

# Change of Officers

(Agenda Item Number)

(Legistar file number)

(License number)

(Alder District # and Name)

Office Use Only

## City of Madison Clerk

210 MLK Jr Blvd, Room 103

Madison, WI 53703

Class A: ☐ Beer, ☐ Liquor, ☐ Cider

Class B: ☒ Beer, ☐ Liquor,

☐ Class C Wine

[licensing@cityofmadison.com](mailto:licensing@cityofmadison.com)

608-266-4601

- o This application is to inform the city of any changes in corporate structure.
- o **The fee** for filing this application is \$25.00.
- o Please include a completed a **Background Investigation Form** and copy of a **picture ID** for each **new** officer/member/director with this application (not necessary for title changes).

### Licensed Premises Information

This application modifies existing alcohol license number: 65837 - 67381

Business dba Name: PIZZA PIT

Licensed Address: 21 ATLAS CT MADISON, WI 53714

Liquor/Beer Agent Name: ROBIN M GOLDBERG Alder, District #: 3

### Corporate Information

Business Legal Name (as on WI State Sellers Permit): CCG ENTERPRISES LLC

Business Mailing Address: 21 ATLAS CT. MADISON, WI 53714

Business Contact Name, Position: ROBIN GOLDBERG - MANAGER

Business Phone: 608-888-5001 Business Email: ROBIN@DREAMLANES.COM

List New Officers/Members/Directors, if applicable (attach background check form for each):	
Name	Title
MATTHEW DAVIS	MEMBER
RYAN ORVIS	MEMBER
Officers/Members/Directors who will no longer hold their positions:	
Name	Former Title
ROBIN M GOLDBERG	MEMBER

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Do any of the officers/members/directors possess any interest or control in any other Class A, B or C license?


☐ No ☒ Yes, explain:

BOTH MATTHEW + RYAN HOLD A COMBINATION CLASS B LICENSE WITH DREAM LANES

After this change, how many total officers/members/directors will be in the organization?: 3

Will this change alter your business plan? ☒ No ☐ Yes, please attach new business plan with application.

*Penalty for materially false application information: Any person who knowingly provides materially false information on this application may be required to forfeit not more than \$1,000.*

  
Authorized Signature

5-1-25  
Date

☐ Form submitted by mail/e-mail  
Office Use Only