



Change of Officers

City of Madison Clerk

210 MLK Jr Blvd, Room 103
Madison, WI 53703

licensing@cityofmadison.com
608-266-4601

Class A: ☐ Beer, ☐ Liquor, ☐ Cider
Class B: ☒ Beer, ☒ Liquor,
☐ Class C Wine

(Agenda Item Number)

(Legistar file number)

(License number)

(Alder District # and Name)

Office Use Only

- 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: 610613-2018-00558

Business dba Name: VINTAGE II TANGENT

Licensed Address: 803 EAST WASHINGTON AVE MADISON WI 53701

Liquor/Beer Agent Name: TRENT KRAEMER Alder, District #: 6

Corporate Information

Business Legal Name (as on WI State Sellers Permit): VINTAGE II

Business Mailing Address: 674 S WHITNEY WAY MADISON WI 53711

Business Contact Name, Position: ROBY NIENATADLO / DIRECTOR OF OPERATIONS

Business Phone: 608-658-7386 Business Email: ROBYN@VINTAGEBREWINGCO.COM

List New Officers/Members/Directors, if applicable (attach background check form for each):

| Name | Title |
|-----------------|-------|
| ROBY NIENATADLO | OWNER |
| | |
| | |
| | |
| | |

Officers/Members/Directors who will no longer hold their positions:

| Name | Former Title |
|--------------|--------------|
| MARK KRAEMER | OWNER |
| | |
| | |

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

☒ No ☐ Yes, explain: _____

After this change, how many total officers/members/directors will be in the organization?: 5

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

5/30/2025
Date

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