

Plan of Correction

SECTION A - IDENTIFYING INFORMATION

Facility Name: SUCCESS BY6/MLK ELEMENTARY PRE-K CLASS	Type of Facility: Center ☒ OST ☐ Day ☒ Family ☐ University ☐ Night ☐ Group ☐
Physical Address: 4655 GATEWAY STREET MONTGOMERY, AL 36108	Mailing Address: FAMILY GUIDANCE CENTER , 2358 FAIRLANE DRIVE MONTGOMERY, AL, 36116-_____
Telephone Number: (334) 284-8080	Licensee: FAMILY GUIDANCE CENTER OF ALABAMA, INC.
Capacity: 18	Director: ANITA LANDRUM MCCANTS
Age Range: 3 Years to 5 Years	Date Prepared: 9/4/2026

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 - Most recent Health department inspection report and food permit or written permission for catering food, Inspection Form Plan of Action - posted day of visit	9/4/2026
Failed - Menu for meals and snacks/dated, Inspection Form Plan of Action - corrected day of visit	9/4/2026
Failed - Poison control center, Inspection Form Plan of Action - corrected day of visit	9/4/2026
Failed - Name of director/staff in charge, Inspection Form Plan of Action - corrected day of visit	9/4/2026