

CHANGE OF OWNERSHIP

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SEP 21 2015

Part I: Purchasing Organization Information

STATE HEALTH PLANNING AND DEVELOPMENT AGENCY

Name of Organization: ANGELS FOR THE ELDERLY I, INC.

Facility Name: (ADPH Licensure name) ANGELS FOR THE ELDERLY I

SHPDA ID Number: CON 223Z - SCALE

Address (PO Box #): 52 ANGELS CT.

City, State, Zip, County: MONTGOMERY, AL. 36109 / MONTGOMERY COUNTY

Number/Type Licensed Beds: 16 SPECIALTY CARE

Owner(s): ANGELS FOR THE ELDERLY I, INC.

Operator(s): ANGELS FOR THE ELDERLY I AS AN ASSISTED LIVING FACILITY (SPECIALTY CARE)

Part II: Selling Organization Information

Name of Organization: ANGELS FOR THE ELDERLY IV, INC.

Address (PO Box #): 40 ANGELS CT.

City, State, Zip, County: MONTGOMERY, AL. 36105 / MONTGOMERY COUNTY

Number/Type Licensed Beds: 16 SPECIALTY CARE

Owner(s): ANGELS FOR THE ELDERLY IV, INC.

Operator(s): ANGELS FOR THE ELDERLY IV, INC. ASSISTED LIVING FACILITY (SPECIALTY CARE)

Part III: Value of Consideration

Monetary Value of Purchase: \$ 580,074.00 No./Type Beds: 16

Terms of Purchase: NON MONETARY TRANSFER
(add more pages as necessary to describe the sale)

Part IV: List of Certificate of Need Authority

Number of Beds: 16

Types of Institutional Health Services: SCALE

List Service Area by County for Home Health Agencies: NPS

On an Attached Sheet Please Address the Following:

- *1.) The financial scope of the project to include the preliminary estimate of costs broken down by equipment, construction, and yearly operating costs.
- *2.) The services to be offered by the proposal (the applicant will state whether he has previously offered the service and whether the service is an extension of a presently offered service, or whether the service is a new service).
- *3.) Whether the proposal will include the addition of any new beds.
- *4.) Whether the proposal will involve the conversion of beds.
- *5.) Whether the assets and stock (if any) will be acquired.

Part V: Certification of Information

I certify that I agree to provide the information necessary (financial, utilization of services and beds, etc.) so the new owner can have the necessary information to complete reports as necessary for the entire fiscal year. The purchaser has agreed to these terms,

Seller(s) Signature(s): Susan J. Durdan Jerry M. Durdan
 Owner(s): _____
 Operator(s): Susan J. Durdan _____
 Title/Date: PRESIDENT 09/21/15 SECRETRES. 09/21/15

I certify that I will be responsible for retaining records as necessary to complete reports required for the entire fiscal year, and agree to these terms. I have enclosed a check in the amount of \$2,500 made payable to 'Alabama State Health Planning and Development Agency' to cover the cost of the change of ownership.

YES NO The above Purchaser and Seller have agreed to these purchase terms.

Purchaser Signature: Susan J. Durdan
 Title/Date: PRESIDENT 09/21/15

Angels for the Elderly, Inc.

Specialty Care Assisted Living Homes

40 Angels Court

Montgomery, AL 36109

Phone # 270-8050 Fax # 279-9605

September 21, 2015

HOW WE "GOT HERE" RECAP

In 1996 we merged three (3) 16 bed assisted living facilities at a Montgomery County campus in the city of Montgomery with addresses of 44 Angels Ct., 48 Angels Ct., and 52 Angels Ct. known separately as Angels for the Elderly I, II, and III.

In 2001 we applied for and received CON approval for a SCALF conversion for Angels for the Elderly I, II, and III. We successfully converted Angels for the Elderly II and III in 2001 and received our SCALF license for Angels for the Elderly II and III.

We were given one (1) year with an additional one (1) year if requested to convert Angels for the Elderly I. In 2003 we requested the CON on Angels for the Elderly I be transferred to a new project Angels for the Elderly IV address 40 Angels Ct., located on the same campus as Angels I Assisted Living at 52 Angels Ct., and Angels II and III Specialty Care Assisted Living at 44 Angels Ct. and 48 Angels Ct.

We built Angels for the Elderly IV with CON transferred from Angels for the Elderly I Assisted Living. Angels for the Elderly IV was set up and opened as a SCALF in 2003 with the separate corporate set up due to the construction financing at the Angels IV project. Our intent from the beginning was to merge Angels IV into Angels I after opening and operating for a short period of time.

We merged Angels IV into Angels I in 2005 and since we did not have to do anything such as a transfer of ownership for the 1996 merger then we proceeded accordingly. Obviously this was the wrong thing to do. We now come before you with full intent to comply with any and all procedures required of SHPDA and pay the necessary fees which I have included with this document.

Cordially,



Susan L. Durden
Administrator/Owner

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Angels for the Elderly, Inc. STATE HEALTH PLANNING
AND DEVELOPMENT AGENCY

Specialty Care Assisted Living Homes

40 Angels Court

Montgomery, AL 36109

Phone # 270-8050 Fax # 279-9605

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TRANSFER OF OWNERSHIP QUESTIONNAIRE

1. This is a transfer of existing facility (Angels IV) into an existing entity known as Angels for the Elderly I, Inc. The owner and operators of both facilities are the same (Susan L. Durden and Jerry M. Durden).
2. The service is a continuation of services offered since 2005 and has offered the same services at the same campus via Angels II and III (Specialty Care Assisted Living Facilities).
3. No new beds added.
4. No conversion of beds.
5. Assets and stock to be transferred via a non-monetary transfer.