

### View Case Status

The information below summarizes the permit/case you selected.

Case Number	Case Type	Status
VIO2004-14871	No Permit	<a href="#">Closed</a>
Project Name:	1028 ESTERO BLVD FORT MYERS BEACH 33931	Strap #: <a href="#">244623W3000170000</a>
Address:	Constructed a deck without a permit	Finalled: 3/7/2005
Description:	Received: 9/3/2004	
Important Dates:		

People	Name	Address
Role	STEERR-MILL INC	P O BOX 4026 FT MYERS BCH FL 33932
Owner		

Activities	Requested	Scheduled	Completed	Disposition	County Staff
Type	9/3/2004		9/3/2004	DONE	
Complaint Received	9/3/2004	9/9/2004	9/3/2004	DONE	David Paschall
Insp - Initial Inspection	Comments: Notice sent.				
Case Closed	9/3/2004		9/28/2004	DONE	
Insp - NOV Re-Inspection	9/28/2004	9/28/2004	9/28/2004	DONE	David Paschall
Case Closed	Comments: Permit issued 9/23/04.				
	3/7/2005		3/7/2005	DONE	

Fees - If your case is in 'Lien Filed' status, additional interest fees apply; please call Code Enforcement at (239) 533-8895 prior to making a payment. Fee Amount Fee Remaining

No fees attached to this case

If you are unable to open a 'Certificate of Occupancy or an Elevation Certificate', please send an email to [Jean.GeoFF.Rinehart](mailto:Jean.GeoFF.Rinehart@leegov.com). If you are unable to open any other type of document, please send an email to [Jean.GeoFF.Rinehart](mailto:Jean.GeoFF.Rinehart@leegov.com). Please include the case number and the name of the document you are looking to receive. For General Permitting information please call 239-533-8329 or email [eConnect@leegov.com](mailto:eConnect@leegov.com).

[Back to Search](#) [Top of Page](#)



Version: 3.5.3.20051221.03

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834385



TUTTLE LAW FIRM PUBLISHERS, INC.

# Ohio Indenture

Thereor must herein, the term "party" shall include the heirs, personal representatives, executors and/or assigns of the respective parties hereto. The use of the plural shall include all parties, and, vice versa, the term "heir" shall include all the heirs herein described if more than one.

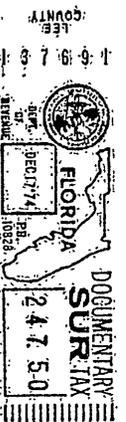
1066 r1639

1066 r1639  
2/17/74

Made this 14th day of November A. D. 19 74  
between STANFORD S. DAW and BETTY W. DAW, husband and wife,  
of the County of Madison in the State of Ohio  
party of the first part, and Myra King Lee, a Florida corporation,  
whose address is: 1028 Estero Boulevard, Fort Myers Beach  
of the County of Lee in the State of Florida 33931  
party of the second part,

Witnesseth that the said party of the first part, for and in consideration of the sum of Ten Dollars and other valuable considerations ~~belonging~~ to him in hand, paid by the said party of the second part, the receipt whereof is hereby acknowledged, has granted, bargained and sold to the said party of the second part his heirs and assigns forever, the following described land, situate lying and being in the County of Lee State of Florida, to wit:

AS DESCRIBED ON ATTACHED EXHIBIT "A"



SUBJECT TO easements, restrictions and reservations of record and taxes for the year 1974.

THIS INSTRUMENT PREPARED BY  
**WILLIAM L. STEWART**  
STEWART, STEWART & JACKSON  
POST OFFICE BOX 806, FORT MYERS, FLORIDA

And the said party of the first part does hereby fully warrant the title to said land, and will defend the same against the lawful claims of all persons whomsoever.

In witness whereof, the said party of the first part has hereunto set his hand and seal the day and year first above written.

Signed, Sealed and Delivered in our presence:  
*Stanford S. Daw*  
*Betty W. Daw*

Stanford S. Daw  
Betty W. Daw

State of Madison OHIO

County of Madison

I, Harvey Dettig Notary Public, that on this day personally appeared before me, an officer duly authorized to administer oaths and take acknowledgments, STANFORD S. DAW and BETTY W. DAW, husband and wife,

to me well known and known to me to be the individuals described in and who acknowledged the foregoing deed, and they executed the same freely and voluntarily for the purposes therein expressed. Witness my hand and official seal at Zanesville, Ohio this 21st day of November, A. D. 1974.

My Commission Expires 12-9-76

*Betty Lee C. Lapp*  
Notary Public

RECORD VERIFIED - SAL CERACI CLERK  
BY H. FERNSTROM D.C.

GULF ABSTRACT & TITLE, INC.

No. 5059

OFF. 1066 14918

SCHEDULE "A"

From the Southwest corner of Block E, CRESCENT PARK ADDITION, as per the plat thereof recorded in Plat Book 4, at page 46, Public Records of Lee County, Florida, on the East line of Section 24, Township 46 South of Range 23 East, run South along said line 53.24 feet to the South line of County Road right-of-way 50 feet wide; thence run Northwesterly at an included angle of 69° 54' with said Section line along the South line of said right-of-way 632.63 feet to the point of beginning of the land herein described.

From said point of beginning continue Northwesterly along South line of said right-of-way 80 feet; thence Southwesterly at included angle of 90° to the waters of the Gulf of Mexico; thence run Southwesterly along said waters to a point on a line perpendicular to the first mentioned County road, through point of beginning; thence run Northwesterly along said perpendicular line to the point of beginning.

STEWART, STEWART & JACKSON

2

*W. J. K...*  
 RECORDED IN OFFICE  
 RECORDS  
 COUNTY, FLORIDA  
 RECORD VERIFIED  
 Dec 17 4 16 PM '74  
 CLERK OF CIRCUIT COURT



UNIFORM COMMERCIAL CODE - FINANCING STATEMENT - FORM UCC-1

4

1. This financing statement is prepared in a long form for filing in the office of the State Secretary of the State of Florida. It is subject to the provisions of the Uniform Commercial Code, Florida Statutes, Chapter 689, and the provisions of the Florida Financing Statement Act, Florida Statutes, Chapter 689.01, which are hereby incorporated by reference into this financing statement. It is subject to the provisions of the Florida Financing Statement Act, Florida Statutes, Chapter 689.01, which are hereby incorporated by reference into this financing statement. It is subject to the provisions of the Florida Financing Statement Act, Florida Statutes, Chapter 689.01, which are hereby incorporated by reference into this financing statement.

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RECORDED IN OFFICIAL RECORDS  
LEE COUNTY, FLORIDA  
FEB 28 3 31 PM '72  
CLERK OF CIRCUIT COURT  
D. J. FARABEE  
TALLAHASSEE, FLORIDA

1. Debtor: Stanford S. Daw & Betty W. Daw, husband and wife, 1028 Estero Blvd., Ft. Myers Beach, Fla. 33931.  
2. Secured Party: Robert G. Holt & Patrick J. Fearick, husband and wife, Post Office Box 2807, Ft. Myers Beach, Fla. 33931.  
3. Description of Collateral: Restaurant, lounge, furniture, fixtures & equipment located in the Spinmaker Lounge and Restaurant at 1028 Estero Blvd., Ft. Myers Beach, Florida, Lee County.

By: *Stanford S. Daw* (Signature)  
By: *Patrick J. Fearick* (Signature)

(1) Filing Office: Capital  
STANDARD FORM - FORM UCC-1  
Approved by: Tom Mason, Secretary of State of Florida

TOP OF THE MAST

#

46-00123-4C0R

Business Name STEER MILL, INC.

Series License Number

Owner Name

1028 ESTERO Blvd, FT. MYERS BEACH, LEE, FLA. 33931  
Location Address City County

SEE REVERSE SIDE

"I hereby swear or affirm that the above and foregoing or attached sketch or blue-print is a true and correct representation of the licensed premises, and agree that the place of business so licensed may be inspected and searched during business hours or any time business is being conducted on the premises without a search warrant by officers of the Division of Alcoholic Beverages and Tobacco, the Sheriff, his deputies, and police officers for purposes of determining compliance with the beverage laws.

"I further agree that in the event said premises are altered or any additions are made thereto, such alterations or added portions to the said licensed premises may be inspected in the same manner and by the same officers as is agreed to in the case of the original premises that may be licensed.

"I further understand that the above and foregoing sketch will become, and hereby agree that it is, a part of my application for a license."

STATE OF FLORIDA

Authorized signature

COUNTY OF LEE

Sworn to and subscribed to before me this 20th day of February, 19 87

Brenda Stearns  
NOTARY PUBLIC

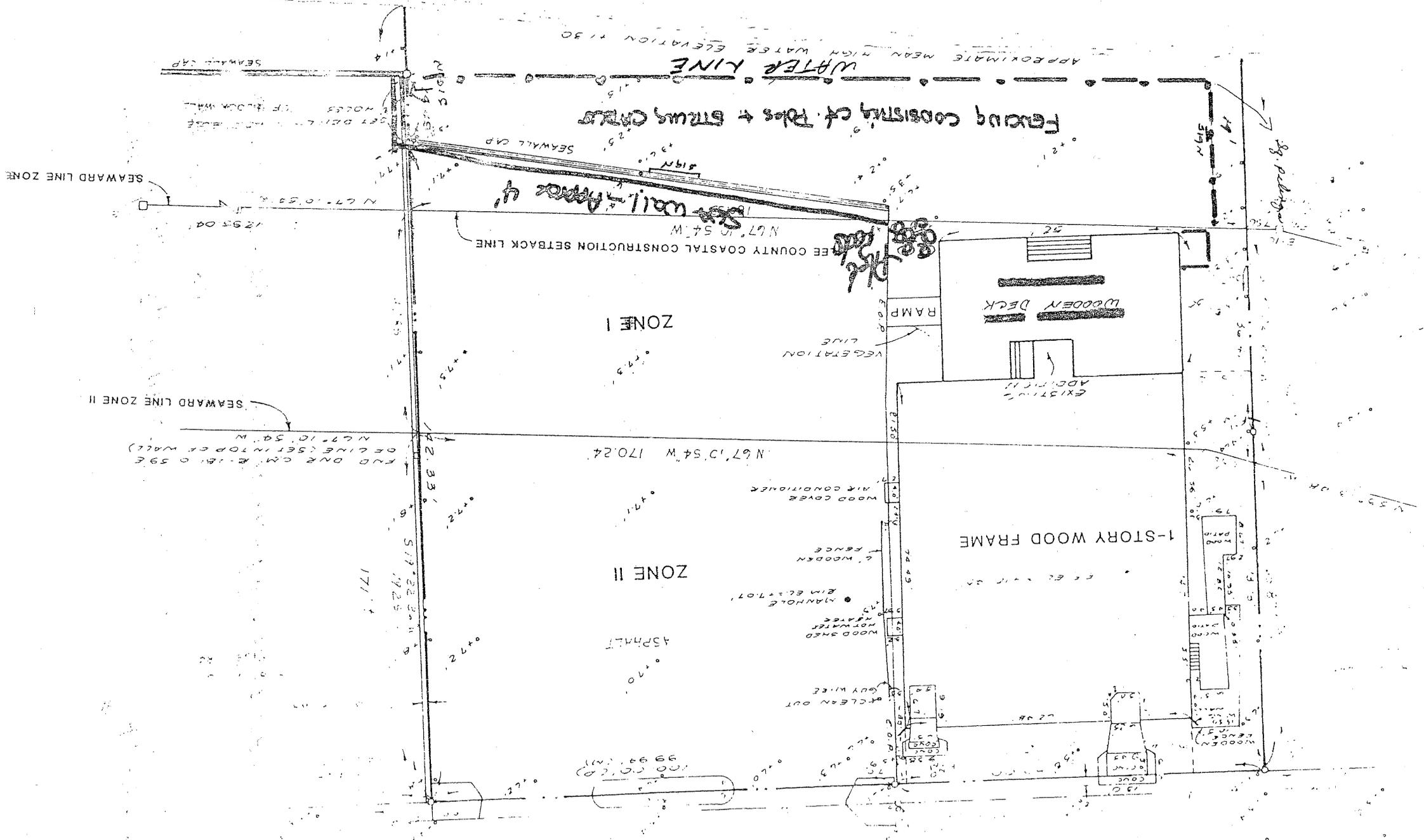
Application for Processing

FEB 20 1987

My Commission Expires

Notary Public, State of Florida  
My Commission Expires June 7, 1987  
Bonded By Ohio Casualty Insurance Co.

Div. Alc. Bev. & Tobacco  
Fort Myers, Florida



ESTERO BOULEVARD 50' R/W

Top of Post

WATER LINE

Fencing consists of Posts & Straps ORBS

SEAWALL CAP

ZONE I

ZONE II

1-STORY WOOD FRAME

WOODEN DECK

RAMP

VEGETATION LINE

WOOD COVER  
AIR CONDITIONER

WOODEN FENCE

MANHOLE

WOOD SHED

CLEAN OUT

GUY WIRE

WOODEN FENCE

WOODEN WALKWAY

WOODEN STAIRS

WOODEN PATIO

WOODEN WALKWAY

WOODEN STAIRS

WOODEN FENCE

WOODEN WALKWAY

WOODEN STAIRS

Business Name: TOP OF THE MAST

Applicant: STEER MILL, INC.

Location Address: 1028 ESTERO BLVD. FT. MYERS, FL LEE COUNTY

Street Number 46-00123 Municipality \_\_\_\_\_ County \_\_\_\_\_

License Number: \_\_\_\_\_ SERIES: 4-COP

Date RECEIVED by District: 2/20/87

Date ASSIGNED to Investigator: \_\_\_\_\_

APPLICANT INFORMATION:

APPLICANTS NAME	CURRENT LICENSE	DATE FINGERPRINTED	DISQUALIFYING RECORD
Strauss, Steven	O/P 46-123		

Date COMPLETED by Investigator: 2/25/87

RECOMMENDATION:  APPROVAL  DISAPPROVAL

INVESTIGATOR'S SIGNATURE: R. B. Breyer

COMMENTS:

Note - Only as per 1028 letter filed to disapprove  
Sent 3/6/87

Date REVIEWED by Supervisor: \_\_\_\_\_

RECOMMENDATION:  APPROVAL  DISAPPROVAL

SUPERVISOR'S SIGNATURE: \_\_\_\_\_

COMMENTS:

CENTRAL OFFICE  
(DATE RECEIVED)

DATE INDEXED: \_\_\_\_\_

DATE COMPLETED: \_\_\_\_\_

FINAL DECISION:  Approval  Disapproval

SIGNATURE: \_\_\_\_\_

DATE MICROFILMED: \_\_\_\_\_

COMMENTS: \_\_\_\_\_

DEPARTMENT OF BUSINESS REGULATION  
DIVISION OF ALCOHOLIC BEVERAGES AND TOBACCO  
LICENSE APPLICATION ANALYSIS

	YES	NO
1. Is there any indication that applicant(s) or any disclosed interest is under 19 years of age? . . . . .		<input checked="" type="checkbox"/>
2. Is there any indication that applicant(s) or any disclosed interest may be impaired pursuant to 561.14(4) or (5), 561.15, 561.22, 561.24, 561.25, or 210.15, Florida Statutes? . . . . .		<input checked="" type="checkbox"/>
3. Is there a need to send out of state letters based on the applicant holding or having held an interest in an alcoholic beverage license or cigarette permit in another state? . . . . .		<input checked="" type="checkbox"/>
4. Is there any indication that applicant(s) or any disclosed interest has any pending criminal case, the conviction of which would be disqualifying? . . . . .		<input checked="" type="checkbox"/>
5. Did the applicant(s) or any disclosed interest declare an arrest record on the personal questionnaire which could be disqualifying? . . . . .		<input checked="" type="checkbox"/>
6. Is there any indication that applicant(s) or any disclosed interest is not legally in the United States? . . . . .		<input checked="" type="checkbox"/>
7. Is there any indication that current licensee is no longer qualified to hold the alcoholic beverage license? . . . . .		<input checked="" type="checkbox"/>
8. Is there any indication of error(s), omission(s), perjury, misrepresentation(s), false statement(s), conflicting information, or lack of requested information as sworn to on the application or on any of the supporting documents? . . . . .		<input checked="" type="checkbox"/>
9. Is there any indication that the financial documentation does not support the information on the application? . . . . .		<input checked="" type="checkbox"/>
10. Is there any indication of anyone not disclosed on the application having an interest in the business? . . . . .	<input checked="" type="checkbox"/>	
11. Does the type of license applied for require a site inspection? . . . . .	<input checked="" type="checkbox"/>	
12. Is there any indication the premises or location does not qualify for this type of alcoholic beverage license? . . . . .	<input checked="" type="checkbox"/>	
13. Do the records at the district office indicate that a license has been revoked at the proposed location? . . . . .		<input checked="" type="checkbox"/>
14. Is license on delinquent list? . . . . .		<input checked="" type="checkbox"/>
15. Is there any administrative action by the division or any pending litigation which should delay final action? . . . . .		<input checked="" type="checkbox"/>
16. Is there any indication the Division needs to correspond with the applicant for further information within 30 days from the receipt of this application pursuant to Chapter 120, the Administrative Procedure Act? . . . . .	<input checked="" type="checkbox"/>	
17. Is this application for the change of a quota license that has been issued within the last 3 years based on the drawing system? . . . . .		<input checked="" type="checkbox"/>

If any question here, on the personal questionnaire or the application (with the exception of Section II, 4, E, through G.) is answered YES, indicate the question number and give a brief narrative as to the final findings. (Attach extra sheets if necessary.)

#12 No Revenue on license created Separately  
 report goes down. over in apud and  
 not closed in air to divisions and control  
 10 Day letter. photo to Damage Sect 5/16/87

R. B. [Signature]  
 Authorized Signature

DBR 750L  
Rev. 7-84

AMENDED SKETCH

TOP OF THE MAST

#

Business Name

STEHR MILL, INC.

Series

License Number

46-00133-400P

Owner Name

1088 ESTERO BLVD, FT. MYERS BEACH, LEE, FLA. 33931  
Location Address City County

SEE REVERSE SIDE

"I hereby swear or affirm that the above and foregoing or attached sketch or blueprint is a true and correct representation of the licensed premises, and agree that the place of business so licensed may be inspected and searched during business hours or any time business is being conducted on the premises without a search warrant by officers of the Division of Alcoholic Beverages and Tobacco, the Sheriff, his deputies, and police officers for purposes of determining compliance with the beverage laws.

"I further agree that in the event said premises are altered or any additions are made thereto, such alterations or added portions to the said licensed premises may be inspected in the same manner and by the same officers as is agreed to in the case of the original premises that may be licensed.

"I further understand that the above and foregoing sketch will become, and hereby agree that it is, a part of my application for a license."

STATE OF FLORIDA

COUNTY OF LEE

Authorized Signature

Sworn to and subscribed to before me this 20th DAY OF February, 1987

Prudence Strong, NOTARY PUBLIC

Application for Processing

FEB 20 1987

My Commission Expires My Commission Expires June 7, 1987  
Notary Public, State of Florida  
Bonded by Gile Casualty Insurance Co.

Div. Alc. Bev. & Tobacco  
Fort Myers, Florida



DBF 750L  
Rev. 7-84

AMENDED SKETCH

Top O' Mast Restaurant & Lounge

4 COP

46 00123

Business Name

Series

License Number

Steer Mill, Incorporated

Owner Name

1028 Estero Boulevard

Fort Myers Beach

Location Address

City

Lee  
County

SEE ATTACHED

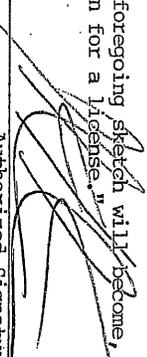
"I hereby swear or affirm that the above and foregoing or attached sketch or blue-print is a true and correct representation of the licensed premises, and agree that the place of business so licensed may be inspected and searched during business hours or any time business is being conducted on the premises without a search warrant by officers of the Division of Alcoholic Beverages and Tobacco, the Sheriff, his deputies, and police officers for purposes of determining compliance with the beverage laws.

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"I further understand that the above and foregoing sketch will become, and hereby agree that it is, a part of my application for a license."

STATE OF FLORIDA

COUNTY OF Lee

  
Authorized Signature  
Steven Strauss, President

Sworn to and subscribed to before me this 7th day of January 1986

DEPT. OF BUSINESS REGULATIONS

NOTARY PUBLIC

JAN 08 1986

My Commission Expires

NOTARY PUBLIC STATE OF FLORIDA  
MY COMMISSION EXPIRES OCT 19 1986  
BONDED THRU GENERAL INSURANCE LHM

DIVISION OF BEVERAGE  
FORT MYERS, FLORIDA



DEPARTMENT OF BUSINESS REGULATION  
DIVISION OF ALCOHOLIC BEVERAGES AND TOBACCO

LICENSE APPLICATION INVESTIGATION

1. DIST. # 7  
2. COUNTY # 46

3. NAME OF APPLICANT Steer Mill Inc.
4. BUSINESS NAME Top of the Mast
5. BUSINESS ADDRESS 1028 Estero Blvd., Ft. Myers Beach, Lee County
6. DATE RECEIVED 12/8/83 TIME RECEIVED \_\_\_\_\_
7. INVESTIGATOR ASSIGNED R. B. Baggett, B.O. I
8. DATE ASSIGNED 12/8/83 BY T. I. Stout, Lt.
9. LICENSE INFORMATION, IF APPLICABLE Wallace G. Feather
- A. LICENSE # 46-123 B. SERIES 4-COP
10. TYPE OF APPLICATION 701 11. TYPE OF LIC. INV. 04
12. MILES TRAVELED 10 13. MAN HOURS 1.5 14. DATE COMPLETED 12/19/83

15. CURRENT LICENSE INFORMATION: AUDIT # 15392 DATE OF VALIDATION \_\_\_\_\_  
LICENSE YEAR 83/84 DOING BUSINESS AS: Galaxy Lng. & Half Moon Liquors.
16. IS LOCATION INSIDE LIMITS OF INCORPORATED MUNICIPALITY no IF YES GIVE NAME OF CITY OR TOWN. n/a

17. HAS A LICENSE BEEN REVOKED AT THIS LOCATION WITHIN THE PAST TWO YEARS? no  
IF YES GIVE PARTICULARS n/a
18. BACKGROUND: \_\_\_\_\_

APPLICANTS/OFFICERS	DATE	DATE	TT	NO	RECORD	RECORD	DISQUALIFYING RECORD
	PRINTED	RETURNED	NO	RECORD	RECORD		
Steven Strauss	O/P	46-146,SRX,4-COP					

IF CURRENT LICENSE/GIVE: LICENSE # 46-146,SRX BUSINESS NAME: Top of the Mast  
LICENSE # n/a BUSINESS NAME: n/a

19. ADMINISTRATIVE:
- IS BEVERAGE LICENSE ON CASH LIST? NO  YES \_\_\_\_\_ DATE AND # OF LIST CHECKED 12/7/83
- IS BEVERAGE LICENSE ON NO SALE LIST? NO  YES \_\_\_\_\_ DATE AND # OF LIST CHECKED 3326
- IS THERE PENDING ADMINISTRATIVE CHARGES? NO  YES \_\_\_\_\_ CASE # n/a

Date: January 25, 1984

APPLICATION TRANSMITTAL

District No. 7

Date Received in Central Office

TRANSFER  
(Type of Application)

4-GOP 46-123  
(Series) (Number)

Top of the Mast  
(Business Name)

Steer Mill Inc.  
(Applicant)  
1028 Estero Blvd.  
(Location)

- 1 Approval
- 2 Disapproval

Ft. Myers Beach Lee  
(City) (County)

ENCLOSED PLEASE FIND PROCESSED LICENSE APPLICATION FOR YOUR CONSIDERATION,  
ACCOMPANIED BY INFORMATION CHECKED BELOW:

LICENSE APPLICATION INVESTIGATION XX HEALTH APPROVAL XX ARTICLES OF INC. \_\_\_\_\_  
 PERSONAL QUESTIONNAIRE \_\_\_\_\_ ZONING APPROVAL XX CLUB BY-LAWS \_\_\_\_\_  
 FINGERPRINT 3 x 5 CARD \_\_\_\_\_ RIGHT OF OCCUPANCY XX SPECIAL LICENSE AFFIDAVITS \_\_\_\_\_  
 W/ANY RECORD & TWO MINUTES \_\_\_\_\_  
 DBR 735-L'S \_\_\_\_\_ CERT. OF INC. XX OTHER DOCUMENTS XX  
 SALES TAX CERT. XX APPLICATION FORM XX

DISTRICT SUPERVISOR RECOMMENDATION  
 SIGNATURE \_\_\_\_\_

1  
2

COMMENTS: 1-27-84

RECORDS

LIST NAMES OF INDIVIDUALS TO BE INDEXED  
Steven Strauss, Pres./Sec./Treas.

LICENSING



DEPARTMENT OF BUSINESS REGULATION  
DIVISION OF ALCOHOLIC BEVERAGES AND TOBACCO

TO: Department of Revenue, H. Meyers Area Office, 11-17-83

FROM: Trade Name: TOP OF THE MOST

Owner: STEER MILL TIND

Address: 1028 Esteno Blvd.

H. Meyers Bch. FL 33931

SUBJECT: Certification of Registration No. 45-00-001547-08/5

Please review the records of your department for the account referenced. It is my intent to furnish this information to the Department of Business Regulations, Division of Alcoholic Beverages and Tobacco.

Signature of person making request:



APPROVED BY  
DEPARTMENT OF REVENUE

\*\*\* For Department of Revenue Use Only \*\*\*

Approved:

Reviewed By: 

Title: R. T. A.

Date: 11-17-83

Department of Revenue Date Stamp

B. Have any of the above named persons or entities ever held a beverage license? yes

C. Has a license covering the place described in this application or any other place in which any of the above named persons or entities were at the time interested ever been revoked by the Director? no

D. Are any of the persons or business entities now, or have they been in the past, interested in, affiliated or connected with, directly or indirectly, including through stock ownership or otherwise, any corporation, partnership or individual engaged in, directly or indirectly, the manufacturing, rectifying, distilling, distributing, importing, exporting, or selling at retail, any alcoholic beverage in the State of Florida or any other State? yes

If the answer is "Yes" to any of the questions asked give full particulars

464146 4 GOP SRX

IV. SALES TAX

1. Do you acknowledge your statutory responsibility to obtain a proper sales tax account number before operating a business under the license you are hereby seeking? yes Initials: \_\_\_\_\_

V. RIGHT OF OCCUPANCY

1. Does applicant have a legal right of occupancy to the premises sought to be licensed? yes Explain (include the landlords name and address if applicable) \_\_\_\_\_

VI. HEALTH APPROVAL - TO BE COMPLETED BY THE STATE/COUNTY HEALTH AUTHORITIES ONLY:

Inspection of this establishment was made on 10-20-83, and it was found that the sanitary facilities of the establishment \_\_\_\_\_

Comply  
 Do Not Comply

with the minimum requirements under regulations of the Florida State Sanitary Code, as promulgated under Chapter 19366, General Laws of Florida,

John P. Parnell  
Sanitarian-County Health Department

VII. ZONING-APPROVAL

1. Is location within the limits of an incorporated municipality? \_\_\_\_\_

2. This premises is applying for a 4-GOP type license. This would authorize sales of alcoholic beverages as follows: beer, wine, and liquor for con-

3. sumption on the premises with package sales THIS PORTION IS TO BE COMPLETED BY THE LOCAL ZONING AUTHORITIES ONLY:

The above location does comply with local zoning ordinance for the sale of alcoholic beverages as stated above.

The above location does not comply with local zoning ordinance for the sale of alcoholic beverages as stated above.

Signed: James R. Parnell Title: Sanitarian  
City: Sanford County: Lee Date: 10-2-83

VIII. FOR ALL APPLICANTS FOR SPECIAL OR CLUB ALCOHOLIC BEVERAGE LICENSES.

1. As an applicant for a \_\_\_\_\_ license pursuant to \_\_\_\_\_ it is recognized that the following requirements must be met and maintained: \_\_\_\_\_



I, the undersigned individual, or if a corporation for itself, its officers and directors, hereby swear or affirm that I am duly authorized to make the above and foregoing application and, as such I hereby swear or affirm that the above and foregoing or attached sketch or blueprint is substantially a true and correct representation of the premises to be licensed and agree that the place of business, if licensed, may be inspected and searched during business hours or at any time business is being conducted on the premises without a search warrant by Officers of the Division of Alcoholic Beverages and Tobacco, the Sheriff, his Deputies, and Police Officers for purposes of determining compliance with the beverage law.

I further agree that in the event said premises are altered or any additions are made thereto, such alterations or added portions to the said licensed premises may be inspected in the same manner and by the same officers as is agreed to in the case of the original premises that may be licensed.

I swear under oath or affirmation under penalty of perjury as provided for in Florida Statutes 837.06 and 559.791 that the foregoing information is true to the best of my knowledge, and that no other person, persons, firm or corporation, except as indicated herein, has an interest in the alcoholic beverage license for which these statements are made.

I further agree that the above and foregoing sketch will become and is a part of the application for a license.

*STEVEN STRASS*  
*By STEVEN STRASS, PMS.*  
(Applicant)

STATE OF FLORIDA

County of Levy

I hereby certify that before me this 7th day of Dec 1983 personally appeared STEVEN STRASS and after being sworn says that the signature above is his, (NAME OF APPLICANT) that he has read all of the above, that the answers to the questions appearing herein are true and correct.

Witness my hand and seal the day and year first above appearing in the State and County aforesaid.

*[Signature]*  
Notary Public

My Commission Expires My commission expires April 29, 1984  
Bonded thru Lawyers Surety Corp.

XI

AFFIDAVIT OF SELLER

I, Wallace G. Fether, hereby swear or affirm that I am duly authorized to make this affidavit and do hereby consent, on my behalf or on behalf of the seller, to the above transfer, and represent to the Division of Alcoholic Beverages and Tobacco that the license which is being transferred is as shown in the application and that a sale in good faith has been made to the within applicant of the business for which the foregoing transfer of license is sought.

*[Signature]*  
SELLER, OR AUTHORIZED CORPORATION OFFICER

STATE OF FLORIDA

County of Levy

Subscribed and sworn to before me this 7th day of December 1983

*[Signature]*  
Notary Public  
My Commission Expires My commission expires April 29, 1984  
Bonded thru Lawyers Surety Corp.

FOR THE DIVISION OF ALCOHOLIC BEVERAGES AND TOBACCO USE ONLY

This application is hereby \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 19 \_\_\_\_\_

\_\_\_\_\_  
DIRECTOR

LICENSE PREMISE INSPECTION

1. Name of Licensee <b>Feather Woods</b>	2. Current License No. <b>46-123</b>	3. Type <b>Ycop</b>
4. Trade Name <b>Wolsey 5th Hall Moon Shig.</b>	5. Business Address Street <b>980 Pennella Rd</b> City <b>N. Ft. Myers</b>	7. Name & Title of Person Interviewed <b>Wolace Feather</b>
6. Mailing Address Street <b>970 Pennella Rd</b> City & State <b>N. Ft. Myers Fla.</b> Zip	9. Bookkeeper - Accountant <b>BW BS Ft Myers</b>	10. Location of Records <b>Provision</b>
8. Responsible Persons (Owners, Mgrs, Employees) <b>W. Feather</b>	SECTION A	

11. Location of Other Storage

12. Bank Account Information  
**Cape Coral Bank**

12a. Authorized Signers  
**W. Feather**  
**D. Feather**

**G. Feather**

- SECTION B
- 13. Does business have proper and current Federal Permit?.....  YES  NO  NA
  - 14. Is license posted, current and proper for type of business?.....  YES  NO  NA
  - 15. Information given on license correct and verified?.....  YES  NO  NA
  - 16. Sufficient and adequate records properly maintained?.....  YES  NO  NA
  - 17. Do bartenders meet qualifications?.....  YES  NO  NA
  - 18. Are all employees over 17 years old?.....  YES  NO  NA
  - 19. Are all requirements for type of license met?.....  YES  NO  NA
  - 20. Are alcoholic beverages properly stamped?.....  YES  NO  NA
  - 21. Do draught beer codes on kegs correspond with name on taps?.....  YES  NO  NA
  - 22. Was William Reagent Field Test conducted?.....  YES  NO  NA
  - 23. If S-SR- or SRX, are all requirements fully met?.....  YES  NO  NA
  - 24. If corporation, are current officers fingerprinted & approved?.....  YES  NO  NA
  - 25. Did you observe any type of violation at this place of business?.....  YES  NO  NA
  - 26. Have any alterations been made requiring new sketch?.....  YES  NO  NA
  - 27. Was cigarette inspection conducted?.....  YES  NO  NA
  - 28. Does licensee have off premise storage permit?.....  YES  NO  NA
  - 29. If Yes give location

SECTION C Remarks (Use reverse side if Necessary)

30.  Licensee Complying  File Adm. Charges

Issued Citation  File Crim. Charges

31. I affirm that I have read the above report and received a copy of it.

32. Date and Time of Inspection  
**1-18-77**

Signature of Licensee or Authorized Employee  
*[Signature]*

Signature of Investigator  
**RR West**

\* Explain under Remarks

LICENSE PREMISE INSPECTION

1. Name of Licensee FEATHER, WALLACE G.	2. Current License No. 46-123	3. Type 4-COP
4. Trade Name GALAXY LOUNGE & HALF MOON LIQ.	5. Business Address Street 900 PONDELLA RD. City N. FT. MYERS	
6. Mailing Address Street 990 PONDELLA RD. City & State N. FT. MYERS, FLA Zip 33903	7. Name & Title of Person Interviewed Wallace Feather - Licensee	
8. Responsible Persons (Owners, Mgrs., Employees)	9. Bookkeeper - Accountant John Business Services	
	10. Location of Records on premises	

11. Location of Other Storage

on premises

SECTION A

12. Bank Account Information

Cape Coral Bank  
12a. Authorized signers  
Wallace - Dorothy Gerald  
Feather

SECTION B

- |  |   |                                     |                             |
|--|---|-------------------------------------|-----------------------------|
| 13. Does business have proper and current Federal Permit?.....       | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/>         | NA <input type="checkbox"/> |
| 14. Is license posted, current and proper for type of business?..... | <input checked="" type="checkbox"/>     | <input type="checkbox"/>            | <input type="checkbox"/>    |
| 15. Information given on license correct and verified?.....          | <input checked="" type="checkbox"/>     | <input type="checkbox"/>            | <input type="checkbox"/>    |
| 16. Sufficient and adequate records properly maintained?.....        | <input checked="" type="checkbox"/>     | <input type="checkbox"/>            | <input type="checkbox"/>    |
| 17. Do bartenders meet qualifications?.....                          | <input checked="" type="checkbox"/>     | <input type="checkbox"/>            | <input type="checkbox"/>    |
| 18. Are all employees over 17 years old?.....                        | <input checked="" type="checkbox"/>     | <input type="checkbox"/>            | <input type="checkbox"/>    |
| 19. Are all requirements for type of license met?.....               | <input checked="" type="checkbox"/>     | <input type="checkbox"/>            | <input type="checkbox"/>    |
| 20. Are alcoholic beverages properly stamped?.....                   | <input checked="" type="checkbox"/>     | <input type="checkbox"/>            | <input type="checkbox"/>    |
| 21. Do draught beer codes on kegs correspond with name on taps?..... | <input checked="" type="checkbox"/>     | <input type="checkbox"/>            | <input type="checkbox"/>    |
| 22. Was William Reagent Field Test conducted?.....                   | <input checked="" type="checkbox"/>     | <input type="checkbox"/>            | <input type="checkbox"/>    |
| 23. If S-SR- or SRX, are all requirements fully met?.....            | <input checked="" type="checkbox"/>     | <input type="checkbox"/>            | <input type="checkbox"/>    |
| 24. If corporation, are current officers fingerprinted & approved?.. | <input type="checkbox"/>                | <input checked="" type="checkbox"/> | <input type="checkbox"/>    |
| 25. Did you observe any type of violation at this place of business? | <input type="checkbox"/>                | <input checked="" type="checkbox"/> | <input type="checkbox"/>    |
| 26. Have any alterations been made requiring new sketch?.....        | <input type="checkbox"/>                | <input checked="" type="checkbox"/> | <input type="checkbox"/>    |
| 27. Was cigarette inspection conducted?.....                         | <input checked="" type="checkbox"/>     | <input type="checkbox"/>            | <input type="checkbox"/>    |
| 28. Does licensee have off premise storage permit?.....              | <input checked="" type="checkbox"/>     | <input type="checkbox"/>            | <input type="checkbox"/>    |
| 29. If Yes give location   | <input type="checkbox"/>                | <input checked="" type="checkbox"/> | <input type="checkbox"/>    |

SECTION C Remarks (Use reverse side if Necessary)

NO VIOLATIONS

30.  Licensee Complying       File Adm. Charges  
 Issued Citation       File Crim. Charges

31. I affirm that I have read the above report and received a copy of it.

32. Date and Time of Inspection  
 4-19-76 5:45 PM  
 DEPT. OF BUSINESS REGISTRATION

Signature of Licensee or Authorized Employee  
 [Signature]  
 Signature of Inspector  
 [Signature]  
 DEPT. OF BUSINESS REGISTRATION  
 INVESTIGATOR SEVERANCE  
 FORT MYERS, FLORIDA

\* Explain under Remarks

STATE OF FLORIDA DEPARTMENT OF BUSINESS REGULATION  
DIVISION OF BEVERAGE

CIGARETTE INSPECTION REPORT

Date 4-19-78  
County LEE

1. A. Name of retail location inspected: GALAXY LOUNGE & HALF MOON INN.

B. Address: 900 PONDHILLA RD., N. FT. MYERS, FLA.

C. Manager and/or owner: FEATHER, WALLACE G.

2. Are cigarettes sold?

A. In vending machines

Yes  No

B. Over the counter

Yes  No

3. From whom are the cigarettes purchased? United Wholesale of Navatampa

D. Date of last invoice? 4-3-78

3. Machine 2A is yes:

A. Are meter imprints or tax stamps of at least one (1) package visible in each column of vending machine? Yes

B. Is machine vending any commodity other than cigarettes or matches? NO

C. Name of machine Pawn Method Meter No. 51 123015

Type Cense No. of columns 1

\*D. Is a proper SBD identification sticker affixed to all vending machines at this location? NO

E. Vending machine is serviced by: Wallace R Feather

F. Owner of machine if other than "E" Same

4. A. Are all meter and/or tax stamps inspected, legible and proper? Yes

B. Cigarettes inspected bear Meter Imprint Numbers 43029-41251-40310-46015

Heat Transfer Stamp Numbers Yes

Non-numbered Hand Stamps Yes:  No:

5. Select random full cartons of cigarettes bearing Pitney Bowes meter imprints and give the scallop count, meter number, package number in carton and brand of cigarette package examined.

Pkg. No.	Meter No.	Pkg. No.	Meter No.	Pkg. No.	Meter No.
<u>6</u>	<u>49223</u>	<u>7</u>	<u>41251</u>	<u>2</u>	<u>48215</u>
Brand <u>Kool</u>	Brand <u>Kool</u>	Brand <u>Benson</u>	Brand <u>Benson</u>	Brand <u>Benson</u>	Brand <u>Benson</u>
Pkg. No. <u>11</u>	Meter No. <u>49229</u>	Pkg. No. <u>6</u>	Meter No. <u>41251</u>	Pkg. No. <u>7</u>	Meter No. <u>48213</u>
Brand <u>Kool</u>	Brand <u>Benson</u>	Brand <u>Benson</u>	Brand <u>Benson</u>	Brand <u>Benson</u>	Brand <u>Benson</u>

If violations are found, explain corrective action taken by agent: (cigarettes issued, machines seized, called owner of machine, other) APR 19 1978

BD Put new SBD 1lb sticker on machines.

I affirm that I have read the above report and received a copy of it.

Signature of owner or Manager [Signature]

Signature of Person Making Inspection R. W. Cunningham  
Dist. 877

State of Florida  
Department of Business Regulation  
Division of Alcoholic Beverages & Tobacco

OFFICIAL NOTICE

City: FORT MYERS BEACH County: LEE Date: 062088

To: Licensee: STEER MILL, INC.

D/B/A: TOP OF THE MAST License: Type: ACOP #46-123

You are hereby notified THE DIVISION INTENDS TO

FILE ADMINISTRATIVE CHARGES AGAINST YOUR

LICENSE FOR VIOLATION OF FS 562.06

If these instructions are not complied with by noon on \_\_\_\_\_, 19

DIVISION OF ALCOHOLIC BEVERAGES & TOBACCO

Charges will be filed against you.

Received this Notice

JUNE 20, 1988

Licensee Manager

FT46870658

C. L. IVEY

Director

Issued By: WAYNE GATLEE

Wayne Gatlee

DBR-801-E  
(Rev. 3/85)

State of Florida  
Department of Busin Regulation  
Division of Alcoholic Beverages & Tobacco

**OFFICIAL NOTICE**

City: FORT MYERS BEACH County: LEE Date: 061588

To: Licensee: STEER MILL, INC

D/B/A: TOP OF THE MAST License: Type: ACP #46-123

You are hereby notified YOU MAY SELL ALCOHOLIC BEVERAGES

ONLY ON THE PREMISES AS SHOWN ON THE APPLICATION

FOR YOUR LICENSE. THIS INCLUDES THE BUILDING AND

DECK ONLY. NO SALES FROM PARKING LOT OR BEACH

If these instructions are not complied with by noon on IMMEDIATELY 19

Charges will be filed against you.

Received this Notice

JUNE 15, 1988

Licensee  
Manager  
E. B. Johnson

FT46870658

Issued By: C. L. TVEY  
Director  
W. Myers



STATE OF FLORIDA

DEPARTMENT OF BUSINESS REGULATION

Bob Martinez, Governor

March 30, 1989

Van B. Poole, Secretary

Division of Alcoholic Beverages  
and Tobacco

Mr. William E. Whittlock III  
Donald L. Tucker, P.A.  
P. O. Drawer 38580  
Tallahassee, FL 32315

RECEIVED  
APPROVED FOR PROCESSING

Re: Steer Mill Inc.  
DBA Top of the Mast  
License #46-00123 4-COP

APR 03 1989

Div. Alc. Bev. & Tobacco  
Fort Meigs, Florida

Dear Mr. Whittlock:

This will acknowledge receipt of your recent correspondence concerning the amended sketch application which was recently approved as it relates to the above referenced alcoholic beverage license.

As we understand your correspondence, your client, upon satisfying the Division of Alcoholic Beverages and Tobacco, was issued a Notice of Violation - Cease and Desist in that the Department of Natural Resources found that your client was in violation of the Coastal Construction Control Line. Pursuant to your communicating with your client regarding the situation, he has agreed to implement the following action:

1. Immediate removal of buried post and rope used to delineate his premises;
2. Utilization of movable post with attached signage indicating the premises of Top-O-Mast without any connecting rope, chain, etc.
3. The posts will be employed only during the hours of operation;
4. One buried corner post to remain on the southwest boundary, in order that the movable posts can be properly aligned each day."

The Division of Alcoholic Beverages and Tobacco understands the "catch 22" that you indicate has been created by your client's willingness to comply with the alcoholic beverage laws. The Division is willing to allow the premises to operate as indicated above. The licensed premises will continue to be as defined in the amended sketch which was just recently approved by the Division irrespective of the fact that some of the buried posts and rope must be removed and replaced with posts which can be moved during the hours that the establishment is closed. The posts are to be utilized each day during the operating hours and are to be placed on a line running northerly from the existing post (as per the sketch) on the southwest boundary of the licensee's property. This will ensure that the Gulf front boundary of the premises remains the same as that described on the sketch of the licensed premises. However, we would like a copy of the Notice of Violation - Cease and Desist which was issued by the Department of Natural Resources in the matter for our file.

Mr. Whitlock  
March 30, 1989  
Page 2

We appreciate your cooperation and the willingness of your client to cooperate in this matter. If we can be of any further assistance, please feel free to contact this office.

Sincerely,

C. L. IVEY, DIRECTOR



By: L. B. Schoenfeld, Chief  
Bureau of Licensing and Records

CLI/Sek  
cc: District #7 Ft. Myers  
COR

DONALD L. TUCKER, P.A.

DONALD L. TUCKER  
WILLIAM E. WHITLOCK, III

POST OFFICE DRAWER 38580  
TALLAHASSEE, FLORIDA 32315

116 EAST THIRD AVENUE  
TELEPHONE 504 221 5171

February 9, 1989

Department of Business Regulation  
Division of Alcoholic Beverages & Tobacco  
Bureau of Licensing & Records  
Attention: L. B. Schoenfeld, Chief  
Johns Building  
725 South Bronough Street  
Tallahassee, Florida 32399-1000

**RECEIVED**  
MAR 03 1989

Bureau of Licensing & Records

Dear Barry,

Pursuant to our telephone conversation of Wednesday, February 8, 1989 regarding the aforesaid licensee and the necessity for the said licensee to change the type of structure which defines the west boundary of his premises in order to avoid violating the Coastal Construction Control Line.

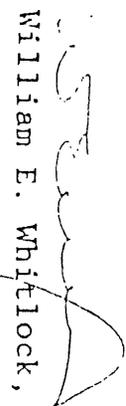
The Division of Shores and Beaches has requested that my client remove the buried posts which are connected by rope and replace them with posts which can be moved during the hours that the establishment is closed for business. The posts with be utilized each day during the operating hours and will be placed on a line running northerly from the existing post (as per your sketch) on the South-west boundary of the licensee's property. This will assure that the gulf front boundary of the premises remains essentially the same as that described on your sketch of said premises.

The reason for this change is because of the limitation of permanent construction within the Coastal Construction Control Line and the Department of Natural Resources construes the present structure to be of a permanent nature.

I want to assure you that my client wishes to cooperate in every way with the Division of Alcoholic Beverage and Tobacco and fully intends to maintain the dimensions of his premises as indicated on the sketch.

If this new arrangement for defining the premises of the aforesaid licensees is not satisfactory with you and/or you wish to employ a different means please advise me immediately as it is our desire to resolve this problem as expeditiously as possible.

Sincerely,

  
William E. Whitlock, III

cc: John J. Harris  
Lt. T. L. Ewing

February 9, 1989

State of Florida  
Department of Natural Resources  
Kirby B. Green, III, Division Director  
Division of Beaches and Shores  
3900 Commonwealth Boulevard  
Tallahassee, Florida 32399

RE: Notice of Violation - Cease and Desist

Top-O-Mast Restaurant  
1028 Estero Boulevard  
Ft. Myers, Florida 33931

Dear Mr. Green:

Pursuant to our meeting of Tuesday, February 7, 1989 in which we discussed the above referenced Notice and the alternatives available to my client in order that he maintain compliance with the requirements of the Division of Alcoholic Beverages and Tobacco in defining his premises, without being in violation of the Coastal Construction Control Line.

I have communicated with my client regarding the aforesaid meeting and he is agreeable to implementing the following action as per our agreement;

1. Immediate removal of buried post and rope used to delineate his premises;
2. Utilization of movable post with attached signage indicating the premises of Top-O-Mast without any connecting rope, chain, etc;
3. The posts will be employed only during the hours of operation;
4. One buried corner post to remain on the south-west boundary, in order that the movable posts can be properly aligned each day.

Further, as I related to you the alleged violation of the aforesaid control line by my client was as a consequence of my negotiations on his behalf with the Division of Alcoholic Beverage and Tobacco to define the extent of the aforescribed premises. There was clearly no intention on the part of my client to violate any of the laws, rules, or regulations under your jurisdiction.

I appreciate your cooperation in resolving this matter and if I can be of any further assistance to you in regards to same, please contact me immediately.

Sincerely,



William E. Whitlock, III

cc: L. B. Schoenfeld, Division of Alcoholic Beverage and Tobacco