Public Notice

Application for Marijuana Establishment License

License Number: 10747
License Status: Initiated
License Type: Standard Marijuana Cultivation Facility
Doing Business As: GREAT NORTHERN CANNABIS, INC.
Business License Number: 1027119
Email Address: licensing@greatnortherncannabis.com
Latitude, Longitude: 61.147955, -149.838893
Physical Address: 2341 Cinnabar Loop
Anchorage, AK 99507-3150
UNITED STATES

Owner #1

Licensee Type: Entity
Alaska Entity Number: 10032664
Alaska Entity Name: Great Northern Cannabis, Inc.
Phone Number: 907-887-6543
Email Address: info@greatnortherncannabis.com
Mailing Address: 2341 Cinnabar Loop
Anchorage, AK 99507-3150
UNITED STATES

Affiliate #1

Licensee Type: Individual
Name: Morgan Vail
Date of Birth: 03/28/1959
Phone Number: 907-342-7252
Email Address: morganrvail@gmail.com
Mailing Address: 7225 E. 17th Ave.
Anchorage, AK 99504-2704
UNITED STATES

Affiliate #2

Licensee Type: Individual
Name: Amy Vail
Date of Birth: 04/23/1960
Phone Number: 907-229-7541
Email Address: amyatms@gmail.com
Mailing Address: 7225 E. 17th Ave.
Anchorage, AK 99504-2704
UNITED STATES

Affiliate #3

Licensee Type: Individual
Name: Darcy Holt
Date of Birth: 11/21/1958
Phone Number: 907-240-1150
Email Address: darcy@gci.net
Mailing Address: 3001 Admiralty Bay Dr.
Anchorage, AK 99515-2425
UNITED STATES

Affiliate #4

Licensee Type: Individual
Name: Michael Ellenburg
Date of Birth: 05/31/1971
Phone Number: 907-632-2749
Email Address: ecfnm2009@gmail.com
Mailing Address: 3500 Latouche St., Suite 360
Anchorage, AK 99508-4260
UNITED STATES

Affiliate #5

Licensee Type: Individual
Name: Thomas Desalvo
Date of Birth: 04/19/1985
Phone Number: 907-715-9950
Email Address: tommy.419@hotmail.com
Mailing Address: 5441 Windflower Cir., Unit A
Anchorage, AK 99507-1670
UNITED STATES

Affiliate #6

Licensee Type: Individual
Name: Patrick Flynn
Date of Birth: 01/26/1972
Phone Number: 907-278-8462
Email Address: flatpynn@yahoo.com
Mailing Address: 918 R Street
Anchorage, AK 99501-3241
UNITED STATES

Affiliate #7

Licensee Type: Individual
Name: Jordan Huss
Date of Birth: 06/28/1983
Phone Number: 907-441-5637
Email Address: jordanhuss@msn.com
Mailing Address: 2201 Olympic Dr.
Anchorage, AK 99515-1444
UNITED STATES

Affiliate #8

Licensee Type: Individual
Name: Stephen Brashear
Date of Birth: 10/05/1969
Phone Number: 907-887-6543
Email Address: steve@greatnortherncannabis.com
Mailing Address: 21919 Barclay Dr.
Eagle River, AK 99577-9516
UNITED STATES

Affiliate #9

Licensee Type: Individual
Name: Brent Miller
Date of Birth: 04/01/1967
Phone Number: 907-297-8238
Email Address: bactmiller@gmail.com
Mailing Address: 811 Allison Cir.
Anchorage, AK 99515-3284
UNITED STATES

Affiliate #10

Licensee Type: Individual
Name: Jerad Brown
Date of Birth: 12/01/1972
Phone Number: 907-322-2368
Email Address: mjbrown224@gmail.com
Mailing Address: 2221 Patriot Circle
Anchorage, AK 99515-2551
UNITED STATES

Affiliate #11

Licensee Type: Individual
Name: Gerardo Martinez
Date of Birth: 09/22/1968
Phone Number: 907-529-8570
Email Address: Baxerdgo@hotmail.com
Mailing Address: P.O. Box 210386
Anchorage, AK 99521-0386
UNITED STATES

Interested persons should submit written comment or objection to their local government, the applicant, and to the Alcohol & Marijuana Control Office at 550 W 7th Ave, Suite 1600, Anchorage, AK 99501 or to marijuana.licensing@alaska.gov not later than 30 days after this notice of application.

POSTING DATE_____