



FORM 10A

By nmar at 8:21:49 am, 30 Jul 2025

MATERIAL CHANGE REPORT

Pursuant to Section 64 of the Securities Act, 2012

1. NAME OF REPORTING ISSUER

Name of Reporting Issuer

Trinidad and Tobago Mortgage Bank Limited

2. DATE OF MATERIAL CHANGE

Date of material change

August 1 2025

DESCRIPTION OF MATERIAL CHANGE

Provide a description of the material change

Pursuant to Section 64(1) of the Securities Act 2012 (as amended), we hereby advise of the continued appointment of Mr. Brent Mc Fee in the role of Chief Executive Officer (Acting) of Trinidad and Tobago Mortgage Bank Limited (TTMB) effective from August 1st, 2025, until further advised.

3. 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)	31/07/2025
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If "Yes"

State the reasons for applying for the exemption
N/A

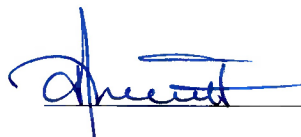
4. DETAILS OF SENIOR OFFICER

Name (First name, Last name)	Danielle Campbell
Position in Organization	Corporate Secretary
Business Address	Albion Court, 61 Dundonald Street, Port of Spain.
Work Phone (1-xxx-xxx-xxxx)	(868) 623-8863 ext. 2293
Fax Phone(1-xxx-xxx-xxxx)	(868) 624-3262
Email Address	danielle.campbell@ttmortgagebank.com

5. 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.

Danielle Campbell



Corporate Secretary (Ag) 30/07/2025

Print Name

Signature

Position

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) _____