

NOTICE OF CHANGE OF OWNERSHIP/CONTROL

The following notification of intent is provided pursuant to all applicable provisions of ALA. CODE § 22-21-270 (1975 as amended) and ALA. ADMIN. CODE r. 410-1-7-.04. This notice must be filed at least twenty (20) days prior to the transaction.

☐ Change in Direct Ownership or Control (of a vested Facility; ALA. CODE §§ 22-20-271(d), (e))

☐ Change in Certificate of Need Holder (ALA. CODE § 22-20-271(f))

☒ Change in Facility Management (Facility Operator)

Any transaction other than those above-described requires an application for a Certificate of Need.

Part I: Facility Information

SHPDA ID Number: 055-S2801
(This can be found at www.shpda.alabama.gov, Health Care Data, ID Codes)

Name of Facility/Provider: Royal Haven at Regency Pointe
(ADPH Licensure Name)

Physical Address: 510 E Grand Ave
Rainbow City, AL 35906

County of Location: ETOWAH

Number of Beds/ESRD Stations: 12

CON Authorized Service Area (Home Health and Hospice Providers Only). Attach additional pages if necessary.

Part II: Current Authority (Note: If this transaction will result in a change in direct ownership or control, as defined under ALA. CODE § 22-20-271(e), please attach organizational charts outlining current and proposed structures.)

Owner (Entity Name) of Facility named in Part I: NHI REIT OF ALABAMA, L.P. (Property Owner)

Mailing Address: 3461 Bonita Bay Blvd
Bonita Springs, FL 34134

Operator (Entity Name): Discovery Regency Leasing LLC (Licensee Entity)

Part III: Acquiring Entity Information

Name of Entity: The Haven at Regency Pointe

Mailing Address: 272 Wateree River Road
Myrtle Beach, SC 29588

Operator (Entity Name): William James Group, LLC

Proposed Date of Transaction is
on or after: 11/01/2024

Part IV: Terms of Purchase

Monetary Value of Purchase: \$ 0.00

Type of Beds: SCALF

Number of Beds/ESRD Stations: 12

Financial Scope: to Include Preliminary Estimate of the Cost Broken Down by Equipment, Construction, and Yearly Operating Cost:

Projected Equipment Cost: \$ 0.00

Projected Construction Cost: \$ 0.00

Projected Yearly Operating Cost: \$ 369,823.80


Projected Total Cost: \$ 369,823.80


On an Attached Sheet Please Address the Following:

- 1.) The services to be offered by the proposal (the applicant will state whether he has previously offered the service, whether the service is an extension of a presently offered service, or whether the service is a new service).
- 2.) Whether the proposal will include the addition of any new beds.
- 3.) Whether the proposal will involve the conversion of beds.
- 4.) Whether the assets and stock (if any) will be acquired.

Part V: Certification of Information**Current Authority Signature(s):**

The information contained in this notification is true and correct to the best of my knowledge and belief.

Owner(s): 

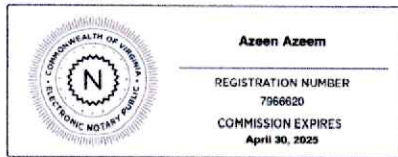
Operator(s): 

Title/Date: Authorized Signatory 10/31/2024

Commonwealth of Virginia, County of Prince William

SWORN to and subscribed before me, this 31st day of October, 2024.

(Seal)



Electronic Notary Public

Notary Public

My Commission Expires: 04/30/2025

Notarized remotely online using communication technology via Proof.

Acquiring Authority Signature(s):

I agree to be responsible for reporting of all services provided during the current annual reporting period, as specified in ALA. ADMIN. CODE r. 410-1-3-.12. The information contained in this notification is true and correct to the best of my knowledge and belief.

Purchaser(s):

Operator(s):

Title/Date: Chief Operating Officer 11/1/24SWORN to and subscribed before me, this 1st day of November, 2024.

(Seal)



Notary Public

My Commission Expires: August 1, 2034**SAVE****PRINT****SUBMIT**

Author: Alva M. Lambert

Statutory Authority: § 22-21-271(c), Code of Alabama, 1975

History: New Rule