



Change of Officers

(Agenda Item Number)
55015
 (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
licensing@cityofmadison.com
 608-266-4601

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

- This application is to inform the city of any changes in corporate structure.
- **The fee** for filing this application is \$25.00.
- Please include a completed **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 - 2011 - 61725
 Business dba Name: Hyatt Place Madison
 Licensed Address: 333 West Washington Avenue, Madison WI 53703
 Liquor/Beer Agent Name: Mark Neubauer Alder, District #: _____

Corporate Information

Business Legal Name (as on WI State Sellers Permit): Select Hotels Group, LLC
 Business Mailing Address: 150 N. Riverside Plaza, Chicago IL 60606
 Business Contact Name, Position: Neal Pekala, Director - Legal Services
 Business Phone: 312-780-5511 Business Email: neal.pekala@hyatt.com

List New Officers/Members/Directors, if applicable (attach background check form for each):	
Name	Title
<u>Joan Bottarani</u>	<u>Vice President + Treasurer</u>
Officers/Members/Directors who will no longer hold their positions:	
Name	Former Title
<u>Patrick Conisner</u>	<u>Vice President + Treasurer</u>

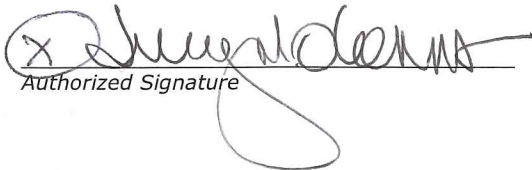
Do any of the officers/members/directors possess any interest or control in any other Class A, B or C license?

No Yes, explain: _____

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

3-5-19
Date

Form submitted by mail/e-mail
Office Use Only

