



COMPANIES REGISTRY  
FORM 2A

**TURKS AND CAICOS ISLANDS  
COMPANIES ORDINANCE 2017**

**(SCHEDULE 1 – NO. 3)**

**APPLICATION FOR REGISTRATION BY EXISTING  
NON-EXEMPTED (ORDINARY) COMPANY**

**COMPANY DETAILS**

EXISTING REGISTRATION  
NUMBER:

COMPANY NAME:

**PROPOSED REGISTERED AGENT DETAILS**

REGISTERED NAME:

REGISTERED OFFICE ADDRESS:

STREET

TOWN/CITY

STATE/ISLAND

P.O. BOX

COUNTRY

TELEPHONE/FAX

E-MAIL

WILL THE COMPANY REGISTERED OFFICE BE AT THE REGISTERED OFFICE OF THE REGISTERED AGENT?  
YES  NO

REGISTERED OFFICE (IF DIFFERENT FROM THE REGISTERED OFFICE ADDRESS OF THE PROPOSED  
REGISTERED AGENT)

STREET

TOWN/CITY

STATE/ISLAND

P.O. BOX

COUNTRY

**EXISTING ENTITY TYPE**

- LIMITED BY SHARES  
 UNLIMITED – AUTHORISED TO HAVE A SHARE CAPITAL  
 UNLIMITED – NOT AUTHORISED TO HAVE A SHARE CAPITAL  
 LIMITED BY GUARANTEE – AUTHORISED TO HAVE A SHARE CAPITAL  
 LIMITED BY GUARANTEE – NOT AUTHORISED TO HAVE A SHARE CAPITAL

**TYPE OF COMPANY PROPOSED UNDER THE COMPANIES ORDINANCE 2017**

- LIMITED BY SHARES  
 LIMITED BY GUARANTEE – NOT AUTHORISED TO ISSUE SHARES  
 LIMITED BY GUARANTEE – AUTHORISED TO ISSUE SHARES  
 UNLIMITED – AUTHORISED TO ISSUE SHARES  
 UNLIMITED – NOT AUTHORISED TO ISSUE SHARES

**SHARE DETAILS**

WHAT IS THE TOTAL NUMBER OF SHARES THE COMPANY IS AUTHORISED TO ISSUE?

INDICATE THE ARTICLE NUMBER WHICH STATES THE NUMBER OF SHARES THE COMPANY IS AUTHORISED TO ISSUE:

**INDICATE THE ARTICLE NUMBER WHICH STIPULATES COMPLIANCE WITH THE FOLLOWING SECTION OF SCHEDULE 1 OF THE ORDINANCE:**

SECTION OF SCHEDULE 1	ARTICLE #
3 (4) (A)	
3 (4) (B)	

**INDICATE THE ARTICLE NUMBER (IF APPLICABLE) WHICH STIPULATES COMPLIANCE WITH THE FOLLOWING SECTION OF THE ORDINANCE:**

SECTION OF ORDINANCE	ARTICLE #
7	
13 (1) (C)	
13 (1) (D)	

- IS THIS A LAND HOLDING COMPANY?     YES     NO
- DOES THIS COMPANY HOLD A BUSINESS LICENCE IN A RESTRICTED CATEGORY?     YES     NO  
 IF YES, PLEASE INDICATE CATEGORY
- DOES THIS COMPANY HOLD A LICENCE ISSUED BY THE FINANCIAL SERVICES COMMISSION?     YES     NO  
 IF YES, PLEASE CONFIRM LICENCE(S) HELD:

**BANKING**

- NATIONAL AND OVERSEA BANKING  
 NATIONAL BANKING  
 OVERSEA BANKING

**TRUST**

- UNRESTRICTED TRUST  
 RESTRICTED TRUST

**COMPANY MANAGEMENT**

- COMPANY MANAGER  
 COMPANY AGENT

**MUTUAL FUND**

- MUTUAL FUND ADMINISTRATOR
- MUTUAL FUND
- EXEMPT MUTUAL FUNDS

**INVESTMENTS**

- INVESTMENT ADVISOR
- INVESTMENT DEALER

 **CREDIT UNION**

- MONEY TRANSMITTERS**

**INSURANCE**

- INSURANCE AGENT
- INSURANCE BROKER
- INSURANCE MANAGER
- PRINCIPAL INSURANCE REPRESENTATIVE
- INSURANCE SUB-AGENT
- CREDIT LIFE REINSURER
- NON-CREDIT LIFE REINSURER
- DOMESTIC LONG-TERM INSURERS
- DOMESTIC GENERAL INSURER
- NON-DOMESTIC GENERAL INSURERS
- NON-DOMESTIC LONG-TERM INSURERS

**THE FOLLOWING ARE ATTACHED TO THIS FORM**

- SPECIAL RESOLUTION BY MEMBERS – AUTHORISING APPLICATION TO REGISTER, APPOINTING REGISTERED AGENT AND APPROVING ARTICLES OF INCORPORATION
- ARTICLES OF INCORPORATION
- FORM 6 - NOTICE OF DIRECTORS
- FORM 7 - NOTICE OF MEMBERS

**REGISTERED AGENT CONSENT**

WE,

(AGENT NAME)

APPLY TO REGISTER THE ABOVE COMPANY AS A COMPANY UNDER THE COMPANIES ORDINANCE 2017. WE FURTHER CONSENT TO ACT AS THE REGISTERED AGENT OF THE COMPANY ON ITS REGISTRATION.

**DETAILS OF PERSON SIGNING ON BEHALF OF THE REGISTERED AGENT:**

NAME: \_\_\_\_\_

JOB TITLE/POSITION: \_\_\_\_\_

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

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

**FOR OFFICIAL USE ONLY:**

**DATE FILED:** \_\_\_\_\_

**RECEIVED BY:** \_\_\_\_\_

**FEE PAID:**            **YES**             **NO**             **N/A**

**AMOUNT PAID:** \_\_\_\_\_

**ACTION TAKEN:** \_\_\_\_\_

\_\_\_\_\_

**DATE ACTION TAKEN:** \_\_\_\_\_

**NEW REGISTRATION NO.** \_\_\_\_\_

**NOTE:**

**THE REGISTRAR HAS NO DUTY EXCEPT TO THE EXTENT PROVIDED BY THE ORDINANCE TO VERIFY THAT THE ARTICLES OR OTHER DOCUMENTS COMPLY WITH THE ORDINANCE. COMPANIES ARE REMINDED OF THEIR LEGAL REQUIREMENT TO MAINTAIN PROPER AND UPDATED RECORDS. THE COMMISSION EXPECTS THAT DOCUMENTS FILED WITH THE REGISTRY WILL BE ACCURATE.**