



Antigua and Barbuda Financial Services Regulatory Commission

The International Trust Act, 2007, No. 18 of 2007 [Section 17]

SCHEDULE 2 CERTIFICATE OF ANTIGUA AND BARBUDA TRUSTEE

Please forward completed form with any supporting material to:

Manager, IBCs & CMTSPs

Financial Services Regulatory Commission

P.O. Box 2674
St. John's, Antigua

Tel: (268)481-1170 • **Fax:** (268)463-0422

Email: registryandCMTSP@fsrc.gov.ag

Website: <http://www.fsrc.gov.ag>

SCHEDULE 2: CERTIFICATE OF ANTIGUA AND BARBUDA TRUSTEE

1. Date of Submission:

SECTION I. DECLARATION

I, ,
the Trustee of the Trust,
domiciled in Antigua and Barbuda, certify the following:

2. The name of the trust is:

3. The Trust,

upon registration on the Register of International Trusts, shall be an international trust in accordance with the Antigua and Barbuda International Trust Act, 2007.

SECTION II. ANTIGUA AND BARBUDA TRUSTEE'S DETAILS

4. The Name and Address of Antigua and Barbuda Trustees:

Name of Trustee 1:			
Address:		E-mail Address:	
Contact's Name:		Telephone No.:	

Name of Trustee 2:			
Address:		E-mail Address:	
Contact's Name:		Telephone No.:	

SECTION III. NON-RESIDENT TRUSTEE'S DETAILS

5. Name and Address of All Non-Resident Trustees:

Name of Trustee 3:			
Address:		E-mail Address:	
Contact's Name:		Telephone No.:	

Name of Trustee 4:			
Address:		E-mail Address:	
Contact's Name:		Telephone No.:	

SECTION IV. PROTECTOR'S DETAILS

6. Name and Address of All Protectors:

Name of Protector 1:			
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Address:		E-mail Address:	
Contact's Name:		Telephone No.:	
Name of Protector 2:			
Address:		E-mail Address:	
Contact's Name:		Telephone No.:	

SECTION V. RE-DOMICILED FOREIGN TRUST DETAILS

7. In the event that the above-named trust is a re-domiciled foreign trust, complete the following:

(a) Original date of registration of the trust in its original jurisdiction:	
(b) or Original date of execution (if the date of registration is unavailable):	
(c) Original jurisdiction of the trust:	

8. Date of Amendment of the Trust Deed of Settlement which provides for the law of Antigua and Barbuda to be the governing law of the trust:

SECTION VI. AUTHORIZATION

The undersigned hereby declares that all the information provided in this certificate is true and correct.

Authorized Name:		Signature:	
Title:		Date:	

SECTION VII. ADMINISTRATION FOR FSRC USE ONLY

Date Received	
Received by (employee's name):	