

Schedule 2

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

FORM RS - 2

Select One: Annual Registration Issue of Securities

Bank of Montserrat Limited

(Exact name of Company as set forth in Certificate of Incorporation)

Place and date of incorporation:
Plymouth, Montserrat - February 22, 1988

Street and postal address of registered office:

Brades Road, Brades MSR1110, Montserrat (Registered)

P.O. Box 10, Brades MSR1110, Montserrat, West Indies (Postal)

Company telephone number: (664) 491 3843

Fax number: (664) 491 3163

Email address: manager@bankofmontserrat.ms

Financial year-end: September 30 2018
(month) (day) (year)

Contact person(s): Michael Joseph
General Manager

Telephone number (if different from above): () _____

Fax number: () _____

Email address: michael.joseph@bankofmontserrat.ms

Did the company file all reports required to be filed by Section 98 of the Securities Act, 2001 during the preceding 12 months?

Yes

No

Did the company file all reports required to be filed by the Companies Act during the preceding 12 months?

Yes

No

1. Description of the Industry in which the Company Operates

Bank of Montserrat Limited is a banking financial institution operating in Montserrat.

The Island's Soufriere Hills Volcano erupted in the 1990s leaving two thirds (2/3) of the island uninhabited. Thousands migrated to the United Kingdom, USA and neighboring Caribbean Islands. Consequently, the Bank serves a population of approximately 5,000 people.

There are currently two (2) commercial banks, a Building Society and a Credit Union operating in Montserrat. The Island relies heavily on Granting Aid from the United Kingdom.

2. Exchanges on which the Company's Securities are Listed

Exchange(s)	Securities Type	No. of Shares	Valuation
N/A			

3. Description of Securities Being Offered (including who is the Issuer and who is the Offeror of the Securities)

N/A

4. Territories in which Securities are Being Offered

Territory	Effective Date
N/A	

5. **Description of Share Capital**

a) Authorised

TYPE/CLASS	No. OF SHARES
Common Stock	8,000,000

b) Issued

TYPE/CLASS	No. OF SHARES
Common Stock	5,324,123

c) Outstanding

TYPE/CLASS	No. OF SHARES
Common Stock	5,324,123

6. EXECUTIVE OFFICERS AND KEY PERSONNEL OF THE COMPANY

Position:

Name: _____ Age: _____

Mailing Address: _____

Telephone No.: _____

List jobs held during past five years (including names of employers and dates of employment).
Give brief description of current responsibilities.

Education (degrees or other academic qualifications, schools attended, and dates):

Also a Director of the company Yes No

If retained on a part time basis, indicate amount of time to be spent dealing with company matters:

Use additional sheets if necessary.

7. DIRECTORS OF THE COMPANY

Information concerning non-Executive Directors:

Name: _____ Position: _____

Age: _____

Mailing Address: _____

Telephone No.:

List jobs held during the past five years (including names of employers and dates of employment). Give brief description of current responsibilities.

Education (degrees or other academic 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 Montserrat		3,085,075	57.94%

- (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*

* Current holding of shares if conversion option were exercised.

9. Name and Address of Parent

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:

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

Name:	Address:	Name of the Exchange(s) on which the company's securities are listed:

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:

Michael Joseph



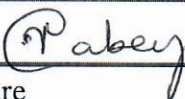
Signature

March 12, 2019

Date

Name of Director:

Venita Cabey



Signature

March 12, 2019

Date

Name of Corporate Secretary:

Chivone Gerald

Signature

March 12, 2019

Date