

APPLICATION TO REGISTER AS A FOREIGN LICENSED FAMILY TRUST COMPANY
Form OFR-162-03
New 11/2015

General Instructions

This form is the application to register as a foreign licensed family trust company, as that term is defined in s. 662.111(15), F.S. The terms used in this form are as defined in s. 662.111, F.S., or, if not defined therein, in Rule Chapter 162, F.A.C. All statutes, rules, and forms relating to foreign licensed family trust companies are available at the Office of Financial Regulation, Division of Financial Institution's website: <http://www.flofr.com/StaticPages/DivisionOfFinancialInstitutions.htm>.

Authorized Representative. The application must be completed and affirmed under penalty of perjury by an authorized representative of the proposed foreign licensed family trust company. The authorized representative must be an officer or director, if the proposed foreign licensed family trust company will be organized as a corporation, or a manager, officer, or member, if the proposed foreign licensed family trust company will be organized as a limited liability company. The authorized representative may designate a correspondent or legal representative to correspond with the Office for the purpose of inquiries and requests for information regarding the application. The duty to ensure that all information provided in the application is complete, correct, and true remains with the proposed foreign licensed family trust company's authorized representative.

If additional space is needed to complete the information required by this form, attach additional pages as necessary and identify the question to which the additional pages pertain.

Upon completion, submit the application, along with the nonrefundable \$5,000 registration application fee payable to the Office of Financial Regulation to:

Director, Division of Financial Institutions
Office of Financial Regulation
200 East Gaines Street
Tallahassee, Florida 32399-0371

Org: 43843020300 Flair Object Code: 001051 EO: V1 Revenue Source Code: 211

This application will not be deemed to be filed until the applicant has provided the Office with all information required.

APPLICATION

1. Name of the Foreign Licensed Family Trust Company

2. Principal Jurisdiction - Current Street Address and Telephone Number of the Physical Location of the Foreign Licensed Family Trust Company's Principal Place of Business in its Principal Jurisdiction

Street Address Line 1: _____

Street Address Line 2: _____

City: _____ State: _____ Postal Code: _____

Telephone Number: _____

Facsimile Number: _____

3. Name, Address, and Telephone Number of the Foreign Licensed Family Trust Company's Supervisory or Regulatory Authority in its Principal Jurisdiction:

Name of Authority: _____

Address Line 1: _____

Address Line 2: _____

City: _____ State: _____ Postal Code: _____

Telephone Number: _____

Facsimile Number: _____

Website Address: _____

4. Florida - Current Street Address and Telephone Number of the Physical Location in Florida of the Foreign Licensed Family Trust Company's Principal Place of Operations

Street Address Line 1: _____

Street Address Line 2: _____

City: _____, Florida Postal Code: _____

Telephone Number: _____

Facsimile Number: _____

9. Certificate of Good Standing and Proof that the Organization of the Foreign Licensed Family Trust Company in its Principal Jurisdiction is Similar to that of a Family Trust Company as Defined in Chapter 662, F.S.

Provide, as Exhibit A, a certified copy of a certificate of good standing, or an equivalent document, issued by the licensing official or agency in the foreign licensed family trust company's principal jurisdiction, along with: (a) a copy of the foreign licensed family trust company's articles of incorporation or organization for its operations in its principal jurisdiction; (b) a copy of the bylaws or operating agreement for its operations in its principal jurisdiction; (c) a description of the services the foreign licensed family trust company is authorized to provide in its principal jurisdiction and the services it provides; (d) a description of the types of persons or entities to whom the foreign licensed family trust company is authorized to provide services in its principal jurisdiction and an identification of the types or persons or entities to whom the company is providing services in its principal jurisdiction; and (e) the initial licensing application or equivalent document and information submitted to the licensing official or agency in the foreign licensed family trust company's principal jurisdiction. The certified of good standing or equivalent document must be authenticated by the official having custody of records in the foreign licensed family trust company's principal jurisdiction.

10. Applicable State and Local Business Licenses, Charters, and Permits

List all applicable state and local business licenses, charters, and permits obtained or that will be obtained.

11. Nonrefundable Application Fee

- The nonrefundable \$5,000 registration application fee, made payable to the Office of Financial Regulation, is provided with this application for deposit into the Financial Institutions' Regulatory Trust Fund.

CERTIFICATION

I, the undersigned authorized representative of the foreign licensed family trust company applicant named herein, hereby affirm, under penalty of perjury, that I am authorized to make this application on behalf of the applicant; that the operations of the foreign licensed family trust company will comply with ss. 662.1225, 662.125, 662.131, and 662.134, F.S.; that it is currently in compliance with the family trust company laws and regulations of its principal jurisdiction; that I have read the foregoing application and all information submitted herewith; and that the application and all information submitted herewith is true, complete, and correct to the best of my knowledge and belief. I understand that misrepresentation or failure to reveal information requested may be deemed sufficient cause for the refusal by the Office to authorize the foreign licensed family trust company to operate in this state.

Signature: _____

Name: _____

Date: _____

STATE OF _____

COUNTY OF _____

On this _____, day of _____, _____, before me, the undersigned notary, personally appeared _____ (name of document signer), who ___ is personally known to me or ___ proved to me through the following identification:

_____ to be the person who signed the preceding document in my presence and who swore or affirmed to me that the statement and contents of the document are truthful and accurate to the best of ___ his or ___ her knowledge and belief.

Notary Public Signature

Notary Seal:

EXHIBIT A

**Certificate of Good Standing and Proof that the Organization of
the Foreign Licensed Family Trust Company in its Principal Jurisdiction is
Similar to that of a Family Trust Company as Defined in Chapter 662, F.S.**