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**OFFICE OF THE MAYOR**



**TERRY C. HARTWICK**  
MAYOR  
mayor@nlr.ar.gov

PHONE (501) 975-8601  
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CITY HALL  
P.O. BOX 5757  
NORTH LITTLE ROCK, ARKANSAS 72119-5757  
website: www.nlr.ar.gov

**MEMORANDUM**

TO: Members of the North Little Rock City Council  
FROM: Anita Paul **AKP**  
DATE: January 2, 2024  
SUBJECT: Alcoholic Beverages Permit Request

For your information, I have enclosed a copy of the *Assignment and Comments of Officials* forms from the State of Arkansas. Alcoholic Beverage Control Division.

The following applicant has applied for a grocery store wine, retail beer off premises, small farm winery - retail permit – new application:

John Rowton, II  
Edwards Food Giant 228  
2727 Lakewood Village Drive  
North Little Rock, AR 72116

Please note the 15-day comment period referred to in the final paragraph of the *Comments* page.

Thank you.

Attachments

FILED 10:50 A.M. \_\_\_\_\_ P.M.  
BY Anita Paul  
DATE 1/2/24  
Diane Whitney, City Clerk and Collector  
North Little Rock, Arkansas  
RECEIVED by \_\_\_\_\_

NEWASSG0101

Printed On:12/28/2023

## ASSIGNMENT

Date Received: 12/14/2023

Date Assigned: 12/28/2023

Applicant: JOHN ROWTON, II

D.O.B: 08/17/1976

Green Card Number (Permanent Resident Alien):

Home Address: 6907 DAWSON LANE, HARRISBURG, AR 72432

Home Phone: 8709195889

Business Phone: (870) 295-2484

Cell Phone: (870) 919-5889

Trade Name: EDWARDS FOOD GIANT 228

Former Trade Name:

Business Address: 2727 LAKEWOOD VILLAGE DRIVE, NORTH LITTLE ROCK, AR 72116, County 60 - PULASKI

is Business Address located within City Limits: Yes

Type Of Investigation: **New Application #41997**

Dancing, if requested: No

Comments / Remarks:

Copies Of Assignment and Comment Form Mailed to: ABC-ATC.AssignmentSheet@dfa.arkansas.gov;

Assigned to Investigator: \_\_\_\_\_

Stockholders / Partners / LLC Members : STEVE EDWARDS

# COMMENTS OF PUBLIC OFFICIALS

APPLICANT'S NAME: JOHN ROWTON, II

TYPE OF APPLICATION: GROCERY STORE WINE, RETAIL BEER OFF PREMISES, SMALL FARM WINERY - RETAIL

BUSINESS NAME: EDWARDS FOOD GIANT 228

BUSINESS ADDRESS: 2727 LAKEWOOD VILLAGE DRIVE, NORTH LITTLE ROCK, AR 72116, 60 - PULASKI

DATE OF APPLICATION: 12/14/2023

NAME OF PUBLIC OFFICIAL: \_\_\_\_\_

TITLE OF OFFICIAL: \_\_\_\_\_

OFFICIAL MAILING ADDRESS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PHONE: \_\_\_\_\_

SIGNATURE OF OFFICIAL: \_\_\_\_\_

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

NAME OF AGENCY OR COURT: \_\_\_\_\_

Do you have any objections to the issuance of this permit? Yes or No

If yes, please explain your objections below:

To ensure your comments are available at the time this application is considered by the Director, please complete and return this form to ABC Administration, 101 East Capitol, Suite 401, Little Rock, AR 72201, within fifteen (15) days of receipt. In compliance with the Freedom of Information Act, this Comment Form will become a matter of public record. Pursuant to ACA 3-2-103, a national fingerprint based background check will be, or has been, conducted. At ACIC's request, do not run your own criminal history check through ACIC.

Printed On: 12/28/2023

5N  
12/14/23  
allment



STATE OF ARKANSAS  
ALCOHOLIC BEVERAGE CONTROL DIVISION  
APPLICATION FOR RETAIL BEER PERMIT

Check One:  ON PREMISES CONSUMPTION  
 OFF PREMISES CONSUMPTION

New Application   
Replacement \_\_\_\_\_  
Permit No. \_\_\_\_\_

I, or we, do hereby make application to the State of Arkansas for a permit to sell beer at retail, and do hereby submit answers to the following questions under oath for your approval:

GES INC. FEIN# 71-0402859  
Corporate /Partnership/LLC Name

NAME John PAUL ROWTON II  
First Middle Last

HOME ADDRESS 6907 DAWSON LN HARRISBURG AR 72432 POINSETT  
Street City Zip County

BUSINESS NAME EDWARDS FOOD GIANT 228 FORMER NAME STEIN MART

BUSINESS ADDRESS 2727 Lakewood Village DR, NORTH Little Rock Pulaski  
Street City Zip County Township

Is proposed location inside or outside city limits? INSIDE

Is the beer to be sold in connection with any other business? NO (A) If so, state type of business  
(café, drug store, pool hall, service station, convenience store, etc.) \_\_\_\_\_

(B) If beer is to be sold in connection with a motor fuel sales business give number of gasoline and/or diesel pumps at each location N/A

Are you the owner of the proposed premises? NO Do you have the premises leased? YES  
If leased, give name and address of owner Lakewood Village Shopping Park LLC  
2581 Lakewood Village DR NLR 72116

Will there be dancing on the premises? NO Dance Space \_\_\_\_\_ x \_\_\_\_\_

Does anyone now hold a beer or any other permit at this location? NO If so, give name and permit number(s) \_\_\_\_\_

Has anyone, to your knowledge, held a beer or any other permit at this location? NO If so, give name and permit number(s) \_\_\_\_\_

Do you or any other person interested in this permit hold any other type alcoholic beverage permit? YES  
If held, give name, place and permit number(s) SEE ATTACHED LIST

RECEIVED

DEC 14 5 44 PM '23



STATE OF ARKANSAS  
ALCOHOLIC BEVERAGE CONTROL DIVISION

New Application   
Replacement \_\_\_\_\_  
Permit No. \_\_\_\_\_

APPLICATION FOR:

Small Farm Winery - Retail    Small Farm Winery - Wholesale    Small Farm Winery - Manufacturer

I, or we, do hereby make application for the permit noted above and do hereby submit answers to the following questions under oath for your approval:

GES, INC. FEIN# 71-0402859  
Corporate/Partnership/LLC Name

NAME JOHN PAUL ROWTON II  
First Middle Last

HOME ADDRESS 6907 DAWSON LN Harrisburg AR 72432 Poinsett  
Street City State Zip County

BUSINESS NAME Edwards Food Giant 228 FORMER NAME STEIN MART

BUSINESS ADDRESS 2727 Lakewood Village Dr North Little Rock AR 72116 Pulaski  
Street City State Zip County

Is proposed location inside or outside city limits? INSIDE

If application is for retail level, are you a grocery store, convenience store or liquor store?  Yes ( ) No  
(Convenience stores must maintain a \$7,500.00 inventory of human consumables.)

If application is for manufacturing, (1) how many gallons do you contemplate manufacturing? N/A

(2) What was your total production for the last calendar year? \_\_\_\_\_

Are you the owner of the proposed premises? NO If leased, give name and address of

owner Lakewood Village Shopping Park LLC 2581 Lakewood Village Dr, NLR  
72116

Does anyone now hold any other permit(s) at this location? NO If so, give name, type and permit number(s) \_\_\_\_\_

Has anyone, to your knowledge, held any other type permit(s) at this location? NO If so, give name and permit number(s) \_\_\_\_\_

2023 DEC 14 A 9:44

RECEIVED



STATE OF ARKANSAS  
ALCOHOLIC BEVERAGE CONTROL DIVISION

APPLICATION FOR GROCERY STORE WINE PERMIT

Permitted Building Size

- Check One:  Less than 35,001 sq.ft  
 35,001 sq.ft - 50,000 sq.ft  
 50,001 sq.ft - 75,000 sq.ft  
 Greater than 75,000 sq.ft

New Application   
 Replacement \_\_\_\_\_  
 Permit No. \_\_\_\_\_

I, or we, do hereby make application to the State of Arkansas for a permit to sell wine in a grocery store as authorized by Act 508 of 2017 and do hereby submit answers to the following questions under oath for your approval:

GES, INC. FEIN#: 71-0402859  
 Corporate/Partnership/LLC Name

NAME JOHN PAUL ROWTON II  
 First Middle Last

MAILING ADDRESS PO Box 649 MARIANNA 72360 LEE  
4600 S. Alabama City Zip County

BUSINESS NAME EDWARDS FOOD GIANT 228

BUSINESS ADDRESS 2727 LAKEWOOD VILLAGE DR, North Little Rock 72116 Polaski  
 Street City Zip County Township

Does your store, or will your store, maintain an inventory of human consumables?  Yes  No

Provide the date your store opened for business: FEB 15, 2024

What percentage of your gross sales are derived, or will be derived, from the sale of alcoholic beverages? 2 %

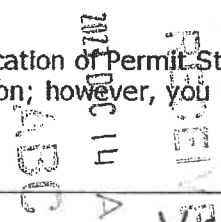
Does anyone now hold any type of permit at this location?  Yes  No

- a. If "yes", give name, permit type, and permit number(s)  
 \_\_\_\_\_
- b. Is one of the permits listed above a small farm wine retail permit?  Yes  No
- c. Will the named permittee and floor plan of the permitted premises remain unchanged?  Yes  No
- d. If you answered "Yes" to the above question, please complete the "Certification of Permit Status" form. You do not need to complete the remaining portion of this application; however, you must sign the application and have it notarized.

Is the proposed location inside or outside city limits? INSIDE

Are you the owner of the proposed premises? NO Do you have the premises leased? YES

If leased, give name and address of owner LAKWOOD VILLAGE SHOPPING PARK, LLC  
2581 LAKEWOOD VILLAGE DR, North Little Rock  
72116



MEMORANDUM

TO: ABC Administration  
101 East Capitol Avenue, Suite 401  
Little Rock, Arkansas 72201

DATE:

FROM:

RE: New "On Site Representative"

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NAME: GARY PROFFITT  
HOME ADDRESS: 43 Grace Ridge Cabot, AR 72023  
CONTACT TELEPHONE NUMBER: 870-295-0325  
DATE OF BIRTH (must be at least 21 years of age): 9/16/1960

The person above will be the "on site representative" for the business(s) listed below;  
list each location, including ABC permit number: