

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

Tourism Statement

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:	Dinner Theatre	License #:	lease contact A
License Type:	Beverage Dispensary - Tourism Duplicate Season	ıal	
	Section 2 – Tourism Stateme	nt	
1. Explain how issuance	of a liquor license at your establishment has/will encourage to	ourism.	
			44.
	y was/will be constructed or improved as required by AS 04.1		
a number of rooms:	nad renovations to the decks, walkways, stairs and lar including flooring as well as public space furnishings bby and charging pads for guest rooms.	ndscaping. Refurbish s. An Espresso Mach	nment to ine was
3 Does the licensee or an	plicant for this liquor license also operate the this license is located?	YES	NO
tourism facility in which	na tourism facility?		
tourism facility in whic	ic tourish racinty:		
tourism facility in whic	ic tourism ratinty:		



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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:		Final de la constant
How many rooms are available?		
582		
How many of the available rooms (if any) have kitchen facilities (defined as: a separate sink for with refrigeration and cooking appliance devices, including a microwave)?	r food prepara	ition along
None	* *****	
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 w	rite "none".	
In addition to the Dinner Theatre, the campus includes Karsten's Public House, Co and Nenana View Bar and Grille.	urtyard Cafe) ?
2.7 If additional amenities are available to your guests through your establishment (eg: guided tours guests, other activities that attract tourists), please describe them. If they are not offered, please writ	or trips, rental te "none".	equipment for
Amenities include giftshop, laundry, and a Tour Desk available to book tours in the options include - river rafting, horseback riding, flights via airplane or helicopter as Park tours.	surroundin well as Den	g area. Tour ali National

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD FORM CONTROL

LICENSE NUMBER

XXXX

ISSUED 4/09/2021 LIQUOR LICENSE 2021 - 2022

4313

ABC BOARD

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

THIS LICENSE EXPIRES MIDNIGHT FEBRUARY 28, 2023 UNLESS DATED BELOW

05/01 - 10/31

TYPE OF LICENSE: Beverage Dispens

Seasonal

LICENSE FEE: \$1,250.00

1100

CITY / BOROUGH:

Outside City Limits Denali Borough

D/B/A: **Dinner Theatre**

Mile 238.9 Parks Highway

Mail Address:

Westmark Hotels, Inc.

Attn: Michelle Pipkin 450 Third Avenue West

Seattle, WA 98119-4002

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

4313

XXXX

ISSUED 4/09/2021

ABC BOARD

LIQUOR LICENSE

2021 - 2022

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

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CITY / BOROUGH: Outside City Limits

Denali Borough

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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:

Dinner Theatre

Mile 238.9 Parks Highway

Mailing Address:

Westmark Hotels, Inc.

Attn: Michelle Pipkin 450 Third Avenue West

Seattle, WA 98119-4002



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Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Master Checklist: Renewal Liquor License Application

Doing Business As:	Dinn	er Theatre		10.40.000	License Number:	4313	
License Type:	Beve	erage Disper	- Seasonal				
Examiner:	K	nistina Sr Transaction #:				10002	27476
Document		Received	Completed	Notes	ar www.		
AB-17: Renewal Applic	ation	12/24	12/24/2020				
App and License Fees		12/24	12/24/2020				
Supplemental Docume	ent	Received	Completed	Notes			
Tourism/Rec Site State	ment	12/24	12/24/2020				
AB-25: Supplier Cert (V	VS)						
AB-29: Waiver of Oper	ation	12/24	12/24/2020				
AB-30: Minimum Oper	ation						
AB-33: Restaurant Affic	davit						
COI / COC / 5 Star							
FP Cards & Fees / AB-0	8a						
Late Fee							
Names on FP Cards:							
						Yes	No
Selling alcohol in respo	nse to v	vritten order (pa	ckage stores)?				
Mailing address and co	ntact in	formation differ	ent than in databas	se (if yes, update	e database)?		
In "Good Standing" wit	h CBPL	(skip this and ne	xt question for sole	proprietor)?			
Officers and stockholde	rs mate	ch CBPL and data	base (if "No", dete	rmine if transfe	r necessary)?	/	
LGB 1 Response: D	ena	ei Bore	LGB 2 Resp	onse:			
Waive	Protest	Lapsed	Waiv	e Prote	est 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 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):	Westmark Hotels, Inc		Lic	ense #:	4313
License Type:	Beverage Dispensary - Tour	sm Duplica	te Seasor	nal	
Doing Business As:	Dinner Theatre				
Premises Address:	Mile 238.9 Parks Highway				
Local Governing Body:	Denali Borough				
Community Council:	None				
	as changed, write the NEW address bel	w:			
Mailing Address:					
City:	Sta	te:		ZIP:	
ist be listed on CBPL with the sperson will be the design	ated point of contact regarding this license,	2 or 3 as an Offi	cial/Owner/Sl		
<u>ist be listed on CBPL with th</u>	lividual listed below must be listed in Sectione same name and title.	2 or 3 as an Offi	cial/Owner/SI		
<u>ist be listed on CBPL with th</u>	lividual listed below must be listed in Sectione same name and title.	2 or 3 as an Offi	cial/Owner/SI	ompleted.	
ist be listed on CBPL with the sperson will be the design	lividual listed below must be listed in Sectione same name and title. ated point of contact regarding this license,	2 or 3 as an Offi	cial/Owner/Sl	ompleted.	
ist be listed on CBPL with the sperson will be the designate contact Licensee: Contact Email:	ividual listed below must be listed in Sections same name and title. ated point of contact regarding this license, David McGlothlin dmcglothlin@hagroup.com	2 or 3 as an Offi	cial/Owner/Si al contact is co	206-	336-5910
ist be listed on CBPL with the sperson will be the designate contact Licensee: Contact Email:	ividual listed below must be listed in Sections same name and title. ated point of contact regarding this license, David McGlothlin	2 or 3 as an Offi	cial/Owner/Si al contact is co	206-	336-5910
ust be listed on CBPL with the sperson will be the designation. Contact Licensee: Contact Email: tional: If you wish for AMCO	ividual listed below must be listed in Section sessme name and title. ated point of contact regarding this license, David McGlothlin dmcglothlin@hagroup.com staff to communicate with anyone other than the	2 or 3 as an Offi	cial/Owner/Si al contact is co ct Phone:	206-	336-5910 em below:
ust be listed on CBPL with the sperson will be the designate Contact Licensee: Contact Email: tional: If you wish for AMCO Name of Contact: Contact Email:	ividual listed below must be listed in Section same name and title. ated point of contact regarding this license, David McGlothlin dmcglothlin@hagroup.com staff to communicate with anyone other than the Michelle Pipkin mpipkin@hagroup.com	2 or 3 as an Offinless the Option Contact e Contact Licensee	cial/Owner/Si al contact is co ct Phone:	206-	336-5910 nem below: 336-6105
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ust be listed on CBPL with the sperson will be the designate Contact Licensee: Contact Email: tional: If you wish for AMCO Name of Contact: Contact Email:	ividual listed below must be listed in Section same name and title. ated point of contact regarding this license, David McGlothlin dmcglothlin@hagroup.com staff to communicate with anyone other than the Michelle Pipkin mpipkin@hagroup.com Philippe Janicka	2 or 3 as an Offinless the Option Contact Contact Contact Contact Contact	cial/Owner/Si al contact is co ct Phone: e about your lice ct Phone:	206-	336-5910 nem below: 336-6105



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 #:

5724D

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:
 - 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:	Holland America Line	e, Inc	100		* ****
Title(s):	Shareholder	Phone:	206-281-3535	% Owi	ned: 100
Mailing Address:	450 3rd Ave W			-l	
City:	Seattle	State:	WA	ZIP:	98119

Name of Official:	Stein Kruse				
Title(s):	Director	Phone:	206-281-3535	% Ow	ned: 0
Mailing Address:	450 3rd Ave W	•			<u> </u>
City:	Seattle	State:	WA	ZIP:	98119

Name of Official:	Charles E Ball					
Title(s):	President	Phone:	206-336-5980	% Owned:		
Mailing Address:	450 3rd Ave W				I	
City:	Seattle	State:	WA	ZIP:	98119	9



Form AB-17: 2021/2022 License Renewal Application

Section 2 – Entity or Community Ownership Information

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Alaska CBPL Entity #: 5724D

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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:
 - 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
 - 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:	Natalya Leahy			700	70.
Title(s):	Vice President/Treasurer	Phone:	206-626-9557	% Ow	ned: 0
Mailing Address:	450 3rd Ave W			. 1	
City:	Seattle	State:	WA	ZIP:	98119

Name of Official:	Daniel Howard				
Title(s):	Vice President and Secretary	Phone:	661-753-1564	% Ow	ned: 0
Mailing Address:	24305 Town Center Drive			<u> </u>	
City:	Santa Clarita	State:	CA	ZIP:	91355

Name of Official:	David McGlothlin				
Title(s):	Vice President	Phone:	206-336-5910	% Ow	ned: 0
Mailing Address:	450 3rd Ave W	-			
City:	Seattle	State:	WA	ZIP:	98119



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: 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. <u>A complete Form AB-29: Waiver of Operation Application</u> 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 No 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.



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.

reciting on behalf of flyself of of the	organized entity that i understand	that providing a false statement on this form or a	anv other forn
provided by AMCO is g	rounds for rejection or denial of th	is application or revocation of any license issued	l.
	MINIMINI	,,	-
1 /2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	CAMPAGILL	00-00-10-	
NIVIVIII	NOTAR	Bella aud nomo	MO
Signature of licensee	10:	Signature of Notary Public	HRO
David McGlothlin	My Comm. Expires	BRUA CAMPAGINT	
	= 0: 11/01/2021 Notary	Public in and for the State of: WASHING	MOTE
Printed name of licensee	- D		`
	PUBLICO.	My commission expires: \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	9091
	WASH WASH	01 0	
	Subscribed and sworn to before r	me this all day of MC ex Dex	20 20

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:	\$1250.00	Application Fee:	\$ 300.00	Misc. Fee:	\$	
		Total Fees Due:			\$ 1550.00	



Alcohol & Marijuana Control Office 550 W 7th Ave, Suite 1600 Anchorage, AK 99501

December 22, 2020

Dear Control Office Staff:

Enclosed please find the notarized renewal liquor license applications and tourism statements for those requiring them for the following license numbers:

1> 2> 3> 4> 5> 6> 7> 8> 9> 10> 11> 12>	3724 – Alaska Hotel Properties, LLC 4901 – Alaska Hotel Properties, LLC 4484 – Tour Alaska, LLC 4483 – Tour Alaska, LLC 4480 – Tour Alaska, LLC 4479 – Tour Alaska, LLC 3731 – Alaska Hotel Properties, LLC 4901 – Alaska Hotel Properties, LLC 4876 – Westmark Hotels, Inc 4313 – Westmark Hotels, Inc 5512 – Westmark Hotels, Inc	Denali North Star Inn DPL Grizzly Bar — Seasonal WTR-DNP — Seasonal DNP-WTR — Seasonal TKA-WTR — Seasonal WTR-TKA — Seasonal MPL Base Camp - Seasonal DPL Fannie Q's — Seasonal Courtyard Cafe — Seasonal Dinner Theatre — Seasonal Nenana View B & G — Seasonal WMSGY Glacial Lounge — Seasonal	\$2,800 \$1,550 \$ 800 \$ 800 \$ 800 \$ 1,550 \$1,550 \$1,550 \$1,550 \$1,550
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Credit card payment information forms have also been included for each of the renewal applications.

Due to COVID-19 the majority of our locations did not operate and so notarized Waiver of Operation forms have been included for all of the impacted licenses.

If you have any questions or require further information on the enclosed renewal applications, please feel free to contact me directly at (206) 336-6105. I may also be reached via e-mail at mpipkin@hagroup.com.

Thank you for your kind consideration in this matter.

Sincerely

AMCO

DEC 9.4 2000

Michelle Pipkir Manager Financial Sv

Manager, Financial Systems

Enclosures

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

WESTMARK HOTELS, INC.

Entity Type: Business Corporation

Entity #: 5724D

Status: Good Standing

AK Formed Date: 12/7/1962

Duration/Expiration: Perpetual

Home State: ALASKA

Next Biennial Report Due: 1/2/2022

Entity Mailing Address: ATTN: MICHELLE PIPKIN, 450 3RD AVE W, SEATTLE, WA 98119-4002

Entity Physical Address: 450 3RD AVE W, SEATTLE, WA 98119-4002

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
	Charles E Ball	President	
	DANIEL HOWARD	Secretary, Vice President	
	David McGlothlin	Vice President	

AK Entity #	Name	Titles	Owned
	Holland America Line, Inc	Shareholder	100.00
	NATALYA LEAHY	Treasurer, Vice President	
	Stein Kruse	Director	

Filed Documents

Date Filed	Туре	Filing	Certificate
12/07/1962	Creation Filing		
2/02/1988	Biennial Report		
2/12/1990	Biennial Report		
1/15/1992	Biennial Report	Click to View	
1/03/1994	Biennial Report	Click to View	
12/26/1995	Biennial Report	Click to View	
12/19/1997	Biennial Report	Click to View	
2/01/2000	Biennial Report	Click to View	
1/17/2002	Biennial Report	Click to View	
4/14/2003	Agent Change	Click to View	
5/16/2003	Agent Change	Click to View	
2/02/2004	Biennial Report	Click to View	
2/09/2006	Biennial Report	Click to View	
2/09/2010	Biennial Report	Click to View	
2/09/2010	Biennial Report	Click to View	
12/05/2011	Agent Change	Click to View	
12/06/2011	Biennial Report	Click to View	
12/31/2013	Biennial Report	Click to View	
12/16/2015	Biennial Report	Click to View	
12/15/2017	Biennial Report	Click to View	
3/22/2018	Agent Change	Click to View	
3/29/2018	Change of Officials	Click to View	
12/13/2019	Biennial Report	Click to View	

 ${\tt COPYRIGHT} @ {\tt STATE} \ OF \ {\tt ALASKA} \ \cdot \underline{{\tt DEPARTMENT}} \ OF \ {\tt COMMERCE}, \ {\tt COMMUNITY}, \ {\tt AND} \ {\tt ECONOMIC} \ {\tt DEVELOPMENT} \ \cdot \\ \\$