



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

June 8, 2026

Steven Gerdeman & Morgan Michelle Bailey
Extended Care At Fremont, LLC
747 Tamarack Ave NW
Grand Rapids, MI 49504

RE: License #: AL130411643
Extended Care At Fremont
54 Fremont St.
Battle Creek, MI 49017

Dear Mr. Gerdeman & Ms. Bailey:

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 (616) 356-0100.

Sincerely,

Kevin L. Sellers

Kevin Sellers, Licensing Consultant
Department of Licensing and Regulatory Affairs
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503
(517) 230-3704
SellersK1@michigan.gov

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AL130411643
Licensee Name:	Extended Care At Fremont, LLC
Licensee Address:	747 Tamarack Ave NW Grand Rapids, MI 49504
Licensee Telephone #:	(419) 494-4008
Administrator:	Morgan Michelle Bailey
Licensee Designee:	Steven Gerdeman & Morgan Michelle Bailey
Name of Facility:	Extended Care At Fremont
Facility Address:	54 Fremont St. Battle Creek, MI 49017
Facility Telephone #:	(419) 494-4008
Capacity:	20
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. Purpose of Addendum

Steven Gerdeman and Morgan Bailey requested modifying the license of the facility due to Morgan Bailey’s name change following her recent marriage.

III. Methodology

On 5/25/26, received an email from co-licensee/administrator Morgan Bailey. Morgan Bailey reported recently getting married. Morgan Bailey requested knowing the required steps in order for a name change following her recent marriage. Morgan Bailey was informed copy of her marriage certificate and copies of her social security card and driver’s license change were required.

On 6/5/26, I received and reviewed documentation from Social Security Administration, Secretary of State, and marriage certificate confirming the name change to Morgan Michelle Turner. I emailed a completed BCHS_5055 form to Steven Gerdeman and Morgan Bailey for signature.

IV. Description of Findings and Conclusions

The facility was originally licensed on 7/25/22 with Steven Gerdeman as the licensee designee and administrator. On 12/4/25 Steven Gerdeman submitted a request appointing Morgan Bailey as co-licensees and administrator and approved on 1/8/26.

Morgan Michelle Bailey changed her name to Morgan Michelle Turner and the changes will be made in BITS to reflect her new name on all licensing documents for the following facility: AL130411643 Extended Care at Fremont, LLC

V. Recommendation

It is recommended the co-licensee designee and administrator name on the above licensed facility changed from Morgan Michelle Bailey to Morgan Michelle Turner effective 6/8/26.

Kevin L Sellers

6/8/26

Kevin Sellers
Licensing Consultant

Date

Approved By:

Russell Misiak

6/10/26

Russell B. Misiak
Area Manager

Date