

**Tourism Statement** 

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

A new, transfer, or renewal application for a beverage dispensary – tourism or restaurant / eating place – tourism license must be accompanied by a written statement that explains how the establishment encourages tourism and meets the requirements listed under AS 04.11.400(d) and 3 AAC 304.325.

This document must be submitted to AMCO's main office before any tourism license application will be reviewed.

Doing Business As:	Everett's	License #:	5532
License Type:	Beverage Dispensary - Tourism Duplicate		
	Section 2 – Tourism Sta	atement	
.1. Explain how issuance	of a liquor license at your establishment has/will en		
The restaurant and bar is	located on-site and is within walking distance to the	hotel rooms. This is favorable wh	en booking a room
and is preferred by the tr	aveling public when selecting overnight accommodate	tions. The resort business involves	catering events to
tourists and regional and	local guests. Advertising in travel & tourism publicat	ions as well as local television and	radio attracts
hotel The recort is a pref	state and out of state to come to Wasilla, hold their c	atered event at the resort, and st	ay overnight at the
country come to celebrat	erred location for wedding ceremonies where family te thus encouraging tourism because we can accomm	and mends from all over the stat	e as well as the
,	and the can again to an one because we can accomm	locate their rood and beverage ne	eus.
	y was/will be constructed or improved as required b		
andscaping motel undate	y renovated and updated in 2017. The renovation of	the event spaces, added parking	, extensive
ake front location conver	es etc is ideal for travelers who want an overnight ilently located between regular tourist destinations	stay, with on-site food and beve	rage in a beautiful
	nonsy totaled between regular tourist destinations	sacii as valdez, Taikeetiia, Aliciio	rage and Denan.
20		YES	NO
	plicant for this liquor license also operate the childrense is located?	х	
tourism facility in white	in this license is located?	·	LI
4 If "no" who operates th	ne tourism facility?		

[Tourism Statement] (rev 9/17/2019)



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## Alaska Alcoholic Beverage Control Board

## **Tourism Statement**

2.5 Do you offer room rentals to the traveling public?	X	NO
If "yes" answer the following questions:		
How many rooms are available?		
12 motel rooms and 3 cabins	· · · · · · · · · · · · · · · · · · ·	
How many of the available rooms (if any) have kitchen facilities (defined as: a separate sink for f with refrigeration and cooking appliance devices, including a microwave)?	ood prepara	ition along
15		
Do you stock or plan to stock alcoholic beverages in guest rooms?	YES	NO x
If "no" is your facility located within an airport terminal?	YES	NO x
2.6 If your establishment includes a dining facility, please describe that facility. If it does not please wri		
Everett's restaurant is on-site and includes a fine dining room with seating capacity of 100+ and a bar/capacity of 120.	bistro with a	seating
2.7 If additional amenities are available to your guests through your establishment (eg: guided tours or guests, other activities that attract tourists), please describe them. If they are not offered, please write	"none".	
The resort has amenities related to lake activities available to all guests such as Kayaks, peddle boats, rentals. Winter amenities include ice skating/hockey rinks, ice fishing, snowmobile races, charity plung include helicopter flight seeing tours, indoor and outdoor concert events and comedy venues held thr	paddle boar ge events. O	ther amenities

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD FORM CONTROL

LICENSE NUMBER

5532

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

1107

CITY / BOROUGH:

**Outside City Limits** 

Matanuska-Susitna Borough

Everett's D/B/A:

1850 Bogard Road

Mail Address:

Mat-Su Resort LLC 1850 E. Bogard Rd. Wasilla, AK 99654

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

LIQUOR LICENSE 2021 - 2022

5532

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

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

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ISSUED BY ORDER OF THE ALCOHOLIC BEVERAGE CONTROL BOARD

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

D/B/A:

Everett's

1850 Bogard Road

Mailing Address:

Mat-Su Resort LLC 1850 E. Bogard Rd.

Wasilla, AK 99654



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<u>alcohol.licensing@alaska.gov</u> <u>https://www.commerce.alaska.gov/web/amco</u>

Phone: 907.269.0350

#### Alaska Alcoholic Beverage Control Board

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

	1	X-000-			l	T		
Doing Business As:	Ever	ett's	and the same of th		License Number:	5532		
License Type:	Beve	erage Dispen	sary - Tourisr	n Duplicate	<b>,</b>			
Examiner:	K	nistina	S.		Transaction #:	100038011		
Document		Received	Completed	Notes	***************************************			
AB-17: Renewal Applic	ation	1/26	5-3-2021					
App and License Fees		1/26	5-3-2021					
Supplemental Docum	ent	Received	Completed	Notes				
Tourism/Rec Site State	ement	1/26	5-3-2021					
AB-25: Supplier Cert (\	NS)							
AB-29: Waiver of Oper	ation							
AB-30: Minimum Oper	ration							
AB-33: Restaurant Affi	davit							
COI / COC / 5 Star								
FP Cards & Fees / AB-0	)8a							
Late Fee		1/26	5-3-2021					
Names on FP Cards:								
						Yes No		
Selling alcohol in respo	onse to	written order (pa	ickage stores)?					
Mailing address and co	ontact ii	nformation differ	ent than in databa	ase (if yes, upda	te database)?			
In "Good Standing" with CBPL (skip this and next question for sole proprietor)?								
Officers and stockholders match CBPL and database (if "No", determine if transfer necessary)?								
LGB 1 Response:	LGB 1 Response: Nat- Su Borough LGB 2 Response:							
Waive	Protes				test Lapsed			



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## 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 COMPLET OF THE PROPERTY OF THE PROPE

- 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

	Establi	ishment Contac	t Information			
Licensee (Owner):	Mat-Su Resor	rt, LLC		License #:	5532	
License Type:			n Dunlicate		0002	
Doing Business As:	Everett's	Beverage Dispensary - Tourism Duplicate  Everett's				
Premises Address:	1850 E. Boga	rd Road, Wasilla,	AK 99654			
<b>Local Governing Body:</b>		usitna Borough	711 03004			
Community Council:		Joine Dorough				
Vour mailing address ha	s changed					
your mailing address ha Mailing Address:	is changed, write th	e NEW address below:				
City:		State:	100	76.00		
		State		ZIP:		
entact Licensee: The indist be listed on CBPL with the sperson will be the designation to the designation of the contact Licensee:	ividual listed below mo ne same name and title ated point of contact re	egarding this license, unle	or 3 as an Official/Owne	r/Shareholde		
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## 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 E	ntity #:	10036718	

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:	Gerald E. Neeser					
Title(s):	Manager	Phone:	907-229-1348	% Owr	ned:	0
Mailing Address:	340 Oceanview Drive					
City:	Anchorage	State:	AK	ZIP:	995	515

Name of Official:	Gerald Neeser Revocable Trust UTAD 04/30/01				
Title(s):	Member	Phone:	907-229-1348	% Owi	ned: 100
Mailing Address:	340 Oceanview Drive				
City:	Anchorage	State:	AK	ZIP:	99515

Name of Official:			
Title(s):	Phone:	% Owned:	
Mailing Address:			
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.

<u>Important Note:</u> 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.

	1 1				
Applicant	Affiliate				
			Contact Phone:		
		State:	Z	IP:	
Applicant	Affiliate			***************************************	
			Contact Phone:		
		State:	z	IP:	
			1		
perated during a sist have changed, perated to meet of Minimum Operated at all or was one or both car	ntinuously throughout each year.  Ist them below:  to  the minimum requirement ation Checklist, and all documents as not operated for at least elemants. A complete For the comp	h year. (Year-round) (Seasonal) of 240 total hours ea entation must be provide t the minimum requi	ch calendar year. ded with this form. rement of 240 total peration Application	2019	2020
t the minimun llete AB-29 is r	n number of hours of or equired with Section 2	peration in 2020, ye marked "OTHER" a	ou are not required to pay t and COVID is listed as the re		ver a
lation been issu of Title 04, 3AA	ued for this license <b>OR</b> ha C 304 or a local ordinand	as ANY person or er ce adopted under A	ntity in this application been S 04.21.010 in 2019 or 2020	Yes	No ✓
ed VES you Mi	IST attach a list of all N				
	Applicant  Applicant  Applicant  Applicant  Applicant  Academic and a comparated comparated during a comparated to meet for Minimum Operated at all or was one or both comparated at all or was one	Applicant  Applicant  Affiliate  Applicant  Affiliate  Section 4 —  H CALENDAR YEAR that best describes arly operated continuously throughout each perated during a specific season each year. It is have changed, list them below:  to  perated to meet the minimum requirement of Minimum Operation Checklist, and all docume the season of the submitted with this application for each must be submitted with this application for each the minimum number of hours of operated AB-29 is required with Section 2 is section 5 — Viola lation been issued for this license OR has first title 04, 3AAC 304 or a local ordinance.	Applicant  Affiliate  State:  Section 4 - License Ope  CALENDAR YEAR that best describes how this liquor lices arty operated continuously throughout each year. (Year-round)  perated during a specific season each year. (Seasonal)  is have changed, list them below:  to  perated to meet the minimum requirement of 240 total hours each of Minimum Operation Checklist, and all documentation must be provided in the provided in the submitted with this application for each calendar year during with the minimum number of hours of operation in 2020, year the minimum	Applicant Affiliate Contact Phone:    Applicant	State: ZIP:    Applicant

<u>If you are unsure if you have received any Notices of Violation, contact the office before submitting this form.</u>

[Form AB-17] (rev09/23/2020)



## 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 form

provided	d by AMCO is grounds	for rejection or denial of thi	s applicatio	n or revocation of any licen	se issued.
		STATE OF ALASKA OFFICIAL SEAL NOTARY PUBLIC Morgan Deakin		Margen	Deahir
Signature of licensee		My commission expires Januar	y 18, 2023	Signature of Notary Public	
Gerald	Neesev	Notary F	Public in an	d for the State of: <u>Alas</u>	ika.
Printed name of license	ee				
				My commission expires:	anuary 18,2023
	Subsc	ribed and sworn to before n	ne this $2/5$	day of January	<u> </u>

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

Total Fees Due:				\$2800 <del>.00</del> \$3300.00	
License Fee:	\$2500.00	Application Fee:	\$ 300.00	Misc. Fee:	\$ 500.00 Late Fee

## 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 Mat-Su Resort, LLC

**Entity Type:** Limited Liability Company

Entity #: 10036718

Status: Good Standing

**AK Formed Date: 3/13/2016** 

**Duration/Expiration:** Perpetual

Home State: ALASKA

Next Biennial Report Due: 1/2/2022

Entity Mailing Address: 1850 E. BOGARD RD, WASILLA, AK 99654

Entity Physical Address: 1850 E. BOGARD RD, WASILLA, AK 99654

## **Registered Agent**

Agent Name: Ashburn & Mason, A Professional Corporation

Registered Mailing Address: 1227 W. 9TH AVENUE SUITE 200, ANCHORAGE, AK 99501

Registered Physical Address: 1227 W. 9TH AVENUE SUITE 200, ANCHORAGE, AK 99501

## **Officials**

		⊔500		
AK Entity #	Name	Titles	Owned	
	Gerald E. Neeser	Manager		
	Gerald Neeser Revocable Trust utad 4/30/2001	Member	100.00	

Chau Farman

## **Filed Documents**

Date Filed	Туре	Filing	Certificate
3/13/2016	Creation Filing	Click to View	Click to View
4/27/2016	Initial Report	Click to View	
12/15/2017	Biennial Report	Click to View	
3/18/2020	Biennial Report	Click to View	
4/17/2020	Certificate of Compliance		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 #1056545

## LICENSE DETAILS

License #: 1056545

License unavailable for printing

**Business Name: EVERETT'S** 

Status: Expired

Issue Date: 06/28/2017

Expiration Date: 12/31/2020

Mailing Address: 1850 BOGARD ROAD

WASILLA, AK 99654

Physical Address: 1850 BOGARD ROAD

WASILLA, AK 99654

## **Owners**

MAT-SU RESORT, LLC

## **Activities**

Line of Business	NAICS	Professional License #
72 - Accommodation and Food Services	722110 - FULL-SERVICE RESTAURANTS	

## **Endorsements**

No Endorsements Found

## 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.

No Lapses on record for the last 4 years.