



Pima County Clerk of the Board

Julie Castañeda

Melissa Manriquez
Deputy Clerk

Administration Division
130 W. Congress, 5th Floor
Tucson, AZ 85701
Phone: (520) 724-8449 • Fax: (520) 222-0448

Document and Micrographics Mgt. Division
1640 East Benson Highway
Tucson, Arizona 85714
Phone: (520) 351-8454 • Fax: (520) 791-6666

June 12, 2017

Daniel Moore Bates
El Corral Prime Rib House
6541 E. Tanque Verde Rd., Suite 22
Tucson, AZ 85715

RE: Application for Agent Change/Acquisition of Control/Restructure
Arizona Liquor License No.: 06100014
El Corral Prime Rib House

Dear Mr. Bates:

Notice is hereby given that the Pima County Board of Supervisors will hold a hearing in reference to the above application. Please be advised that the hearing has been scheduled for Tuesday, July 11, 2017, at 9:00 a.m. or thereafter, to be held at the following location:

Pima County Administration Building
Board of Supervisors Hearing Room
130 West Congress, 1st Floor
Tucson, Arizona 85701

If you have any questions pertaining to this hearing, please contact this office at (520)724-8449.

Sincerely,

A handwritten signature in cursive script, appearing to read "Julie Castañeda".

Julie Castañeda
Clerk of the Board



Pima County Clerk of the Board

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TO: Pima County Sheriff's Department
Investigative Support Unit

FROM: Ricci Romero *RR*
Administrative Support Specialist Senior

DATE: May 23, 2017

RE: Sheriff's Report - Application for Agent Change/Acquisition of Control/
Restructure

Attached is the application of:

Daniel Moore Bates
d.b.a. El Corral Prime Rib House
2201 E. River Road
Tucson, AZ 85718

Arizona Liquor License No. 06100014

SHERIFF'S REPORT

DATE: 06/02/17

Is there any reason this application should not be recommended for approval?

- NOTHING NOTED

[Signature]
Investigative Support Unit Supervisor

When completed, please return to cob_mail@pima.gov.

JUN 27 11:00 AM '17 PCC/CLK/CF/HD *AF*



17-16-0096

Dept #1139

State of Arizona
Department of Liquor Licenses and Control
800 W. Washington 5th Floor
Phoenix, AZ 85007
(602) 542-5141

DLLC USE ONLY

Date Processed:
CSR:
60th Day:

APPLICATION FOR AGENT CHANGE - ACQUISITION OF CONTROL - RESTRUCTURE

NOTE: 1) The fee for an agent change MUST be submitted with this application: \$100.00 for the first application and \$50.00 for each additional application, not to exceed \$1,000.00. (A.R.S. 4-209.H) NOTE 2) the \$100.00 fee for restructuring/acquisition of control MUST be submitted with this application. (A.R.S. 4-209.A)

SECTION 1

Check the appropriate boxes

Agent Change Complete Sections 1,2,3,4,5 & 7
Acquisition of Control Complete Sections 1,2, 3 & 7
Restructure Complete Sections 1,2,3,6 & 7

SECTION 2

(COMPLETE THIS SECTION FOR AGENT CHANGE, ACQUISITION OF CONTROL OR RESTRUCTURE)

1. Name: Bates Daniel Moore 06100014
2. Owner Name: Agro Land & Cattle Co Inc B1003051 Corp File #:
3. Business Name: El Corral Prime Rib House B1003050 Email:
4. Business Location Address:
5. Is the Business located within the incorporated limits of the above City or Town?
6. Does the Business location address have a street address for a City or Town but is actually in the boundaries of another City, Town or Tribal Reservation?
7. Mailing Address:
8. Business Phone: Daytime Contact Phone
9. Does this transaction involve the sale of any portion of the percentage of ownership or corporate stock?
10. Has there been any change of Controlling Persons?

SECTION 3

(COMPLETE THIS SECTION FOR AGENT CHANGE, ACQUISITION OF CONTROL OR RESTRUCTURE)

Each new person listed in section III must submit a questionnaire (form LIC0101) and a Department approved fingerprint card which may be obtained at the Department of Liquor. A Controlling Person already disclosed to the Department is not required to submit a questionnaire.

Table with 9 columns: New, Last, First, Middle, Title, Address, City, State, Zip. Contains 4 empty rows for listing Controlling Persons.

(ATTACH ADDITIONAL SHEET(S) IF NECESSARY)

Table with 9 columns: New, Last, First, Middle, % Owned, Address, City, State, Zip. Contains 4 empty rows for listing stockholders.

(ATTACH ADDITIONAL SHEET(S) IF NECESSARY)

If the ownership is owned by another entity, ATTACH AN OWNERSHIP FLOWCHART SHOWING THE OFFICERS, MEMBERS, CONTROLLING PERSON AND 10% OR MORE OWNERS FOR THE ENTITIES. Attach additional sheets as necessary in order to disclose all persons.



16 15 Liq. Dept PM1238

State of Arizona
Department of Liquor Licenses and Control
800 W. Washington 5th Floor
Phoenix, AZ 85007
(602) 542-5141

DLLC USE ONLY

Date Processed:
CSR:
60th Day:

17 11 14 Liq. Dept PM1238

APPLICATION FOR AGENT CHANGE - ACQUISITION OF CONTROL - RESTRUCTURE

NOTE: 1) The fee for an agent change MUST be submitted with this application: \$100.00 for the first application and \$50.00 for each additional application, not to exceed \$1,000.00. (A.R.S. 4-209.H) NOTE 2) the \$100.00 fee for restructure/acquisition of control MUST be submitted with this application. (A.R.S. 4-209.A)

SECTION 1

Check the appropriate boxes

Agent Change Complete Sections 1,2,3,4,5 & 7
Acquisition of Control Complete Sections 1,2, 3 & 7
Restructure Complete Sections 1,2,3,6 & 7

SECTION 2

(COMPLETE THIS SECTION FOR AGENT CHANGE, ACQUISITION OF CONTROL OR RESTRUCTURE)

- 1. Name: BATES DANIEL MOORE 110623118 06100014
2. Owner Name: DANIEL MOORE BATES Corp File #: 0058755-5
3. Business Name: AGRO LAND & CATTLE CO INC/ EL CORRAL PRIME RIB HOUSE Email: CASEY@TRAILDUSTTOWN.COM
4. Business Location Address: 2201 E RIVER RD TULSON PIMA 85718
5. Is the Business located within the incorporated limits of the above City or Town? Yes No
6. Does the Business location address have a street address for a City or Town but is actually in the boundaries of another City, Town or Tribal Reservation? Yes No
7. Mailing Address: 6541 E TANQUE VERDE RD SUITE 22 TULSON AZ 85715
8. Business Phone: (520) 296-4551 Daytime Contact Phone (520) 296-4551
9. Does this transaction involve the sale of any portion of the percentage of ownership or corporate stock? Yes No
10. Has there been any change of Controlling Persons? Yes No

SECTION 3

(COMPLETE THIS SECTION FOR AGENT CHANGE, ACQUISITION OF CONTROL OR RESTRUCTURE)

Each new person listed in section III must submit a questionnaire (form LIC0101) and a Department-approved fingerprint card which may be obtained at the Department of Liquor. A Controlling Person already disclosed to the Department is not required to submit a questionnaire.

- 1. List all Controlling Persons to be disclosed, current and new.

Table with columns: New, Last, First, Middle, Title, Address, City, State, Zip. Rows include BATES DANIEL MOORE CHAIRMAN, WILLS CASEY EDWARD TREASURER, WILLS JESSICA BATES SECRETARY.

(ATTACH ADDITIONAL SHEET(S) IF NECESSARY)

- 2. List stockholders, percentage owners and/or Controlling Members owning 10% or more

Table with columns: New, Last, First, Middle, % Owned, Address, City, State, Zip. Rows include BATES DANIEL MOORE 60%, DANIEL MOORE BATES GST TRUST 40%.

(ATTACH ADDITIONAL SHEET(S) IF NECESSARY)

If the ownership is owned by another entity, ATTACH AN OWNERSHIP FLOWCHART SHOWING THE OFFICERS, MEMBERS, CONTROLLING PERSON AND 10% OR MORE OWNERS FOR THE ENTITIES. Attach additional sheets as necessary in order to disclose all persons.

SECTION 4

(COMPLETE THIS SECTION FOR AGENT CHANGE)

1. As an Agent, will you be physically present and operating the licensed premise? [] Yes [] No
If you answered YES, you must provide a copy of your Basic and Management Training Certificate obtained from a Department approved Liquor Law training provider BEFORE YOUR APPLICATION FOR AGENT ACQUISITION OF CONTROL OR RESTRUCTURE CAN BE SUBMITTED. If you answered NO, go to question 2.

2. Is there a current Manager at this license premises disclosed to the Department with the current Basic and Management Training Certificate? [] Yes [] No

If yes, Name of current Manager: Last First Middle

Basic Training [] Yes [] No

Management Training [] Yes [] No

If "NO" for 1 and 2, a Manager with a current Basic and Management Training Certificate obtained from a Department approved Liquor Law training provider must be submitted within 30 days after filing the application for Agent Change, Acquisition of Control or Restructure.

SECTION 5

(COMPLETE THIS SECTION FOR AGENT CHANGE)

To be completed by the INDIVIDUAL OR EXISTING AGENT OR CORPORATE OFFICER OR L.L.C. CONTROLLING MEMBER:

1. License # _____

2. Current Agent Name: Last First Middle (Exactly as it appears on license)

I, (Print full name) _____ hereby consent to the appointment of Agent for this license. I agree to immediately assign a new Agent in the event that I am unable to discharge the duties of Agent for this license. I have not been convicted of a felony in the last five (5) years.

X _____ (Controlling Person/Existing Agent)

State of _____ County of _____ The foregoing instrument was acknowledged before me this

My commission expires on: _____

Day of _____ Month _____ Year

Signature of NOTARY PUBLIC

SECTION 6

(COMPLETE THIS SECTION FOR RESTRUCTURE)

Is there more than one licensed premises involved? [] YES [] NO

If YES, SEPARATE APPLICATIONS must be filed and fees paid for each license/location.

Type of current ownership:

Type of new ownership:

- [] J.T.W.R.O.S.
[] INDIVIDUAL
[] PARTNERSHIP
[] CORPORATION
[] LIMITED LIABILITY CO.
[] MANAGEMENT CO.
[] TRIBE
[] TRUST
[] OTHER (Explain) _____

- [] J.T.W.R.O.S.
[] INDIVIDUAL
[] PARTNERSHIP
[] CORPORATION
[] LIMITED LIABILITY CO.
[] MANAGEMENT CO.
[] TRIBE
[] TRUST
[] OTHER (Explain) _____

SECTION 7 (COMPLETE THIS SECTION FOR AGENT CHANGE, ACQUISITION OF CONTROL OR RESTRUCTURE)

To be completed by Controlling Person or existing Agent (if no agent changes) OR NEW Agent if applying for Agent change as listed in Section 2 Question 1.

I, (Print full name) _____ hereby declare that I am the APPLICANT filing this application. I have read the application and the contents and all statements are true, correct and complete.

X _____ (Controlling Person/Existing Agent)

State of Arizona County of Pima The foregoing instrument was acknowledged before me this

My commission expires on: Aug 4, 2019

22 of November, 2016 Day of Month Year

Signature of NOTARY PUBLIC

