



By nmar at 7:06:53 pm, 6 May 2025

FORM 10A

MATERIAL CHANGE REPORT

1. NAME OF REPORTING ISSUER

Name of Reporting Issuer

URBAN DEVELOPMENT CORPORATION OF TRINIDAD AND TOBAGO LIMITED
38-40 SACKVILLE STREET, PORT OF SPAIN 100622

2. DATE OF MATERIAL CHANGE

Date of material change

ACKNOWLEDGED DATE OF MAY 6, 2025

3. DESCRIPTION OF MATERIAL CHANGE

Provide a description of the material change

THE RESIGNATION OF THE FOLLOWING DIRECTORS, ACKNOWLEDGED EFFECTIVE MAY 6, 2025 SUBSEQUENT TO THEIR RESPECTIVE TENDERED RESIGNATIONS

MR. NOEL GARCIA

MS. JACQUELINE GANTEAUME-FARRELL

MS. MAUREEN DANIEL-BRAVEBOY

MS. JANELLE BERKLEY

MR. JADE BROWN

MS. VASHTI PHEKOO

CHAIRMAN

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR



4. DETAILS OF PUBLICATION OF MATERIAL CHANGE

	YES	NO
Will you be seeking an exemption from publishing a notice in accordance with Section 64(2) of the Securities Act 2012?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

If "No"

Date of Publication of Notice (dd/mmm/yyyy)	06/05/2025 & 06/05/2025
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If "Yes"

State the reasons for applying for the exemption
N/A

5. DETAILS OF SENIOR OFFICER

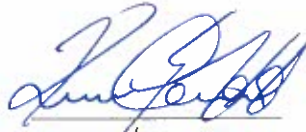
Name (First name, Last name)	KIMBERLY CARR-HAMILTON
Position in Organization	CORPORATE SECRETARY
Business Address	38 40 SACKVILLE STREET, PORT OF SPAIN, 100622
Work Phone (1-xxx-xxx-xxxx)	1-868-225-4004 EXT. 553
Fax Phone(1-xxx-xxx-xxxx)	1-868-624-0801
Email Address	kimberlyc@udecott.com

6. DATE, CERTIFICATION AND SIGNATURE

I hereby certify that the statement and information contained in this form and any attachment hereto are true and correct to the best of my knowledge and belief and submitted in compliance with the provisions of the Securities Act, 2012. I understand that any misrepresentation, falsification or material omission of information on this application may result in a breach of the Securities Act, 2012.

KIMBERLY CARR-HAMILTON

Print Name



Signature

CORPORATE SECRETARY

Position

MAY, 06, 2025

Date

FOR OFFICIAL USE ONLY

Tool	ID Information
Registrant's Number	
Director's Number	
Document / Record Number	
Record's Management Date Received (dd/mm/yyyy)	

Approved By : _____ Date (DD/MM/YYYY) _____