

THE ALCOHOL BEVERAGE BOARD OF ST. MARY'S COUNTY
P. O. BOX 653
41650 TUDOR HALL RD., LEONARDTOWN, MD 20650
(301) 475-7844 EXT. 1600 – FAX (301) 475-3364

CORPORATE OFFICER SUBSTITUTION

PAPERWORK DEADLINE: _____

BOARD MEETING: _____

This application must be completed and filed with the Alcohol Beverage Board when requesting the substitution of a corporate officer. **Please fill out one application for every officer substitution you have.**

Application must be accompanied by a **copy of the minutes** of the meeting in which the outgoing officer was removed.

A criminal background check is necessary for an incoming corporate officer. Incoming officer must bring a government issued photo ID to this office & receive a LiveScan form & info on where to go for fingerprinting.

CORPORATE OFFICER SUBSTITUTION

We, the undersigned duly elected officers of the _____
(Corporation Name)

t/a _____ desire to substitute a newly elected
(Trade Name)

Corporate Officer on the license in the place of _____ and we
(Out going officer)

certify to the Board the following facts.

1. Name and address of former officer:

He (she) held the office of _____ of said corporation.

2. On _____ the following person was elected to fill the vacancy resulting from the resignation of said former officer:

Name and address of elected officer:

Phone (301) _____ Office to which elected: _____.

3. The current officers of the corporation are:

President Name: _____

Address _____

Phone (301) _____ % of Stock _____

Vice-President Name: _____

Address _____

Phone (301) _____ % of Stock _____

Secretary Name _____

Address _____

Phone (301) _____ % of Stock _____

Treasurer Name _____

Address _____

Phone (301) _____ % of Stock _____

- 4. The incoming corporate officer owns _____ % of the stock of the Corporation.
- 5. The incoming corporate officer has resided in St. Mary's County for _____ years next preceding the filing of this application. (Answer only if a resident of St. Mary's County).
- 6. The former officer, _____, was/was not the Resident Agent of the Corporation.
- 7. We, the under signed officers of the corporation affirm that not more than 50% of the stock in the corporation has been transferred since the original or most recent renewal application was filed.

IN WITNESS WHEREOF, we have affixed our signatures to the Application this _____ day of _____, _____.

Name and Title

Name and Title

Name and Title

Name and Title

STATE OF MARYLAND, COUNTY OF _____ SS:

THIS CERTIFIES that on the _____ day of _____, 20____,
Before the subscriber, a Notary Public of the State of Maryland, personally appeared

The applicant(s) named in the foregoing application, and made oath in due form of law that the statements therein are true to the best of (his/her/their) knowledge and belief.

WITNESS my hand and official seal.

Notary Public
My Commission Expires _____

STATEMENT OF FORMER OFFICER

The undersigned acknowledges that he (she) resigned his (her) position as

_____ of _____
(Title) (Corporation)

Trading as: _____

On _____, ____.

(Former Officer)

STATE OF MARYLAND, COUNTY OF _____, to wit:

I HEREBY CERTIFY THAT ON THE ____ DAY OF _____, _____

personally appeared _____

and made oath that he (she) has personal knowledge of the above statements and that they are true and correct.

WITNESS my hand and official seal.

NOTARY PUBLIC

My Commission Expires: _____

TO BE ANSWERED BY INCOMING CORPORATE OFFICER

NAME: _____

ADDRESS: _____

DATE OF BIRTH _____ Place of Birth _____

SOCIAL SECURITY # _____

1. State whether or not you have now, or have ever had an interest, either direct or indirect, in any place of business in St. Mary's County, Maryland for which an alcohol beverage license has been issued. If yes specify trade name and location. Yes ___ No ___
2. State whether or not you have ever been convicted of a felony, violation of the alcoholic beverage or gambling laws of the State of Maryland or of the U.S. If so, specify: Yes ___ No ___
3. State whether the applicant has had a license for the sale of alcoholic beverages denied, suspended, or revoked in any jurisdiction: If so, specify the jurisdiction: Yes ___ No ___
4. Have you ever held a license for the sale of alcoholic beverages and, if so, in what State and what location? Yes ___ No ___
5. Do you have a pecuniary interest in the business to be conducted under this license? Yes ___ No ___

Signature of Incoming Officer: _____

STATE OF MARYLAND, COUNTY OF _____, to wit:

I HEREBY CERTIFY that on the ___ day of _____, _____,

Personally appeared and made oath that he (she) has personal knowledge of the above Statements and that they are true and correct.

WITNESS my hand and official seal.

NOTARY PUBLIC
MY COMMISSION EXPIRES: _____

***** Office Use Only *****

Background Check:

Photo ID	LiveScan Issued on:	Results