### Schedule 2

### ISSUER REGISTRATION STATEMENT Sections 97(2), 97(3) and 97(4) of the Securities Act, 2001

## FORM RS - 2

(Exact	name of Company as set forth in Certifica	ate of Incorporation)
Place and date of inc CASTRIES, ST LUCIA, O		
	lress of registered office: . BOX 1860, CASTRIES, ST LUCIA	
Company telephone	number: ( <sup>758</sup> ) 456-6000	
Fax number: (	456-6702	
Email address: ecfh	@candw.lc	
Financial year-end:	DECEMBER 31	2017
Contact person(s):	(month) (day) BERNARD LA CORBINIERE	(year)
contact person(s).	ESTHERLITA CUMBERBATCH	
Telephone number (	if different from above): ()	
Fax number: (	_)	
Email address:		

norts required to be filed by Section 98 of the Securities Act, 2001 onths?
No
ports required to be filed by the Companies Act during the
No
1

Exchanges on which the Co  Exchange(s)  ECSE	Securities Type	No. of Shares	22 0 00
			Valuation
	Ordinary Shares	24,465,589	
Description of Securities B	eing Offered (including	who is the Iss	suer and wh
ommon Stock- ECFH as Issuer			
eferred or Preference Stock - ECFH as	Issuer		
Territories in which Securi Territory		Effective 1	

## 5. Description of Share Capital

### a) Authorised

No. OF SHARES
unlimited
unlimited

### b) Issued

Common Preference	24,465,589
Preference	
	830,000

## c) Outstanding

TYPE/CLASS	No. OF SHARES	

## 6. EXECUTIVE OFFICERS AND KEY PERSONNEL OF THE COMPANY

See Attached	Position:
Name:	Age:
Mailing Address:	
Telephone No.:	
List jobs held during past five years (included Give brief description of current responsible for the contract of the contract	ding names of employers and dates of employment). ilities.
Education (degrees or other academic qual	ifications, schools attended, and dates):
	Yes No
If retained on a part time basis, indicate an matters:	mount of time to be spent dealing with company
The additional sheets if necessary	

# 7. DIRECTORS OF THE COMPANY See Attached

Vame:	Position:
	Age:
failing Address:	
elephone No.:	
ist jobs held during the past f	ive years (including names of employers and dates of
nployment). Give brief descr	iption of current responsibilities.
ducation (degrees or other ac	ademic qualifications, schools attended, and dates):
ducation (degrees or other ac	ademic qualifications, schools attended, and dates):
ducation (degrees or other ac	ademic qualifications, schools attended, and dates):
ducation (degrees or other ac	ademic qualifications, schools attended, and dates):
ducation (degrees or other ac	ademic qualifications, schools attended, and dates):
ducation (degrees or other ac	ademic qualifications, schools attended, and dates):
ducation (degrees or other ac	ademic qualifications, schools attended, and dates):

Use additional sheets if necessary

#### 8. SUBSTANTIAL SHAREHOLDERS

(a) Principal owners of the company (those who beneficially own more than 5% of the common and preferred shares presently outstanding whether directly or indirectly) starting with the largest common shareholder. Indicate by endnote any transaction where the consideration was not cash. State the nature of any such consideration.

#### SECURITIES NOW HELD:

Name: Address:	Class of Shares:	No. of Shares:	% of Total
Government of Saint Lucia - Castries, St Lucia	Ordinary	4,736,600	19.36
Republic Bank Limited - Port of Spain - Trinidad & Tobago	Ordinary	4,736,600	19.36
National Insurance Corporation - Castries, St Lucia	Ordinary	4,258,480	17.40
National Insurance Corporation - Castries, St Lucia	Preference	830,000	100

(b) Include all common shares issuable upon conversion of convertible securities and show conversion rate per share as if conversion has occurred.

#### **UPON CONVERSION:**

Name: Address:	Class of Shares:	Conversion Rate:	No. of Shares upon Conversion	% of Total*
National Insurance Corporation	Preference	\$5.00	250,000	23.14

<sup>\*</sup> Current holding of shares if conversion option were exercised.

9. Name and Address of Parent N/A

Name:	Address:	Country of Incorporation:	Countries of Registration (where applicable)	Name of the Exchange(s) on which the company's securities are listed:

10. Name(s) and Address(es) of Subsidiary(ies)

Name:	Address:	Percentage Ownership:	Name of the Exchange(s) on which the company's securities are listed:
Bank of Saint Lucia Limited	#1 Bridge Street, Castries, St Lucia	100%	

11. Name(s) and Address(es) of Affiliate(s)

Name:	Address:	Name of the Exchange(s) on which the company's securities are listed:
Eastern Caribbean Amalgamated Bank	1000 Airport Boulevard, P.O. Box 315, Coolidge, St Joh	N/A
Bank of Saint Vincent & the Grenadines	Reigate Building, Kingstown, St Vincent	N/A

#### **SIGNATURES**

A Director, the Chief Executive and Corporate Secretary shall sign this Registration Statement on behalf of the company. By so doing each certifies that he has made diligent efforts to verify the material accuracy and completeness of the information herein contained.

Name of Chief Executive Officer:	Name of Director:
Bernard La Corbiniere	Andre Chastanet
SIGNED AND CERTIFIED	SIGNED AND CERTIFIED
Signature 30/04/18  Date	Signature 30/04/18 Date
Name of Corporate Secretary:  Estherlita Cumberbatch	
SIGNED AND CERTIFIED	
Signature 30/04/18	