08/2024

Dan E & Mary Louise Stewart Health Center of
Springmoor Inc
Administrator Name: Jessica T. Pagan
MAIL: 1500 Sawmill Road, , Raleigh, NC, 27615
SITE: 1500 Sawmill Road, Raleigh, NC, 27615
Contact Name: Jessica T Pagan
(919) 848-7078 Fax: (919) 848-7392 NH0383
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 173
Adult Care Home Beds Total: 18
Brittany Place
Samaritan Housing Foundation Inc
Administrator Name: Sivaprasad Parnam
MAIL: 17001 Searstone Drive, , Cary, NC, 27513
SITE: 210 Walker Stone Drive, Cary, NC, 27513
Contact Name: Sivaprasad Parnam
(919) 234-0319 Fax: (919) 234-0319 NH0636
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 25
Adult Care Home Beds Total: 14
Fuquay-Varina Health and Rehabilitation Center
Fuquay Operator LLC
Administrator Name: Cheryl Smith
MAIL: 410 S Judd Parkway SE, , Fuquay Varina, NC, 27526
SITE: 410 S Judd Parkway SE, Fuquay Varina, NC, 27526
Contact Name: Cheryl A Smith
(919) 577-0421 Fax: (919) 557-3683 NH0637
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 100
Adult Care Home Beds Total: 0
PruittHealth-Raleigh
PruittHealth-Raleigh LLC
Administrator Name: Jill Hess-Campbell
MAIL: 1626 Jeurgens Court, Legal Dept, Norcross, GA, 30093
SITE: 2420 Lake Wheeler Road, Raleigh, NC, 27603
Contact Name: Jill HessCampbell
(919) 755-0226 Fax: (919) 755-0313 NH0618
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 150
Adult Care Home Beds Total: 0

The Rosewood Health Center
The Cypress of Raleigh Club Inc
Administrator Name: Wyatt B. Pramann
MAIL: 8801 Cypress Lakes Drive, , Raleigh, NC, 27615
SITE: 8710 Cypress Club Drive, Raleigh, NC, 27615
Contact Name: Wyatt B. Pramann
(919) 518-8951 Fax: (919) 518-8970 NH0622
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 57
Adult Care Home Beds Total: 4
Perry Creek Health and Rehabilitation Center
North Raleigh Operator LLC
Administrator Name: Michael Bellaty
MAIL: 5201 Clarks Fork Drive, NW, , Raleigh, NC, 27616
SITE: 5201 Clarks Fork Drive, NW, Raleigh, NC, 27616
Contact Name: Michael Bellaty
(919) 872-7035 Fax: (919) 872-7035 NH0611
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 132
Adult Care Home Beds Total: 0
Swift Creek Health Center
Cary Senior Housing I OPCO, LLC
Administrator Name: Carolyn G. Yliniemi-Hirschler
MAIL: One Town Center Road Ste 300, , Boca Raton, FL, 33486
SITE: 221 Brightmore Drive, Cary, NC, 27511
Contact Name: Carolyn G. Yliniemi-Hirschler
(984) 465-4088 Fax: (000) 000-0000 NH0658
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 28
Adult Care Home Beds Total: 82
The Cardinal at North Hills
The Cardinal at North Hills Healthcare, LLC
Administrator Name: Jaime D. Pacheco
MAIL: 311 Garden at North Hills Street, , Raleigh, NC, 27609
SITE: 311 Garden at North Hills Street, Raleigh, NC, 27609
Contact Name: Jaime Pacheco
(984) 204-8444 Fax: (984) 204-8479 NH0653
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 15
Adult Care Home Beds Total: 55

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

### As of 08/2024

BellaRose Nursing and Rehab	Glenaire
BellaRose Nursing and Rehab Center, Inc.	Glenaire Inc
Administrator Name: Justin L Dixon	Administrator Name: Christian L. Childs
MAIL: P.O. Box 469, , Garner, NC, 27529	MAIL: 4000 Glenaire Circle, , Cary, NC, 27511
SITE: 200 BellaRose Lake Way, Garner, NC, 27529	SITE: 4000 Glenaire Circle, Cary, NC, 27511
Contact Name: Justin L Dixon	Contact Name: Luke Childs
(919) 985-8400 Fax: (919) 985-8399 NH0654	(919) 818-6520 Fax: (919) 467-0844 NH0549
Expiry Date: 31-Dec-24	Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 100	Nursing Facility Beds Total: 71
Adult Care Home Beds Total: 0	Adult Care Home Beds Total: 9
UNC Rex Rehabilitation and Nursing Care Center of Apex	Wellington Rehabilitation and Healthcare
Rex Hospital Inc	Wellington HealthCare LLC
Administrator Name: Michael Hess	Administrator Name: Lionel J. McCullough
MAIL: 911 South Hughes St., , Apex, NC, 27502	MAIL: 1000 Tandal Place, , Knightdale, NC, 27545
SITE: 911 South Hughes St., Apex, NC, 27502	SITE: 1000 Tandal Place, Knightdale, NC, 27545
Contact Name: Michael Hess	Contact Name: Lionel J. McCullough
(919) 363-6011 Fax: (919) 363-6014 NH0594	(919) 266-7744 Fax: (919) 266-2274 NH0544
Expiry Date: 31-Dec-24	Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 107	Nursing Facility Beds Total: 80
Adult Care Home Beds Total: 0	Adult Care Home Beds Total: 0
Windsor Point Continuing Care Retirement Community	WARREN
Windsor Point Inc	Warren Hills Nursing Center
Administrator Name: Amanda Green	Liberty Commons Nursing and Rehabilitation Center of
MAIL: 1221 Broad Street, , Fuquay-Varina, NC, 27526	Warren County LLC
SITE: 1221 Broad Street, Fuquay-Varina, NC, 27526	Administrator Name: Nelson M. Bogonko
Contact Name: AMANDA GREEN	MAIL: P.O. Box 618, , Warrenton, NC, 27589
(919) 552-4580 Fax: (919) 552-4979 NH0580	SITE: 864 US Hwy 158 Business West, Warrenton, NC, 27589
Expiry Date: 31-Dec-24	Contact Name: Nelson M. Bogonko
Nursing Facility Beds Total: 45	(910) 980-1271 Fax: (252) 257-5164 NH0360
Adult Care Home Beds Total: 55	Expiry Date: 31-Dec-24
Litchford Falls Health and Rehabilitation Center	Nursing Facility Beds Total: 140
Litchford Operator LLC	Adult Care Home Beds Total: 20
Administrator Name: John David Heath	WASHINGTON
MAIL: 8200 Litchford Road, , Raleigh, NC, 27615	The Carrolton of Plymouth
SITE: 8200 Litchford Road, Raleigh, NC, 27615	The Carrolton of Plymouth, LLC
Contact Name: John Heath	Administrator Name: Susan C. Ussery
(919) 878-7772 Fax: (919) 878-0950 NH0558	MAIL: 1084 US 64 East, , Plymouth, NC, 27962
Expiry Date: 31-Dec-24	SITE: 1084 US 64 East, Plymouth, NC, 27962
Nursing Facility Beds Total: 90	Contact Name: Susan Ussery
Adult Care Home Beds Total: 24	(252) 793-2100 Fax: (252) 793-1243 NH0419
	Expiry Date: 31-Dec-24

Nursing Facility Beds Total: 114 Adult Care Home Beds Total: 9

### Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

### As of 08/2024

#### WATAUGA

**Glenbridge Health and Rehabilitation** Glenbridge Health and Rehabilitation SNF, LLC Administrator Name: Kristy Jones MAIL: 211 Milton Brown Heirs Road, , Boone, NC, 28607 SITE: 211 Milton Brown Heirs Road, Boone, NC, 28607 Contact Name: Kristy Jones (828) 264-6720 Fax: (828) 264-9023 NH0400 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 134 Adult Care Home Beds Total: 0 The Foley Center at Chestnut Ridge Liberty Commons Nrsg & Rehab Center of Watauga Co., LLC Administrator Name: Laura Patrick MAIL: 621 ChestnutRidge Parkway, , Blowing Rock, NC, 28605 SITE: 621 ChestnutRidge Parkway, Blowing Rock, NC, 28605 Contact Name: Laura Patrick (828) 386-3251 Fax: (828) 386-3320 NH0638 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 92 Adult Care Home Beds Total: 20 WAYNE

# **Mount Olive Center**

SunBridge Regency-North Carolina LLC Administrator Name: Dennis F. McKinney MAIL: 228 Smith Chapel Road, , Mount Olive, NC, 28365 SITE: 228 Smith Chapel Road, Mount Olive, NC, 28365 Contact Name: Dennis F. McKinney (919) 658-9522 Fax: (919) 658-0543 NH0401 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 150 Adult Care Home Beds Total: 0

Willow Creek Nursing and Rehabilitation Center
Birch LTC Group LLC
Administrator Name: Wendy Stroud
MAIL: 2401 Wayne Memorial Drive, , Goldsboro, NC, 27532
SITE: 2401 Wayne Memorial Drive, Goldsboro, NC, 27532
Contact Name: Wendy Stroud
(919) 736-2121 Fax: (919) 736-2922 NH0379
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 200
Adult Care Home Beds Total: 0
Goldsboro Rehabilitation and Healthcare Center
Goldsboro Opco LLC
Administrator Name: Cassandra Miller
MAIL: 1700 Wayne Memorial Drive, , Goldsboro, NC, 27534
SITE: 1700 Wayne Memorial Drive, Goldsboro, NC, 27534
Contact Name: Cassandra Miller
(919) 731-2805 Fax: (919) 734-8882 NH0492
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 130
Adult Care Home Beds Total: 0

### WILKES

Wilkesboro Health and Rehabilitation, LLC
Wilkesboro Health and Rehabilitation, LLC
Administrator Name: Shelley J. Rogers
MAIL: 204 Old Brickyard Road, , North Wilkesboro, NC, 28659
SITE: 204 Old Brickyard Road, North Wilkesboro, NC, 28659
Contact Name: Shelley J. Rogers
(336) 667-2020 Fax: (336) 667-5357 NH0509
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 111
Adult Care Home Beds Total: 19
Ridge Valley Center for Nursing and Rehabilitation
College Street Operating Company, LLC
Administrator Name: Stacy Linhoff
MAIL: 141 Washington Ave, , Lawrence, NY, 11559
SITE: 1000 College Street, Wilkesboro, NC, 28697
Contact Name: Stacy Linhoff
(336) 575-4315 Fax: (336) 838-4019 NH0451
Expiry Date: 31-Dec-24
Nursing Facility Beds Total: 120
Adult Care Home Beds Total: 0

# Licensed by the State of North Carolina Department of Health and Human Services - Division of Health Service Regulation

### As of 08/2024

YA

YA

#### Westwood Hills Nursing and Rehabilitation Center

Eagle Peak LTC Group LLC Administrator Name: Phillip Hill MAIL: 1016 Fletcher Street, , Wilkesboro, NC, 28697 SITE: 1016 Fletcher Street, Wilkesboro, NC, 28697 Contact Name: Phillip Hill (336) 667-9261 Fax: (336) 667-4825 NH0295 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 176 Adult Care Home Beds Total: 10

#### WILSON

Harmony Park at Wilson Accordius Health at Wilson LLC Administrator Name: Sara H. Deiter MAIL: 1804 Forest Hills Road W, , Wilson, NC, 27893 SITE: 1804 Forest Hills Road W, Wilson, NC, 27893 Contact Name: Sara H. Deiter (252) 237-8161 Fax: (252) 237-0447 NH0272 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 110 Adult Care Home Beds Total: 0 Wilson Pines Nursing and Rehabilitation Center Spruce LTC Group LLC Administrator Name: Michael Kelly MAIL: 403 Crestview Avenue, , Wilson, NC, 27893 SITE: 403 Crestview Avenue, Wilson, NC, 27893 Contact Name: Michael Kelly (252) 237-0724 Fax: (252) 234-0499 NH0218 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 95 Adult Care Home Beds Total: 30 Wilson Healthcare and Rehabilitation Center Wilson Opco LLC Administrator Name: James P. Carlone Jr. MAIL: 2501 Downing St SW, , Wilson, NC, 27893 SITE: 2501 Downing St SW, Wilson, NC, 27893 Contact Name: James Carlone (252) 237-6300 Fax: (252) 234-0488 NH0487 Expiry Date: 31-Dec-24 Nursing Facility Beds Total: 99 Adult Care Home Beds Total: 0

Wilson Rehabilitation and Nursing Center	
DLP WilMed Nursing Care and Rehabilitation Ctr LLC	
Administrator Name: Julia Batts	
MAIL: 1705 South Tarboro Street, , Wilson, NC, 27893	
SITE: 1705 South Tarboro Street, Wilson, NC, 27893	
Contact Name: Julia Batts	
(252) 399-8998 Fax: (252) 399-8996 NH0530	
Expiry Date: 31-Dec-24	
Nursing Facility Beds Total: 90	
Adult Care Home Beds Total: 0	
ADKIN	
Willowbrook Rehabilitation and Care Center	
Willowbrook HealthCare LLC	
Administrator Name: Kennedy J. Wale	
MAIL: 333 E. Lee Avenue, , Yadkinville, NC, 27055	
SITE: 333 E. Lee Avenue, Yadkinville, NC, 27055	
Contact Name: Kennedy J. Wale	
(336) 679-8028 Fax: (336) 679-4072 NH0568	
Expiry Date: 31-Dec-24	
Nursing Facility Beds Total: 76	
Adult Care Home Beds Total: 0	
Yadkin Nursing Care Center	
Liberty Commons Nsg and Rehab Ctr of Yadkin Co, LLC	
Administrator Name: Elizabeth Lockett	
MAIL: 903 West Main Street, , Yadkinville, NC, 27055	
SITE: 903 West Main Street, Yadkinville, NC, 27055	
Contact Name: Elizabeth Lockett	
(336) 679-8863 Fax: (336) 679-3009 NH0224	
Expiry Date: 31-Dec-24	
Nursing Facility Beds Total: 147	
Adult Care Home Beds Total: 20	
ANCEY	
Smoky Ridge Health and Rehabilitation	
Smokey Ridge Health and Rehabilitation SNF LLC	
Administrator Name: Carla Shade	
MAIL: 310 Pensacola Road, , Burnsville, NC, 28714	
SITE: 310 Pensacola Road, Burnsville, NC, 28714	
Contact Name: Carla Vee Shade	
(020) (02 0750 E (020) (02 0025 NU0467	

(828) 682-9759 Fax: (828) 682-9825 NH0467

Expiry Date: 31-Dec-24

Nursing Facility Beds Total: 140

Adult Care Home Beds Total: 0

# Total number of facilities: 422