Alcohol and Marijuana Control Office 550 W 7<sup>th</sup> Avenue, Suite 1600 Anchorage, AK 99501

alcohol.licensing@alaska.gov

https://www.commerce.alaska.gov/web/amco

Phone: 907.269.0350

#### Alaska Alcoholic Beverage Control Board

## **Tourism Statement Form**

- A new, transfer, or renewal application for a Tourism Site License must be accompanied by this form which
  explains how the establishment satisfies the requirements listed under AS 04.11.400 (d), 3 AAC 304.325.
  - You must <u>provide complete responses to all questions</u> or your application will be returned and will not be scheduled for the next ABC board meeting until the application is deemed complete by AMCO staff.
- All questions must be answered on this form. Do not attach other documents, or they will be returned.
- Do not provide documents and/or statements not requested.

## **Mandatory Points to be Included**

1. Explain how issuance of a liquor license at your establishment has/will keep encouraging tourism:

As a pillow in the Talkeethe community, the telkectus Alakan lodge maintains excellent working relativiships with cruise ship companies and many other townson industry businesses to provide its serveres to. We are available to book a variety of local towns along with providing 212 well-appointed rooms and two restaurants for travelers. Our neeting Spaces can accommodate groups up to 150 guests to promote meetings, conferences i weddings in an idyllie setting. Our livense allows us to offer overse a full beverase selection with their meals while they emjoy the breathtaking Alaska Range.

2. Explain how the facility was or will be improved in accordance with this application: (this includes planned renovations, repairs, updates to the facility/grounds)

There have not been any recent construction projects but work is continually done to keep the furnitur, fixture, and facilities in top working order.



3.	Who operates the Liquor License?
	CATE Alaska Tourism Corporation
	CATE Alaska Tourism Corporation  DBA Talkeetua Alaskan Lodge
4.	Do you offer room rentals to the traveling public? Yes No (if no, skip to question 5)
	a. If so, how many of these rooms are available?
	212
	b. Do any of the rental rooms have kitchen facilities (such as: a separate sink for food preparation and refrigeration/cooking appliance devices, including a microwave)? Yes No
	i. If yes, how many of the rental rooms have kitchen facilities that meet this definition?
	c. Do you stock alcoholic beverages in guest rooms? Yes No
5.	Is your facility located within an airport terminal? Yes No
5.	Does your establishment include a dining facility? Yes No
7.	Are additional amenities available to your guests through your establishment? Yes No
	a. If Yes, list your available amenities that directly pertain to this license type:
	Our staff is available to inform! book tours below:  -ftyle seeing -Jet booting
	· fishing
	· Zip Ining · Cofting
	Dog Konnel tours

AMCO

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD FORM CONTROL

LICENSE NUMBER

3931

XXXX

ISSUED 5/03/2021 ABC BOARD

LIQUOR LICENSE 2021 - 2022

LICENSE RENEWAL APPLICATION DUE DECEMBER 31, 2022 (AS 04.11.270(b))

THIS LICENSE EXPIRES MIDNIGHT FEBRUARY 28, 2023 UNLESS DATED BELOW

TYPE OF LICENSE: Beverage Dispen

LICENSE FEE: \$2,500.00

1106

Talkeetna Alaskan Lodge

23601 S Talkeetna Spur

Mail Address:

D/B/A:

CATC Alaska Tourism Corporation 509 W 4th Avenue Anchorage, AK 99501 CITY / BOROUGH:

Outside City Limits

Matanuska-Susitna Borough

This license cannot be transferred without permission of the Alcoholic Beverage Control Board

[ ] Special restriction - see reverse side

ISSUED BY ORDER OF THE ALCOHOLIC BEVERAGE CONTROL BOARD

DIRECTOR

04-900 (REV 9/09)

THIS LICENSE MUST BE POSTED IN A VISIBLE PLACE ON THE PREMISES

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD FORM CONTROL

LICENSE NUMBER

XXXX

ISSUED 5/03/2021

**ABC BOARD** 

**2021 - 2022** 

LICENSE RENEWAL APPLICATION DUE DECEMBER 31, 2022 (AS 04.11.270(b))

3931

THIS LICENSE EXPIRES MIDNIGHT FEBRUARY 28, 2023 UNLESS DATED BELOW

TYPE OF LICENSE: Beverage Disper

LICENSE FEE: \$2,500.00

CITY / BOROUGH: Outside City Limits

Matanuska-Susitna Borough

This license cannot be transferred without permission of the Alcoholic Beverage Control Board

[ ] Special restriction - see reverse side

ISSUED BY ORDER OF THE ALCOHOLIC BEVERAGE CONTROL BOARD

COPY

DIRECTOR

THIS LICENSE MUST BE POSTED IN A VISIBLE PLACE ON THE PREMISES 04-900 (REV 9/09)

D/B/A:

Talkeetna Alaskan Lodge 23601 S Talkeetna Spur

Mailing Address:

CATC Alaska Tourism Corporation

509 W 4th Avenue Anchorage, AK 99501



Alcohol and Marijuana Control Office 550 W 7<sup>th</sup> Avenue, Suite 1600 Anchorage, AK 99501 <u>alcohol.licensing@alaska.gov</u>

https://www.commerce.alaska.gov/web/amco

Phone: 907.269.0350

## Alaska Alcoholic Beverage Control Board

# **Master Checklist: Renewal Liquor License Application**

Daine Business Ass	T-11.	- to - Alaska			License Number:	2024
Doing Business As:	-	etna Alaska		License Number:	3931	
License Type:			sary - Tourisr	n		Т
Examiner:	14	istira (	5.		Transaction #:	100033545
Document		Received	Completed	Notes P	fee receipt: 11	00069926
AB-17: Renewal Applic	ation	1/4	5.3-2021		ostmarked by 12	
App and License Fees		1/4	5-3-241			
Supplemental Docum	ent	Received	Completed	Notes		-
Tourism/Rec Site State	ement	1/4	5-3-2421			
AB-25: Supplier Cert (\	NS)					WW.
AB-29: Waiver of Oper	ation					
AB-30: Minimum Oper	ation					
AB-33: Restaurant Affi	davit					
COI / COC / 5 Star					VP-	
FP Cards & Fees / AB-0	)8a	5-3-2021	5-3-2021	ABOSa,	fee, FP	
Late Fee						
Names on FP Cards:		_				
Names on FP Cards:		Ja	son	Creed		
						Yes No
Selling alcohol in respo	onse to v	written order (pa	ckage stores)?			
Mailing address and co	ontact in	formation differe	ent than in databa	ase (if yes, updat	te database)?	X
In "Good Standing" wi	th CBPL	(skip this and ne	kt question for so	le proprietor)?		X
Officers and stockhold	ers mate	ch CBPL and data	base (if "No", det	ermine if transfe	er necessary)?	X
LGB 1 Response:	rat.	- 50	LGB 2 Res	ponse:	NIA	
Waive	Protest	Lapsed	☐ Wai	ve Prot	test Lapsed	



Alcohol and Marijuana Control Office 550 W 7<sup>th</sup> Avenue, Suite 1600 Anchorage, AK 99501 alcohol.licensing@alaska.gov https://www.commerce.alaska.gov/web/amco

Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

# Form AB-17: 2021/2022 License Renewal Application

This form and any required supplemental forms must be completed, signed by the licensee, and postmarked no later than 12/31/2020 per AS 04.11.270, 3 AAC 304.160, with all required fees paid in full, or a non-refundable \$500.00 late fee applies.

Any complete application for renewal or any fees for renewal that have not been postmarked by 02/28/2021 will be expired per AS 04.11.540,3 AAC 304.160(e).

- All fields of this application must be deemed complete by AMCO staff and must be accompanied by the required fees and all documents required, or the application will be returned without being processed, per AS 04.11.270, 3 AAC 304.105
- Receipt and/or processing of renewal payments by AMCO staff neither indicates nor guarantees in any way that an application will be deemed complete, renewed, or that it will be scheduled for the next ABC Board meeting

Licensee (Owner):	CATC Alaska To	unism c	miteragra	License #:	3931
License Type:	Beverage Dispe				2 101
Doing Business As:	Talkeetna Ala				
Premises Address:	23601 S. Tal	Leeti	Sau		
Local Governing Body:	Matanuska- Su		,	*	
Community Council:	Talkeetus				
your mailing address has	changed, write the NEW addres	s below:			
Mailing Address:	509 w. 4th				
City:	Anchorse	State:	Ak	ZIP:	99501
ust be listed on CBPL with the is person will be the designal	ted point of contact regarding this lic	Section 2 or 3	3 as an Official/Owr	ner/Shareholder	
ust be listed on CBPL with the is person will be the designate Contact Licensee:	vidual listed below must be listed in a same name and title. ted point of contact regarding this lice	Section 2 or 3	as an Official/Owr	ner/Shareholder	of your entity and
ust be listed on CBPL with the is person will be the designate Contact Licensee:  Contact Email:	vidual listed below must be listed in the same name and title.  ted point of contact regarding this lice  Fernando Salvad  Feal Vador @ Pu	ense, unless	the Optional contact  Contact Phone  Cortact Cortact  Cortact Cortact	ner/Shareholder ct is completed. e: 907	- 529-988
ust be listed on CBPL with the is person will be the designate Contact Licensee:  Contact Email:  otional: If you wish for AMCO s	vidual listed below must be listed in a same name and title. ted point of contact regarding this lice	ense, unless	the Optional contact  Contact Phone  Contact Cor	ner/Shareholder ct is completed. e: 907  pur license, list the	- 529-988
ust be listed on CBPL with the is person will be the designate Contact Licensee:  Contact Email:	vidual listed below must be listed in the same name and title.  ted point of contact regarding this lice  Fernando Salvad  Feal Vador @ Pu	ense, unless	the Optional contact  Contact Phone  Cortact Cortact  Cortact Cortact	ner/Shareholder ct is completed. e: 907  pur license, list the	- 529-988
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ust be listed on CBPL with the is person will be the designate Contact Licensee:  Contact Email:  Ditional: If you wish for AMCO s  Name of Contact:  Contact Email:	vidual listed below must be listed in the same name and title.  ted point of contact regarding this lice  Fernando Salvad  Feal Vador @ Pu	ense, unless	the Optional contact  Contact Phone  Contact Cor	ner/Shareholder ct is completed. e: 907  mour license, list the	- 529-988
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ust be listed on CBPL with the is person will be the designate Contact Licensee:  Contact Email:  Ditional: If you wish for AMCO s  Name of Contact:  Contact Email:	vidual listed below must be listed in the same name and title.  ted point of contact regarding this lice  Fernando Salvad  Feal Vador @ Pu	ense, unless	Contact Phone Contact Phone Contact Phone Cortact Licensee about you	ner/Shareholder ct is completed. e: 907  pur license, list the	- 529-988



# Form AB-17: 2021/2022 License Renewal Application

## Section 2 – Entity or Community Ownership Information

## Sole Proprietors should skip this Section.

Use the link from Corporations, Business and Professional Licensing (CBPL) below to assist you in finding the Entity #. https://www.commerce.alaska.gov/cbp/main/search/entities

Alaska CBPL Entity #: 60827D

READ BEFORE PROCEEDING: Any new or changes to Shareholders (10% or more), Managers, Corporate Officers, Board of Directors, Partners, Controlling Interest or Ownership of the business license must be reported to the ABC Board within 10 days of the change and must be accompanied by a full set of fingerprints on FBI-approved card stock, AB-08a's, payment of \$48.25 for each new officer with a date-stamped copy of the CBPL change per AS 04.11.045, 50 & 55, or a Notice of Violation will be issued to your establishment and your application will be returned.

The only exception to this is a Corporation who can meet the requirements set forth in AS 04.11.050(c).

## DO NOT LIST OFFICERS OR TITLES THAT ARE NOT REQUIRED FOR YOUR ENTITY TYPE.

- Corporations of <u>any</u> type including non-profit must list ONLY the following:
  - o All shareholders who own 10% or more stock in the corporation
  - o Each President, Vice-President, Secretary, and Managing Officer regardless of percentage owned
- Limited Liability Corporations, of <u>any</u> type must list ONLY the following:
  - o All Members with an ownership interest of 10% or more
  - o All Managers (of the LLC, not the DBA) regardless of percentage owned
- Partnerships of any type, including Limited Partnerships must list ONLY the following:
  - o Each Partner with an interest of 10% or more
  - o All General Partners regardless of percentage owned

Important Note: All entries below must match our records, or your application will be returned per AS 04.11.270, 3 AAC 304.105. You must list full legal names, all required titles, phone number, percentage of shares owned (if applicable) and a full mailing address for each official of your entity whose information we require. If more space is needed: attach additional completed copies of this page. Additional information not on this page will be rejected.

Name of Official:	Alaskan Park Prope	rties Inc.			
Title(s):	Shareholder	Phone:	907-727-2808	% Owi	ned: 100
Mailing Address:	509 W. 4th Ave.				
City:	Anchorage	State:	AK	ZIP:	99501

Name of Official:	David Barry				***************************************	
Title(s):	President	Phone:	602-317-8006	% Ow	ned:	0
Mailing Address:	1401 17th St. Suite 400					<u> </u>
City:	Denver	State:	CO	ZIP:	802	202

Name of Official:	Samuel Auck				
Title(s):	Vice President	Phone:	312-343-6227	% Own	ed: 0
Mailing Address:	1401 17th Street, Su	ite 400			l
City:	Denver	State:	CO	ZIP:	80202



# Form AB-17: 2021/2022 License Renewal Application

## Section 2 - Entity or Community Ownership Information

#### Sole Proprietors should skip this Section.

Use the link from Corporations, Business and Professional Licensing (CBPL) below to assist you in finding the Entity #. <a href="https://www.commerce.alaska.gov/cbp/main/search/entities">https://www.commerce.alaska.gov/cbp/main/search/entities</a>

Alaska CBPL Entity #:

60827D

READ BEFORE PROCEEDING: Any new or changes to Shareholders (10% or more), Managers, Corporate Officers, Board of Directors, Partners, Controlling Interest or Ownership of the business license must be reported to the ABC Board within 10 days of the change and must be accompanied by a full set of fingerprints on FBI-approved card stock, AB-08a's, payment of \$48.25 for each new officer with a date-stamped copy of the CBPL change per AS 04.11.045, 50 & 55, or a Notice of Violation will be issued to your establishment and your application will be returned.

The only exception to this is a Corporation who can meet the requirements set forth in AS 04.11.050(c).

## DO NOT LIST OFFICERS OR TITLES THAT ARE NOT REQUIRED FOR YOUR ENTITY TYPE.

- Corporations of <u>any</u> type including non-profit must list ONLY the following:
  - o All shareholders who own 10% or more stock in the corporation
  - o Each President, Vice-President, Secretary, and Managing Officer regardless of percentage owned
- Limited Liability Corporations, of any type must list ONLY the following:
  - o All Members with an ownership interest of 10% or more
  - o All Managers (of the LLC, not the DBA) regardless of percentage owned
- Partnerships of any type, including Limited Partnerships must list ONLY the following:
  - o Each Partner with an interest of 10% or more
  - o All General Partners regardless of percentage owned

Important Note: All entries below must match our records, or your application will be returned per AS 04.11.270, 3 AAC 304.105. You must list full legal names, all required titles, phone number, percentage of shares owned (if applicable) and a full mailing address for each official of your entity whose information we require. If more space is needed: attach additional completed copies of this

page. Additional information not on this page will be rejected.

Name of Official:	Ellen Ingersoll					
Title(s):	Vice President	Phone:	602-207-1051	% Owned:		0
Mailing Address:	1850 N. Central Avenue,	Suite 19	100			
City:	Phoenix	State:	AZ	ZIP:	850	04-4565

Name of Official:	Fernando Salvador				
Title(s):	Vice President	Phone:	907-777-2868	% Ow	ned: 0
Mailing Address:	509 W. 4th Ave.				
City:	Anchorage	State:	AK	ZIP:	99501

Name of Official:	Derek Linde				
Title(s):	Vice President	Phone:	(602) 207-1067	% Ow	ned: 0
Mailing Address:	1850 N. Central Avenue	Suite 19	00	<u> </u>	1
City:	Phoenix	State:	AZ	ZIP:	85004-456



# Form AB-17: 2021/2022 License Renewal Application

## Section 2 - Entity or Community Ownership Information

#### Sole Proprietors should skip this Section.

Use the link from Corporations, Business and Professional Licensing (CBPL) below to assist you in finding the Entity #. <a href="https://www.commerce.alaska.gov/cbp/main/search/entities">https://www.commerce.alaska.gov/cbp/main/search/entities</a>

Alaska CBPL Entity #: 60827D

READ BEFORE PROCEEDING: Any new or changes to Shareholders (10% or more), Managers, Corporate Officers, Board of Directors, Partners, Controlling Interest or Ownership of the business license must be reported to the ABC Board within 10 days of the change and must be accompanied by a full set of fingerprints on FBI-approved card stock, AB-08a's, payment of \$48.25 for each new officer with a date-stamped copy of the CBPL change per AS 04.11.045, 50 & 55, or a Notice of Violation will be issued to your establishment and your application will be returned.

The only exception to this is a Corporation who can meet the requirements set forth in AS 04.11.050(c).

## DO NOT LIST OFFICERS OR TITLES THAT ARE NOT REQUIRED FOR YOUR ENTITY TYPE.

- Corporations of <u>any</u> type including non-profit must list ONLY the following:
  - o All shareholders who own 10% or more stock in the corporation
  - o Each President, Vice-President, Secretary, and Managing Officer regardless of percentage owned
- Limited Liability Corporations, of any type must list ONLY the following:
  - o All Members with an ownership interest of 10% or more
  - All Managers (of the LLC, not the DBA) regardless of percentage owned
- Partnerships of any type, including Limited Partnerships must list ONLY the following:
  - o Each Partner with an interest of 10% or more
  - o All General Partners regardless of percentage owned

Important Note: All entries below must match our records, or your application will be returned per AS 04.11.270, 3 AAC 304.105. You must list full legal names, all required titles, phone number, percentage of shares owned (if applicable) and a full mailing address for each official of your entity whose information we require. If more space is needed: attach additional completed copies of this page. Additional information not on this page will be rejected.

	in not on this page will be rejected.					
Name of Official:	Jason Creed					
Title(s):	Vice President	Phone:	602-207-1051	% Owi	ned:	0
Mailing Address:	1850 N. Central Avenue,	Suite 19	00	*		
City:	Phoenix	State:	AZ	ZIP:	850	04-4565
<u></u>						
Name of Official:						
Title(s):		Phone:		% Owr	ned:	
Mailing Address:						
City:		State:		ZIP:		
					L	
Name of Official:						
Title(s):		Phone:		% Owi	ned:	
Mailing Address:						L
City:		State:		ZIP:		



## Form AB-17: 2021/2022 License Renewal Application

## Section 3 - Sole Proprietor Ownership Information

## Corporations, LLC's and Partnerships of ALL kinds should skip this section.

READ BEFORE PROCEEDING: Any new or changes to the ownership of the business license must be reported to the ABC Board within 10 days of the change and must be accompanied by a full set of fingerprints on FBI approved cardstock, AB-08a's, payment of \$48.25 for each new owner or officer and a date stamped copy of the CBPL change per AS 04.11.045, or a Notice of Violation will be issued to your establishment and your application will be returned.

Important Note: All entries below must match our records, or your application will be returned per AS 04.11.270, 3 AAC 304.105. You must list full legal names, phone number, and mailing address for each owner or partner whose information we require. If more space is needed, attach additional copies of this page. Additional owners not listed on this page will be rejected. This individual is an: Applicant **Affiliate** Name: **Contact Phone:** Mailing Address: City: State: ZIP: Email: This individual is an: **Applicant** Affiliate Name: **Contact Phone: Mailing Address:** City: State: ZIP: Email: Section 4 - License Operation Check ONE BOX for EACH CALENDAR YEAR that best describes how this liquor license was operated: The license was regularly operated continuously throughout each year. (Year-round) The license was only operated during a specific season each year. (Seasonal) If your operation dates have changed, list them below: to 3. The license was only operated to meet the minimum requirement of 240 total hours each calendar year. A complete AB-30: Proof of Minimum Operation Checklist, and all documentation must be provided with this form. The license was not operated at all or was not operated for at least the minimum requirement of 240 total hours each year, during one or both calendaryears. A complete Form AB-29: Waiver of Operation Application and corresponding fees must be submitted with this application for each calendar year during which the license was not operated. If you have not met the minimum number of hours of operation in 2020, you are not required to pay the fees, however a complete AB-29 is required with Section 2 marked "OTHER" and COVID is listed as the reason. Section 5 - Violations and Convictions Yes Have ANY Notices of Violation been issued for this license OR has ANY person or entity in this application been convicted of a violation of Title 04, 3AAC 304 or a local ordinance adopted under AS 04.21.010 in 2019 or 2020? If you checked YES, you MUST attach a list of all Notices of Violation and/or Convictions per AS 04.11.270(a)(2) If you are unsure if you have received any Notices of Violation, contact the office before submitting this form.

AMCO



# Form AB-17: 2021/2022 License Renewal Application

#### Section 6 - Certifications

As an applicant for a liquor license renewal, I declare under penalty of perjury that I have read and am familiar with AS 04 and 3 AAC 304, and that this application, including all accompanying schedules and statements, are true, correct, and complete.

- I agree to provide all information required by the Alcoholic Beverage Control Board or requested by AMCO staff in support of
  this application and understand that failure to do so by any deadline given to me by AMCO staff will result in this
  application being returned and potentially expired if I do not comply with statutory or regulatory requirements.
- I certify that all current licensees (as defined in AS 04.11.260) and affiliates have been listed on this application, and that in
  accordance with AS 04.11.450, no one other than the licensee(s) has a direct or indirect financial interest in the licensed
  business.
- I certify that this entity is in good standing with Corporations, Business and Professional Licensing (CBPL) and that all entity
  officials and stakeholders are current and accurately listed, and I have provided AMCO with all required changes of
  Shareholders (10% or more), Managers, Corporate Officers/Board of Directors, Partners, Controlling Interest or Ownership of
  the business license, and have provided all required documents for any new or changes in officers.
- I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check identification of patrons
  have completed an alcohol server education course approved by the ABC Board and keep current, valid copies of their
  course completion cards on the licensed premises during all working hours, if applicable for this license type as set forth
  in AS 04.21.025 and 3 AAC 304.465.
- I certify that I have not altered the functional floor plan or reduced or expanded the area of the licensed premises, and I have not changed the business name from what is currently approved and on file with the Alcoholic Beverage Control Board.

i certify on behalf of myself or of the organized	entity that I understand that providing a false statement on this form or any other for
provided by AMCO is grounds for	rejection or denial of this application or revocation of any license issued.
Subs 9772	OFFICIAL SEAL.  Cansidy R. Owen  NOTARY PUBLIC STATE OF ALAGOR
ignature of licensee	My Comm. Expires January 65/999 ature of Notary Public

Fernando Salvador Printed name of licensee

Notary Public in and for the State of

Subscribed and sworn to before me this 30 day of 2020

My commission expires:

Restaurant/Eating Place applications must include a completed AB-33: Restaurant Receipts Affidavit
Recreational Site applications must include a completed Recreational Site Statement
Tourism applications must include a completed Tourism Statement
Wholesale applications must include a completed AB-25: Supplier Certification

All renewal and supplemental forms are available online

Any application that is not complete or does not include ALL required completed forms and fees will not be processed and will be returned per AS 04.11.270, 3 AAC 304.105.

#### FOR OFFICE USE ONLY

License Fee:	\$ <b>Application Fee:</b>	\$ 300.00	Misc. Fee:	\$
	<b>Total Fees Due:</b>			\$

AMCO



Alcohol and Marijuana Control Office 550 W 7th Avenue, Suite 1600 Anchorage, AK 99501

alcohol.licensing@alaska.gov

https://www.commerce.alaska.gov/web/amco Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

## Form AB-08a: Authorization of Records Release

#### What is this form?

This authorization of records release form is required for all liquor license applications. Each licensee and affiliate who is required to be listed on an application for a liquor license under AS 04.11.260 must provide written authorization for release of conviction and arrest records, as required by 3 AAC 304.105(a)(1).

The following individuals must complete this form:

- If the applicant is a sole proprietor, this form must be completed by the applicant and the applicant's spouse.
- If the applicant is a <u>corporation</u>, this form must be completed for each <u>stockholder who owns 10% or more</u> of the stock in the corporation, and for each <u>president</u>, <u>vice-president</u>, <u>secretary</u>, and <u>managing officer</u>.
- If the applicant is a <u>limited liability organization</u>, this form must be completed for each member with an ownership interest of 10% or more, and for each manager.
- If the applicant is a <u>partnership</u>, including a <u>limited partnership</u>, this form must be completed for each <u>partner with an interest</u> of 10% or more, and for each <u>general partner</u>.

This form must be completed and submitted to AMCO's main office before any license application will be considered complete.

### **Section 1 – Establishment Information**

Enter information for licensed establishment.

Licensee:	CATC Alaska Tourism Corporation					
License Type:	Liquor License License Number: 4871					
Doing Business As:	Orca Voyager M/V					
Premises Address:	509 W. 4th Ave					
City:	Anchorage State: AK ZIP:					

#### Section 2 - Individual Information

Enter information for the individual licensee or affiliate.

Name:	Jason Creed	
Title:	Vice President	
Date of Birth:		



Alcohol and Marijuana Control Office 550 W 7<sup>th</sup> Avenue, Suite 1600 Anchorage, AK 99501

alcohol.licensing@alaska.gov

https://www.commerce.alaska.gov/web/amco

Phone: 907.269.0350

## **Alaska Alcoholic Beverage Control Board**

# Form AB-08a: Authorization of Records Release

## **Section 3 - Certifications and Approvals**

Read each line below, and then sign your initials in the box to the right of any applicable statements:	Initials
I certify that I have <b>never</b> been convicted of a violation of AS 04 or regulations adopted by the ABC Board.	MC
I certify that I have <b>never</b> been convicted of a violation of the alcoholic beverage control laws of another state, as a licensee of that state.	gnc
I certify that I have <b>not</b> been convicted of a felony in this state, the United States, or another state or territory, including a suspended imposition of sentence, during the 15 years immediately preceding the date of this form.	200
Sign your initials to the following statement <u>only if you are unable to certify one or more of the above statements</u> :  I have been convicted of one or more of the above offenses, and I have attached a written explanation that includes the type of offense and why it would be in the public interest for the ABC Board to approve me as a licensee.	Initials
I understand that by signing this form, I am providing written authorization for release of my conviction and arrest records to Alaska Alcoholic Beverage Control Board through the Alaska Alcohol & Marijuana Control Office under AS 04.11.295 and 3 AAC 304.105. I understand that my fingerprints will be used to check the criminal history records of the Federal Bureau of Investigation (FBI), and that I have the opportunity to complete or challenge the accuracy of the information contained in the identification record. The procedures for obtaining a change, correction, or updating an FBI identification record are set forth Title 28, CFR, 16.34.  I declare under penalty of perjury that this form, including all attachments and accompanying schedules and statements, is to correct, and complete.	e FBI o in
Signature of licensee/affiliate  Signature of Notary Public  Notary Public in and for the State of Arizona  Printed name of licensee/affiliate  Notary Public in and for the State of Arizona  County of Maricop 1	
MIKE HOWARD Notary Public - Arizona Maricopa County Commission # 578126 My Comm. Expires May 1, 2024  Subscribed and sworn to before me this 24 day of	2021

# Department of Commerce, Community, and Economic Development CORPORATIONS, BUSINESS & PROFESSIONAL LICENSING

State of Alaska / Commerce / Corporations, Business, and Professional Licensing / Search & Database Download / Corporations / Entity Details

# **ENTITY DETAILS**

# Name(s)

Type Name

Legal Name CATC Alaska Tourism Corporation

Previous Legal Name CIRI ALASKA TOURISM CORPORATION

**Entity Type:** Business Corporation

Entity #: 60827D

Status: Good Standing

**AK Formed Date: 4/30/1997** 

**Duration/Expiration:** Perpetual

Home State: ALASKA

Next Biennial Report Due: 1/2/2023

Entity Mailing Address: 1850 N CENTRAL AVE #1900, PHOENIX, AZ 85004

Entity Physical Address: 1850 N CENTRAL AVE, STE 1900, PHOENIX, AZ 85004

# **Registered Agent**

Agent Name: ROBERT BLASCO

Registered Mailing Address: 9360 GLACIER HWY STE 202, JUNEAU, AK 99801

Registered Physical Address: 9360 GLACIER HWY STE 202, JUNEAU, AK 99801

## **Officials**

			⊔Show Former
AK Entity #	Name	Titles	Owned
10000002	Alaskan Park Properties, Inc.	Shareholder	100.00
	DAVID BARRY	Director, President	

AK Entity #	Name	Titles	Owned
	Derek Linde	Director, Secretary, Vice President	
	Ellen Ingersoll	Vice President	
	Elyse Newman	Treasurer	
	Fernando Salvador	Vice President	
	IRMA VILLARREAL	Assistant Secretary	
	JASON CREED	Vice President	
	Jennifer Kaleta	Assistant Secretary	
	Jonathan Massimino	Assistant Secretary	
	Leslie Striedel	Assistant Secretary	
	SAMUEL AUCK	Vice President	
	Steven Moster	Director	

# **Filed Documents**

Date Filed	Туре	Filing	Certificate
4/30/1997	Creation Filing	Click to View	
5/12/1997	Biennial Report		
4/28/1998	Restated and Amended Articles	Click to View	
12/14/1998	Biennial Report	Click to View	
6/12/2000	Amendment	Click to View	
1/09/2001	Biennial Report	Click to View	
6/11/2003	Biennial Report	Click to View	
6/11/2003	Change of Officials	Click to View	
6/14/2005	Biennial Report	Click to View	
10/20/2005	Agent Change	Click to View	
12/27/2006	Biennial Report	Click to View	
2/12/2007	Change of Officials	Click to View	
12/24/2008	Biennial Report	Click to View	
3/19/2009	Agent Change	Click to View	
4/02/2010	Change of Officials	Click to View	
1/24/2011	Biennial Report	Click to View	
9/26/2011	Change of Officials	Click to View	
9/26/2011	Agent Change	Click to View	
12/20/2012	Biennial Report	Click to View	
3/25/2014	Change of Officials	Click to View	
7/30/2014	Agent Change	Click to View	
12/04/2014	Biennial Report	Click to View	
9/25/2015	Entity Address Change	Click to View	
1/27/2016	Certificate of Compliance		Click to View
3/01/2016	Certificate of Compliance		Click to View

Date Filed	Туре	Filing	Certificate
3/15/2016	Certificate of Compliance		Click to View
4/07/2016	Change of Officials	Click to View	
8/18/2016	Certificate of Compliance		Click to View
8/19/2016	Certificate of Compliance		Click to View
9/09/2016	Entity Address Change	Click to View	
9/23/2016	Amendment	Click to View	Click to View
12/16/2016	Certificate of Compliance		Click to View
12/22/2016	Certificate of Compliance		Click to View
12/27/2016	Biennial Report	Click to View	
1/12/2018	Change of Officials	Click to View	
5/08/2018	Change of Officials	Click to View	
5/10/2018	Certificate of Compliance		Click to View
7/11/2018	Agent Change	Click to View	
10/12/2018	Certificate of Compliance		Click to View
1/02/2019	Biennial Report	Click to View	
3/20/2019	Change of Officials	Click to View	
8/08/2020	Certificate of Compliance		Click to View
7/30/2020	Certificate of Compliance		Click to View
4/19/2021	Biennial Report	Click to View	

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# Department of Commerce, Community, and Economic Development DIVISION OF CORPORATIONS, BUSINESS & PROFESSIONAL LICENSING

State of Alaska / Commerce / Corporations, Business, and Professional Licensing / Search & Database Download / Business License / License #280310

# LICENSE DETAILS

License #: 280310

**Print Business License** 

**Business Name: TALKEETNA ALASKAN LODGE** 

Status: Active

Issue Date: 12/13/2000

Expiration Date: 12/31/2022

Mailing Address: 509 W 4TH AVE

ANCHORAGE, AK 99501

Physical Address: 23601 S TALKEETNA SPUR RD

TALKEETNA, AK 99676

## **Owners**

CATC ALASKA TOURISM CORPORATION

## **Activities**

Line of Business	NAICS	Professional License #
72 - Accommodation and Food Services	722110 - FULL-SERVICE RESTAURANTS	LIGHISE #
72 - Accommodation and Food Services	721110 - HOTELS (EXCEPT CASINO HOTELS) AND MOTELS	

## **Endorsements**

End				Action	Action	
#	Issue	Renew	Expiration	End	Note	Address
1	10/28/2016		12/31/2018			23601 S TALKEETNA SPUR RD, TALKEETNA, AK 99676

# **License Lapse(s)**

If this business license lapsed within the last four years the lapsed periods will appear below. Lapsed periods are the unlicensed period between an expiration date and renewal date.

 Start Date
 End Date

 1/1/2021
 1/20/2021

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