



Alaska Alcoholic Beverage Control Board Recreational Site Statement

What is this document?

A new, transfer, or renewal application for a recreational site license must be accompanied by a written statement that explains how the establishment meets the requirements listed under AS 04.11.210.

This form must be completed and submitted to AMCO's main office before any recreational site license application will be reviewed.

Section 1 – Establishment Information

Enter information for the business seeking to have its license renewed.

Doing Business As:	ANCHORAGE GLACIER PILOTS INC.	License #:	1314
License Type:	RECREATIONAL SITE SEASONAL		

Section 2 – Recreational Site Statement

2.1. Explain what hours you will be serving beer and wine at your establishment in relation to your event hours.

DURING GAME - 1 HOUR PRIOR. ENDING SALES IN 8TH INNING.
AT THE EARLIEST A GAME COULD BEGIN AT 11AM.

2.3 Are baseball games, car races, hockey games, sled dog racing events, or curling matches regularly held during a season at your establishment?

YES

NO

If no, what recreational events are regularly held during a season at your establishment that you believe qualify you for a recreational site license under AS 04.11.210?

2.4 What is the season(s) of your recreational events?

JUNE 1 - AUGUST 8 AT THE LATEST (CHAMPIONSHIP).

AMCO

STATE OF ALASKA - ALCOHOLIC BEVERAGE CONTROL BOARD

LICENSE NUMBER

FORM CONTROL

XXXX

ISSUED
12/02/2021
ABC BOARD

LIQUOR LICENSE
2022 - 2023
TEMPORARY

1314

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: Recreational Site

6/1 - 8/31

LICENSE FEE: \$400.00

1193

CITY / BOROUGH: Anchorage, Muni. of
Anchorage

D/B/A: Anchorage Glacier Pilots
Mulcahy Stadium

Mail Address:
Anchorage Glacier Pilots, Inc.
435 W. 10th Avenue, Ste. A
Anchorage, AK 99501

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 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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FORM CONTROL

XXXX

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12/02/2021
ABC BOARD

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ISSUED BY ORDER OF THE
ALCOHOLIC BEVERAGE CONTROL BOARD

COPY

DIRECTOR

D/B/A: Anchorage Glacier Pilots
Mulcahy Stadium

Mailing Address:
Anchorage Glacier Pilots, Inc.
435 W. 10th Avenue, Ste. A
Anchorage, AK 99501

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

04-900 (REV 7/21)



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

Licensee (Owner):	ANCHORAGE GLACIER PILOTS INC.	License #:	1314
License Type:	RECREATIONAL SITE SEASONAL		
Doing Business As:	ANCHORAGE GLACIER PILOTS		
Premises Address:	MURPHY STADIUM		
Local Governing Body:	MDA		
Community Council:	FAIRVIEW		

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:	MIKE HINSHAW	Contact Phone:	907 274-3627
Contact Email:	mike.gpilots@gmail.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:		Contact Phone:	
Contact Email:			

Name of Contact:		Contact Phone:	
Contact Email:			

Name of Contact:		Contact Phone:	AMCO
Contact Email:			

NOV 16 2021



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 #.
<https://www.commerce.alaska.gov/cbp/main/search/entities>

Alaska CBPL Entity #:	23209D
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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:	MIKE HINSHAW			501c3	
Title(s):	Affiliate ..	Phone:	907 274-3627	% Owned:	0
Mailing Address:	435 W. 10TH AVE. STE. A				
City:	ANCHORAGE	State:	AK.	ZIP:	99501

Name of Official:	CASEY VOLK				
Title(s):	PRESIDENT	Phone:	907 274-3627	% Owned:	0
Mailing Address:	435 W. 10TH AVE. STE. A				
City:	ANCHORAGE	State:	AK.	ZIP:	99501

Name of Official:	JON DYSON				
Title(s):	VICE PRESIDENT	Phone:	907 274-3627	% Owned:	0
Mailing Address:	435 W. 10TH AVE. STE. A				
City:	ANCHORAGE	State:	AK.	ZIP:	99501

AMCO

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Form AB-17: 2022/2023 License Renewal Application

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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 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:	KATELYN ARMSTRONG				
Title(s):	SECRETARY	Phone:	907 274-3627	% Owned:	0
Mailing Address:	435 W. 16TH STE. A				
City:	ANCHORAGE	State:	AK.	ZIP:	99501

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

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

* Remove Marilyn Shelton per applicant.

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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.

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:

- | | 2020 | 2021 |
|---|-------------------------------------|-------------------------------------|
| 1. The license was regularly operated continuously throughout each year. (Year-round) | <input type="checkbox"/> | <input 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> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| _____ to _____ | <i>COVID</i> | |
| 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 checked="" 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 checked="" type="checkbox"/> | <input type="checkbox"/> |

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 convicted of a violation of Title 04, 3AAC 304 or a local ordinance adopted under AS 04.21.010 in 2020 or 2021? 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: 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.

- 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.

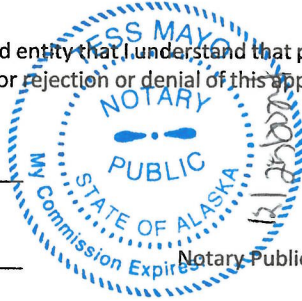
I certify on behalf of myself or of the organized entity that I understand that providing a false statement on this form or any other form provided by AMCO is grounds for rejection or denial of this application or revocation of any license issued.

Mike Hinshaw

Signature of licensee

MIKE HINSHAW

Printed name of licensee



Jess Mayo

Signature of Notary Public

Notary Public in and for the State of: Alaska

My commission expires: DEC 25 2024

Subscribed and sworn to before me this 10th day of November, 2021.

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:	\$ <u>400</u>	Application Fee:	\$ 300.00	Misc. Fee:	\$
Total Fees Due:					\$ <u>700.00</u>

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	ANCHORAGE GLACIER PILOTS, INC.

Entity Type: Nonprofit Corporation

Entity #: 23209D

Status: Good Standing

AK Formed Date: 1/12/1981

Duration/Expiration: Perpetual

Home State: ALASKA

Next Biennial Report Due: 7/2/2023

Entity Mailing Address: 435 W 10TH AVE STE A, ANCHORAGE, AK 99501-3556

Entity Physical Address: 435 W 10TH AVE STE A, ANCHORAGE, AK 99501-3556

Registered Agent

Agent Name: Philip H Mink

Registered Mailing Address: 435 W 10TH AVE STE A, ANCHORAGE, AK 99501-3556

Registered Physical Address: 435 W 10TH AVE STE A, ANCHORAGE, AK 99501-3556

Officials

Show Former

AK Entity #	Name	Titles	AMCO Owned
	CASEY VOLK	Director, Vice President	
	Claire Feild	Director, Treasurer	
	Jonathan Dyson	Director, President	

NOV 16 2021

AK Entity #	Name	Titles	Owned
	Katelyn Armstrong	Director, Secretary	

Filed Documents

Date Filed	Type	Filing	Certificate
1/12/1981	Creation Filing	Click to View	
7/24/1985	Biennial Report		
2/10/1986	Amendment	Click to View	
3/01/1988	Admin Dissolution	Click to View	
3/30/1988	Reinstatement	Click to View	
3/30/1988	Biennial Report		
3/06/1989	Agent Change	Click to View	
7/31/1989	Biennial Report		
2/10/1992	Admin Dissolution	Click to View	
6/02/1992	Reinstatement	Click to View	
12/31/1993	Biennial Report	Click to View	
7/19/1995	Biennial Report	Click to View	
10/10/1995	Agent Change	Click to View	
12/05/1997	Biennial Report	Click to View	
6/03/2001	Reinstatement	Click to View	
8/03/2001	Biennial Report	Click to View	
9/28/2001	Biennial Report	Click to View	
6/30/2003	Biennial Report	Click to View	
5/10/2004	Agent Change	Click to View	
5/10/2004	Change of Officials	Click to View	
4/07/2005	Change of Officials	Click to View	
6/24/2005	Biennial Report	Click to View	
10/06/2005	Change of Officials	Click to View	
3/20/2006	Agent Resignation	Click to View	
4/17/2006	Agent Change	Click to View	
4/20/2006	Change of Officials	Click to View	
10/30/2006	Change of Officials	Click to View	
6/10/2007	Biennial Report	Click to View	
11/16/2007	Change of Officials	Click to View	
12/06/2007	Change of Officials	Click to View	
10/20/2008	Change of Officials	Click to View	
6/22/2009	Initial Report	Click to View	AMCO
2/01/2010	Change of Officials	Click to View	NOV 16 2021
2/10/2010	Biennial Report	Click to View	
10/19/2010	Change of Officials	Click to View	

Date Filed	Type	Filing	Certificate
12/22/2010	Change of Officials	Click to View	
6/17/2011	Biennial Report	Click to View	
9/24/2012	Change of Officials	Click to View	
8/08/2013	Biennial Report	Click to View	
10/10/2013	Change of Officials	Click to View	
9/22/2014	Change of Officials	Click to View	
6/29/2015	Biennial Report	Click to View	
7/13/2015	Agent Change	Click to View	
12/09/2015	Change of Officials	Click to View	
10/27/2016	Change of Officials	Click to View	
7/05/2017	Biennial Report	Click to View	
10/13/2017	Change of Officials	Click to View	
9/26/2018	Change of Officials	Click to View	
6/21/2019	Biennial Report	Click to View	
12/02/2019	Change of Officials	Click to View	
8/26/2021	Biennial Report	Click to View	

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AMCO
NOV 16 2021

Department of Commerce, Community, and Economic Development
**DIVISION OF CORPORATIONS, BUSINESS &
PROFESSIONAL LICENSING**

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LICENSE DETAILS

License #: 45119

[Print Business License](#)

Business Name: ANCHORAGE GLACIER PILOTS, INC.

Status: Active

Issue Date:

Expiration Date: 12/31/2022

Mailing Address: 435 W. 10TH AVENUE, SUITE A
ANCHORAGE, AK 99501-3556

Physical Address: 435 W. 10th Ave. Ste. A, Anchorage
9072743627
Anchorage, AK 99501-3556

Owners

ANCHORAGE GLACIER PILOTS, INC.

Activities

Line of Business	NAICS	Professional License #
71 - Arts, Entertainment and Recreation	713990 - ALL OTHER AMUSEMENT AND RECREATION INDUSTRIES	

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.