

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD

LICENSE NUMBER

FORM CONTROL

XXXX

ISSUED

LIQUOR LICENSE

4317

12/20/2021

2021 - 2022

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

ABC BOARD

THIS LICENSE EXPIRES MIDNIGHT
FEBRUARY 28, 2023 UNLESS DATED BELOW

TYPE OF LICENSE: Beverage Dispenser

LICENSE FEE: \$2,500.00

1105

CITY / BOROUGH: Anchorage, Muni. of
Anchorage

D/B/A: Eddie's Sports Bar
6300 Old Seward Highway

Mail Address:
Rockdance, Inc.
6300 Old Seward Highway
Anchorage, AK 99518

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

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COPY

DIRECTOR

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04-900 (REV 9/09)



Alaska Alcoholic Beverage Control Board

Master Checklist: Renewal Liquor License Application

Doing Business As:	Eddie's Sports Bar	License Number:	4317
License Type:	Beverage Dispensary - Duplicate		
Examiner:	<i>Kns S.</i>	Transaction #:	100029929

Document	Received	Completed	Notes
AB-17: Renewal Application	<i>12/29/20</i>	<i>12/20/21</i>	
App and License Fees	<i>12/29/20</i>	<i>12/20/21</i>	

Supplemental Document	Received	Completed	Notes
Tourism/Rec Site Statement			
AB-25: Supplier Cert (WS)			
AB-29: Waiver of Operation			
AB-30: Minimum Operation			
AB-33: Restaurant Affidavit			
COI / COC / 5 Star			
FP Cards & Fees / AB-08a			
Late Fee			

Names on FP Cards:	
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	Yes	No
Selling alcohol in response to written order (package stores)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Mailing address and contact information different than in database (if yes, update database)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
In "Good Standing" with CBPL (skip this and next question for sole proprietor)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Officers and stockholders match CBPL and database (if "No", determine if transfer necessary)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

LGB 1 Response: *MOA* *cc / tax / camp bell* LGB 2 Response: *N/A*

Waive
 Protest
 Lapsed
 Waive
 Protest
 Lapsed



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.

Establishment Contact Information

Licensee (Owner):	ROCKDANCE INC.	License #:	4317
License Type:	Beverage Dispensary		
Doing Business As:	Eddies Sports Bar		
Premises Address:	6300 Old Seward Hwy Anchorage, AK 99518		
Local Governing Body:	Municipality of Anchorage		
Community Council:	Taku / Campbell		

If your mailing address has changed, write the NEW address below:

Mailing Address:					
City:		State:		ZIP:	

Section 1 - Licensee Contact Information

Contact Licensee: The individual listed below must be listed in Section 2 or 3 as an Official/Owner/Shareholder of your entity and must be listed on CBPL with the same name and title.

This person will be the designated point of contact regarding this license, unless the Optional contact is completed.

Contact Licensee:	Tim Dudley	Contact Phone:	907-563-3970
Contact Email:	Timdud1@yahoo.com		

Optional: If you wish for AMCO staff to communicate with anyone other than the Contact Licensee about your license, list them below:

Name of Contact:	Darplyn Raskin	Contact Phone:	907-563-3970
Contact Email:	Wyeth_07@hotmail.com		

Name of Contact:		Contact Phone:	
Contact Email:			

Name of Contact:		Contact Phone:	
Contact Email:			

AMCO



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 #:	39450D
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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 any type including non-profit** must list **ONLY** the following:
 - All shareholders who own 10% or more stock in the corporation
 - Each President, Vice-President, Secretary, and Managing Officer regardless of percentage owned
- **Limited Liability Corporations, of any 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:
 - 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:	Darolyn Raskin				
Title(s):	President	Phone:	907-947-7447	% Owned:	48
Mailing Address:	3911 Pawn Place				
City:	Anchorage	State:	AK	ZIP:	99508

Name of Official:	Tim Dudley				
Title(s):	Secretary/Treasurer	Phone:	907-632-8135	% Owned:	48
Mailing Address:	6220 Austin Street				
City:	Anchorage	State:	AK	ZIP:	99518

Name of Official:					
Title(s):		Phone:		% Owned:	
Mailing Address:					
City:		State:		ZIP:	

* Per applicant 12/20/21



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:

- | | 2019 | 2020 |
|---|-------------------------------------|-------------------------------------|
| 1. The license was regularly operated continuously throughout each year. (Year-round) | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2. The license was only operated during a specific season each year. (Seasonal)
<i>If your operation dates have changed, list them below:</i>
_____ to _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. The license was only operated to meet the minimum requirement of 240 total hours each calendar year.
<i>A complete AB-30: Proof of Minimum Operation Checklist, and all documentation must be provided with this form.</i> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. 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. <i>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.</i> | <input type="checkbox"/> | <input type="checkbox"/> |

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

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? Yes No

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.




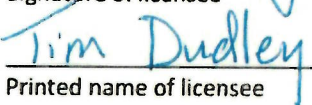
Form AB-17: 2021/2022 License Renewal Application

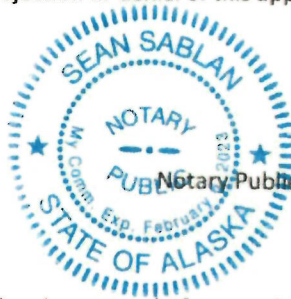
Section 6 – Certifications

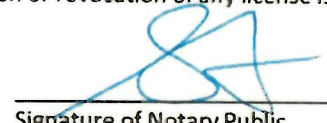
As an applicant for a liquor license renewal, I declare under penalty of perjury that I have read and am familiar with AS 04 and 3 AAC 304, and that this application, including all accompanying schedules and statements, are true, correct, and complete.

- 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.

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 by AMCO is grounds for rejection or denial of this application or revocation of any license issued.


 Signature of licensee

 Printed name of licensee




 Signature of Notary Public
 Notary Public in and for the State of: Alaska
 My commission expires: 02-06-2023

Subscribed and sworn to before me this 28th day of December, 2020.

- 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:	\$ <u>2500</u>	Application Fee:	\$ 300.00	Misc. Fee:	\$
Total Fees Due:					\$ <u>2800</u>

AMCO

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	ROCKDANCE, INC.

Entity Type: Business Corporation

Entity #: 39450D

Status: Good Standing

AK Formed Date: 1/2/1987

Duration/Expiration: Perpetual

Home State: ALASKA

Next Biennial Report Due: 1/2/2022

Entity Mailing Address: 6300 OLD SEWARD HWY, ANCHORAGE, AK 99518

Entity Physical Address: 6300 OLD SEWARD HWY, ANCHORAGE, AK 99518

Registered Agent

Agent Name: Eddie James

Registered Mailing Address: 6300 OLD SEWARD HWY, ANCHORAGE, AK 99518

Registered Physical Address: 6300 OLD SEWARD HWY, ANCHORAGE, AK 99518

Officials

Show Former

AK Entity #	Name	Titles	Owned
	DAROLYN RASKIN	President, Shareholder	48.00
	Edward M James	Director, Shareholder	2.00
	Patricia A James	Director, Shareholder	2.00

AK Entity #	Name	Titles	Owned
	TIMOTYHY DUDLEY	Secretary, Shareholder, Treasurer	48.00

Filed Documents

Date Filed	Type	Filing	Certificate
1/02/1987	Creation Filing		
8/17/1989	Biennial Report		
12/26/1990	Biennial Report		
2/29/1992	Biennial Report		
1/21/1993	Biennial Report	Click to View	
2/21/1995	Biennial Report	Click to View	
1/06/1997	Biennial Report	Click to View	
9/28/1999	Biennial Report	Click to View	
1/02/2001	Biennial Report	Click to View	
4/21/2003	Biennial Report	Click to View	
1/13/2005	Biennial Report	Click to View	
12/22/2006	Biennial Report	Click to View	
6/24/2011	Biennial Report	Click to View	
6/27/2011	Biennial Report	Click to View	
10/16/2012	Biennial Report	Click to View	
1/21/2014	Biennial Report	Click to View	
3/12/2015	Change of Officials	Click to View	
2/26/2016	Biennial Report	Click to View	
12/27/2017	Biennial Report	Click to View	
12/23/2019	Biennial Report	Click to View	

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Alaska Business License # 274960

Alaska Department of Commerce, Community, and Economic Development

Division of Corporations, Business, and Professional Licensing
PO Box 110806, Juneau, AK 99811-0806

This is to certify that

EDDIE'S SPORTS BAR

6300 OLD SEWARD HWY, ANCHORAGE, AK 99518

owned by

ROCKDANCE, INC.

is licensed by the department to conduct business for the period

December 23, 2019 to December 31, 2021
for the following line(s) of business:

72 - Accommodation and Food Services



This license shall not be taken as permission to do business in the state without having complied with the other requirements of the laws of the State or of the United States.

This license must be posted in a conspicuous place at the business location.
It is not transferable or assignable.

Julie Anderson
Commissioner

Alaska Business License # 274960

Alaska Department of Commerce, Community, and Economic Development

Division of Corporations, Business, and Professional Licensing
PO Box 110806, Juneau, AK 99811-0806

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6300 OLD SEWARD HWY, ANCHORAGE, AK 99518

owned by

ROCKDANCE, INC.

ENDORSEMENT: 274960 - 2

Effective December 23, 2019 through December 31, 2021

This business license has an endorsement for the physical address shown below:

6300 OLD SEWARD HWY, ANCHORAGE, AK 99518



This license shall not be taken as permission to do business in the state without having complied with the other requirements of the laws of the State or of the United States.

This license must be posted in a conspicuous place at the business location.
It is not transferable or assignable.

Julie Anderson
Commissioner

From: [Alcohol Licensing, CED ABC \(CED sponsored\)](#)
To: timdud1@yahoo.com; wynth_07@hotmail.com
Cc: [Alcohol Licensing, CED ABC \(CED sponsored\)](#)
Subject: 4317 - Incomplete Renewal Application Notice
Date: Thursday, April 22, 2021 9:24:07 AM
Attachments: [4317 incomplete renewal app page 2.pdf](#)
Importance: High

Hello,

I have received and reviewed your renewal liquor license application. At this time, your application is considered incomplete. Please review the instructions on how to complete your application.

- **AB-17**
 - **Page 2 Section 2**
 - Please provide a complete mailing address for Darolyn Raskin

Please make the necessary corrections on the attached documents and return to this email no later than close of business **April 30th, 2021**. Completed documents (with the exception of fingerprint cards or payments may be scanned and emailed, and questions or concerns may be sent to alcohol.licensing@alaska.gov

Thank you,

Olivia Frank

Occupational Licensing Examiner
Alcohol and Marijuana Control Office
alcohol.licensing@alaska.gov
marijuana.licensing@alaska.gov



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