

Plan of Correction

SECTION A - IDENTIFYING INFORMATION

Facility Name: ANGIE'S LIL ANGELS	Type of Facility: Center <input checked="" type="checkbox"/> OST <input type="checkbox"/> Day <input checked="" type="checkbox"/> Family <input type="checkbox"/> University <input type="checkbox"/> Night <input type="checkbox"/> Group <input type="checkbox"/>
Physical Address: 511 STERLING STREET PIEDMONT, AL 36272	Mailing Address: 511 STERLING STREET PIEDMONT, AL, 36272
Telephone Number: (256) 447-9670	Licensee: ANGIE'S LIL ANGELS, LLC
Capacity: 75	Director: ANGELA BEECHAM
Age Range: 3 Weeks to 12 Years	Date Prepared: 4/2/2026

SECTION B - BASIS FOR PLAN OF CORRECTION

List each deficiency, the plan of action, and the target date for each item:

Deficiency Plan of Correction	Date to be completed
Failed - Interstate CA/N if applicable (within 5 years), Staff Checklist Plan of Action - Will have employee to complete a Part B Can Form for GA	4/23/2026