



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

December 22, 2020

Catherine Reese  
New Friends Dementia Community, LLC  
3700 W Michigan Ave  
Kalamazoo, MI 49006

RE: License #: AL390299685  
**New Friends Dementia Community 1**  
**3700 W. Michigan Ave.**  
**Kalamazoo, MI 49006**

Dear Ms. Reese:

Attached is the Addendum to the Original Licensing Study Report for the above referenced facility.

Please review the enclosed documentation for accuracy and contact me with any questions. In the event that I am not available, and you need to speak to someone immediately, please contact the local office at (517) 284-9730.

Sincerely,

A handwritten signature in blue ink that reads "Michele Streeter".

Michele Streeter, Licensing Consultant  
Bureau of Community and Health Systems  
427 East Alcott  
Kalamazoo, MI 49001  
(269) 251-9037

enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
BUREAU OF COMMUNITY AND HEALTH SYSTEMS  
ADDENDUM TO ORIGINAL LICENSING STUDY REPORT**

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AL390299685
<b>Licensee Name:</b>	New Friends Dementia Community, LLC
<b>Licensee Address:</b>	3700 W Michigan Ave Kalamazoo, MI 49006
<b>Licensee Telephone #:</b>	(269) 372-6100
<b>Administrator:</b>	Catherine Reese
<b>Licensee Designee:</b>	Catherine Reese
<b>Name of Facility:</b>	New Friends Dementia Community 1
<b>Facility Address:</b>	3700 W. Michigan Ave. Kalamazoo, MI 49006
<b>Facility Telephone #:</b>	(269) 372-6100
<b>Capacity:</b>	20
<b>Program Type:</b>	ALZHEIMERS AGED

**II. Purpose of Addendum**

Licensee designee Catherine Reese, on behalf of New Friends Dementia Community, LLC., requested the facility's name be changed.

**III. Methodology**

On 12/15/2020, Ms. Reese submitted a written request to change the facility's name from New Friends Dementia Community 1 to Vibrant Life Senior Living Kalamazoo 1.

**IV. Description of Findings and Conclusions**

I verified with Ms. Reese that the requested name change was not due to a change of licensee and/or a change in controlling interest.

**V. Recommendation**

I recommend the name of the facility be change from New Friends Dementia Community 1 to Vibrant Life Senior Living Kalamazoo 1.

*Michele Streeter*

12/21/2020

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Michele Streeter  
Licensing Consultant

\_\_\_\_\_  
Date

Approved:

*Dawn Timm*

12/22/2020

\_\_\_\_\_  
Dawn Timm  
Area Manager

\_\_\_\_\_  
Date