



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

December 20, 2024

Andrew Akunne
Mary Rose Corporation
Unit A
3879 Packard Rd.
Ann Arbor, MI 48108

RE: License #: AM820010013
Mary Rose Residence
22293 Sibley Road
Brownstown Township, MI 48192

Dear Mr. Akunne:

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 (313) 456-0380.

Sincerely,

A handwritten signature in cursive script, appearing to read "Denasha Walker".

Denasha Walker, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Pl. Ste 9-100
3026 W. Grand Blvd
Detroit, MI 48202
(313) 300-9922

enclosure

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

I. IDENTIFYING INFORMATION

License #: AM820010013

Licensee Name: Mary Rose Corporation

Licensee Address: Unit A
3879 Packard Rd.
Ann Arbor, MI 48108

Licensee Telephone #: (313) 479-4652

Administrator/Licensee Designee: Andrew Akunne, Designee

Name of Facility: Mary Rose Residence

Facility Address: 22293 Sibley Road
Brownstown Township, MI 48192

Facility Telephone #: (734) 479-4652

Capacity: 12

Program Type: PHYSICALLY HANDICAPPED
DEVELOPMENTALLY DISABLED
MENTALLY ILL
AGED
ALZHEIMERS

II. Purpose of Addendum

The purpose of this addendum is to modify the license of Mary Rose Residence to include mentally ill (MI), developmentally disability (DD), and physically handicapped populations, and special certification.

III. Methodology

12/20/2024 – Contact - Document Received

A modification of the terms of the registration/license form requesting to modify the license of Mary Rose Residence to include MI, DD, and physically handicapped populations, and special certification.

12/20/2024 – SC-Application Received – Original

12/20/2024 – Contact - Document Received

Program statement and admission policy including MI, DD, and physically handicapped populations.

IV. Description of Findings and Conclusions

The licensee designee and administrator, Andrew Akunne is the licensee designee and/or administrator for multiple active AFC small and medium group homes. He has over 30 years of experience working with individuals diagnosed with MI, DD and physically handicapped. Andrew Akunne has demonstrated his ability to provide adequate care in numerous adult foster care facilities.

The licensee designee submitted a program statement and admission policy reflecting the MI, DD, and physically handicapped populations; the written request for modification of the term of the registration/license form and special certification application.

The licensee designee acknowledges an understanding of the training and qualification requirements for direct care staff prior to each person working in the facility in that capacity or being considered as part of the staff –to- resident ratio.

V. Recommendation

I recommend the license be modified to include mentally ill, developmentally disabled and physically handicapped populations, and special certification.



12/20/2024

Denasha Walker
Licensing Consultant

Date