

9-16-02

FILED

JAN - 8 02

CLERK

**STATE OF FLORIDA
AGENCY FOR HEALTH CARE ADMINISTRATION**

ORCHARD MEADOWS ASSISTED
LIVING FACILITY,

Petitioner,

DOAH CASE NO. 02-1909
FRAES NO. 2002013601
RENDITION NO. AHCA-02

vs.

AGENCY FOR HEALTH CARE
ADMINISTRATION,

Respondent.

AT

03
JAN 16
PM 2:33
FILED
ADMINISTRATIVE
HEARINGS

BJS-Closed

FINAL ORDER

This cause was referred to the Division of Administrative Hearings and assigned to an Administrative Law Judge (ALJ) for a formal administrative hearing and the entry of a Recommended Order. The Recommended Order of September 16, 2002, is attached to this Final Order and incorporated herein by reference.

RULING ON EXCEPTIONS

No exceptions were filed in this case.

FINDINGS OF FACT

The Agency adopts the findings of fact set forth in the Recommended Order.

CONCLUSIONS OF LAW

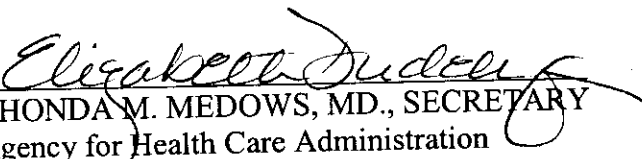
The Agency adopts the conclusions of law set forth in the Recommended Order.

IT IS THEREFORE ADJUDGED THAT:

In accordance with the Recommended Order, Petitioner, Orchard Meadows Assisted Living Facility, shall pay a fine of \$7,875.00 and any renewal fees, including any appropriate late fees, within thirty (30) days of the issuance of this Final Order. Such

payment shall be by check made payable to State of Florida, Agency for Health Care Administration, and shall be mailed to: Office of Finance and Accounting, 2727 Mahan Drive, Fort Knox Building 2, Mail Stop 14, Tallahassee, Florida 32308. Upon payment in full of all fines and fees within thirty (30) days of the issuance of this Final Order, Petitioner's license shall be renewed. If full payment is not timely made, the application shall be denied and Petitioner shall cease operation as an assisted living facility.

DONE and ORDERED in DOAH Case No. 02-1909 this 31 day of December, 2002, in Tallahassee, Florida.

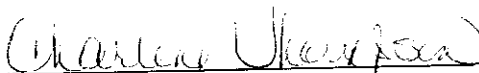

RHONDA M. MEDOWS, MD., SECRETARY
Agency for Health Care Administration

NOTICE OF RIGHT TO JUDICIAL REVIEW

A PARTY WHO IS ADVERSELY AFFECTED BY THIS FINAL ORDER IS ENTITLED TO JUDICIAL REVIEW, WHICH SHALL BE INSTITUTED BY FILING THE ORIGINAL NOTICE OF APPEAL WITH THE AGENCY CLERK OF AHCA, AND A COPY OF THE NOTICE, ALONG WITH THE FILING FEE PRESCRIBED BY LAW, WITH THE DISTRICT COURT OF APPEAL IN THE APPELLATE DISTRICT WHERE THE AGENCY MAINTAINS ITS HEADQUARTERS OR WHERE A PARTY RESIDES. REVIEW PROCEEDINGS SHALL BE CONDUCTED IN ACCORDANCE WITH THE FLORIDA APPELLATE RULES. THE NOTICE OF APPEAL MUST BE FILED WITHIN 30 DAYS OF THE RENDITION OF THE ORDER TO BE REVIEWED.

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a true and correct copy of the foregoing Final Order has been furnished by U.S. or interoffice mail to the persons named below on this 6 day of January, 2002.


for Lealand L. McCharen, Agency Clerk
Agency for Health Care Administration
2727 Mahan Drive, MS #3
Tallahassee, FL 32308-5403

COPIES FURNISHED TO:

Barbara J. Staros
Administrative Law Judge
Division of Administrative Hearings
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