



# Change of Officers

(Agenda Item Number)

(Legistar file number)

1473-965

(License number)

10-Figueroa Cole

(Alder District # and Name)

Office Use Only

## City of Madison Clerk

210 MLK Jr Blvd, Room 103  
Madison, WI 53703

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

608-266-4601

Class A:  Beer,  Liquor,  Cider

Class B:  Beer,  Liquor,

Class C Wine

- 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: 1473-965

Business dba Name: NAKOMA GOLF CLUB

Licensed Address: 4145 COUNTRY CLUB RD MADISON WI 53703

Liquor/Beer Agent Name: BRIAN MARTZ Alder, District #: 10

### Corporate Information

Business Legal Name (as on WI State Sellers Permit): NAKOMA GOLF CLUB INC

Business Mailing Address: 4145 COUNTRY CLUB RD MADISON WI 53703

Business Contact Name, Position: KRYS WACHOWIAK F&B DIRECTOR

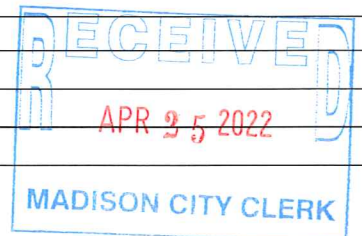
Business Phone: 608.210.3811 Business Email: KRYS@NAKOMA.ORG

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

Name	Title
PHIL PLOURD	OFFICER
MELISSA WILLIAMS	OFFICER

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

Name	Former Title
MATT BRANDRUP	OFFICER
MAKEBA BOATWRIGHT	OFFICER



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?: 9

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.*

Krys Wachowiak  
Authorized Signature

4/14/22  
Date

Form submitted by mail/e-mail  
Office Use Only