



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)

LICLIB-2014-00370
(License number)

17 Madison
(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: LICLIB-2014-00370

Business dba Name: Red Lobster #0377

Licensed Address: 4502 East Towne Blvd, Madison, WI 53704

Liquor/Beer Agent Name: Tony Torres Alder, District #: _____

Corporate Information

Business Legal Name (as on WI State Sellers Permit): Red Lobster Hospitality LLC

Business Mailing Address: Attn: Licensing Dept, PO Box 6508, Orlando, FL 32802-6508

Business Contact Name, Position: Joyce Leonardi - Legal Specialist

Business Phone: 407-734-9652 Business Email: RLLicensing@redlobster.com

List New Officers/Members/Directors, if applicable (attach background check form for each):	
Name	Title
<u>Philip McClain</u>	<u>President</u>
Officers/Members/Directors who will no longer hold their positions:	
Name	Former Title
<u>Craig Anthony Pommells</u>	<u>President</u>

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

No Yes, explain: Other Red Lobsters in the Wisconsin State

After this change, how many total officers/members/directors will be in the organization?: 4

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.

Norma Rivera 3/31/2023
Authorized Signature Date
Norma Rivera
VP/Asst. Secretary

Form submitted by mail/e-mail
Office Use Only