STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD

LICENSE NUMBER

FORM CONTROL

XXXX

ISSUED 02/23/2022 ABC BOARD **LIQUOR LICENSE 2022 - 2023** 

**TEMPORARY** 

4798

LICENSE RENEWAL APPLICATION DUE DECEMBER 31, 2023 (AS 04.11.270(b))

THIS LICENSE EXPIRES MIDNIGHT FEBRUARY 28, 2024 UNLESS DATED BELOW

TYPE OF LICENSE: Restaurant/Eating

LICENSE FEE: \$600.00

1135

D/B/A: The Lodge at Black Rapids 227.4 Richardson Highway

Mail Address:

The Black Rapids Lodge, LLC

Box 81871

Fairbanks, AK 99708

CITY / BOROUGH: Outside City Limits
Unorganized 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

JL LAKE

04-900 (REV 7/21)

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

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD

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**COPY** 

DIRECTOR

THIS LICENSE MUST BE POSTED IN A VISIBLE PLACE ON THE PREMISES 04-900 (REV 7/21)

D/B/A:

The Lodge at Black Rapids 227.4 Richardson Highway

Mailing Address:

The Black Rapids Lodge, LLC

Box 81871

Fairbanks, AK 99708



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

# 2022-2023 Master Checklist: Renewal License Application

Doing Business As:	The	Lodge at Blac	ck Rapids		License Number:	4798	
License Type:	Rest	Restaurant/Eating Place-AS 04.11.400(e)					
Examiner:		KW3 S			Transaction #:	100318247	
Document		Received	Completed	Notes			
AB-17: Renewal Appli	cation	12/15	2/23/22				
App and License Fees		12/15 & 12/16	2-7-22		r		
Supplemental Docum	nent	Received	Completed	Notes			
Tourism/Rec Site Stat	ement						
AB-25: Supplier Cert (	WS)						
AB-29: Waiver of Ope	ration						
AB-30: Minimum Ope	ration						
AB-33: Restaurant Aff	idavit	2/23/22	2/23/02	need	V rovd		
COI / COC / 5 Star / FA	AA Cert						
FP Cards & Fees / AB-	08a						
Late Fee							
Names on FP Cards:							
			Yes No	N/A			
CBPL Entity Printout in	ncluded	?					
Business License Copy	/ include	d?					
Background(s) Comple	eted & D	Pate:					
Special Consideration	n:			Board Meeti	ng Date: <u>4- 12</u>	-202	
LGB Sent Date:	N	A	LGB Dead	line Date:			
LGB 1 Name:	NI	4	LGB 2 Nan	ne:	NIA		
Waive	Protes		Wai	<u></u>			



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: 2022/2023 General Renewal Application

 This form and any required supplemental forms must be completed, signed by the licensee, and postmarked no later than 12/31/2021 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 02/28/2022 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.

#### **Establishment Contact Information**

2017 Profess	Establishinent	Contact II	niormation	Property of Contract	State of the same
Licensee (Owner):	The Black Rapids Lodge LLC			License #:	4798
License Type:	Restaurant/Eating Place	e AS - 04.	11.400(e)		
Doing Business As:	The Lodge at Black Ra	pids			
Premises Address:	227.4 Richardson High	way, Delta	Junction, AK	, 99737	
Local Governing Body:	None				
Community Council:	None				
	is changed, write the NEW addi	ess below:			
Mailing Address:					
City:		State:		ZIP	
Contact Licensee:	Ann D. Hopper		<b>Contact Phone</b>	: 907	3888802
Contact Email:	lodgeatblackrapids@gn	nail.com			000002
otional: If you wish for AMCO	staff to communicate with anyone oth	er than the Cont	act Licensee about vo	ur license, list t	hem below:
Name of Contact:			Contact Phone		
Contact Email:			<u> </u>		
Name of Contact:			Contact Phone:		
Contact Email:					
Name of Contact:			Γ		
			Contact Phone		
Contact Email:		-2	Contact Phone:		



#### Alaska Alcoholic Beverage Control Board

# Form AB-17: 2022/2023 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 #: 94726

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:
  - 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:	Ann D. Hopper					
Title(s):	Member	Phone:	9073888802	% Owi	ned:	51
Mailing Address:	P.O Box 81871					
City:	Fairbanks	State:	AK	ZIP:	997	708

Name of Official:	Michael R. Hopper				
Title(s):	Member	Phone:	9073882358	% Owr	ned: 44
Mailing Address:	3560 Old Richardson HW	Υ	_L		<b></b>
City:	North Pole	State:	AK	ZIP:	99705

Name of Official:	Joan Dombroski				
Title(s):	Member	Phone:	7036850780	% Ow	ned: 5
Mailing Address:	701 S Barton ST				
City:	Arlington	State:	VA	ZIP:	22204



# Alaska Alcoholic Beverage Control Board

# Form AB-17: 2022/2023 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. **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 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 calendar years. 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 and/or 2021, 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 Have ANY Notices of Violation been issued for this license OR has ANY person or entity in this application been Yes convicted of a violation of Title 04, 3AAC 304 or a local ordinance adopted under AS 04.21.010 in 2020 or 2021? 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



# Alaska Alcoholic Beverage Control Board

# Form AB-17: 2022/2023 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.

- Lagree 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
  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 provided by AMCO is grounds for rejection of	I understand that providing a false statement on this form or any other form
Signature of licensee	DEC - 1 2021 Aerication of any license issued.  Signature of Notary Public Postmaster/Notary Public
Printed name of licensee	Notary Public in and for the State of: A Cas Pusps ASM  99764 My commission expires: WHATEVM
Subscribed and swor	The second of th

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
Common Carrier applications must include a current safety inspection certificate

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:	\$ (000	Application Fee:	\$ 300.00	Misc. Fee:	c
		Total Fees Due:	1+ 000.00	iviisc. ree:	Ė
					900

AMCO

DEC 1 5 2021

Page 4 of 4

# 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 The Black Rapids Lodge, Limited Liability Company

Entity Type: Limited Liability Company

Entity #: 94726

Status: Good Standing

AK Formed Date: 6/22/2005

**Duration/Expiration:** Perpetual

Home State: ALASKA

Next Biennial Report Due: 1/2/2023

Entity Mailing Address: 1307 WINDFALL WAY, FAIRBANKS, AK 99709

Entity Physical Address: 1307 WINDFALL WAY, FAIRBANKS, AK 99709

# **Registered Agent**

Agent Name: ROBINSON & WARD, P.C.

Registered Mailing Address: 3098 AIRPORT WAY, FAIRBANKS, AK 99709

Registered Physical Address: 3098 AIRPORT WAY, FAIRBANKS, AK 99709

#### **Officials**

			Show Former
AK Entity #	Name	Titles	Owned
	Ann Hopper	Member	51.00
	JOAN DOMBROSKI	Member	5.00
	MICHAEL HOPPER	Member	44.00

# **Filed Documents**

Date Filed	Туре	Filing	Certificate
6/20/2005	Creation Filing	Click to View	Click to View
4/18/2007	Biennial Report	Click to View	
6/24/2009	Biennial Report	Click to View	
7/21/2010	Change of Officials	Click to View	
1/06/2012	Biennial Report	Click to View	
12/31/2012	Biennial Report	Click to View	
12/13/2014	Biennial Report	Click to View	
1/21/2017	Biennial Report	Click to View	
12/03/2018	Agent Change	Click to View	
1/09/2019	Biennial Report	Click to View	
12/08/2020	Biennial Report	Click to View	
5/28/2021	Change of Officials	Click to View	

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**Print Business License** 

State of Alaska / Commerce / Corporations, Business, and Professional Licensing / Search & Database Download / Business License / License #1111307

# LICENSE DETAILS

License #: 1111307

**Business Name: THE LODGE AT BLACK RAPIDS** 

Status: Active

Issue Date: 01/22/2019

Expiration Date: 12/31/2022

Mailing Address: 3098 AIRPORT WAY

FAIRBANKS, AK 99709

Physical Address: 3098 AIRPORT WAY

FAIRBANKS, AK 99709

#### **Owners**

THE BLACK RAPIDS LODGE, LIMITED LIABILITY COMPANY

#### **Activities**

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

## **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.

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