

Instructions

A Corporate Amendment occurs when there is a change to the Corporation. Examples would include but are not limited to: changes to the Corporate Name, the addition or removal of a Director or changes to the corporate share structure.

To remain compliant with the Drug and Pharmacies Regulation Act (DPRA) and College by-laws, the College must be notified within **30 days** of the changes coming into effect. The type of change will determine which of the following documents are required.

Step 1: Complete the following OCP Corporation Information Form.

This form is **required** for all Corporate Amendments and should reflect the most up-to-date corporate information. Please note that all Directors of the corporation are required to sign this form.

Step 2: Enclose supporting documentation based on the changes being made to the corporation.

Only provide supporting documentation relevant to the corporation changes. Review the following possible changes and determine what is applicable.

For Corporate Name changes (if applicable):

- Provide a copy of the Ministry approved Articles of Amendment.
- Provide an updated copy(ies) of the signed and dated Certificate of Shares for all registered shareholder(s) with the amended Corporate Name.

For Director(s) changes (if applicable):

- Provide a copy of your Corporation's "**Corporation Profile Report**" issued by the Ministry of Government Services – obtainable at: <https://www.oncorp.com> or <https://www.eservicecorp.ca> (Ontario Corporations) or <https://www.ic.gc.ca/app/scr/cc/CorporationsCanada/fdr/Cr pSrch.html> (Federal Corporations)

This report should be printed after the changes have been applied to the Ministry's register.

Reminder – Drug and Pharmacies Regulation Act – [142.](#)

(1) No corporation shall own or operate a pharmacy unless the majority of the directors of the corporation are pharmacists.

For Shareholder(s) changes (if applicable):

- Provide copy(ies) of the signed and dated Certificate of Shares of all registered shareholder(s).

Reminder – Drug and Pharmacies Regulation Act – [142.](#)

(2) No corporation shall own or operate a pharmacy unless a majority of each class of shares of the corporation is owned by and registered in the name of pharmacists or in the name of health profession corporations each of which holds a valid certificate of authorization issued by the College.

IMPORTANT NOTE: Ensure the information provided on the OCP Corporation Information Form is identical to your supporting documentation. The OCP Corporation Information Form must be submitted with supporting documentation as verification of the changes. If the only change being made is the Director Liaison designation, no supporting documentation is needed. We are unable to process incomplete submissions.

Submission Checklist

- Completed OCP Corporation Information Form
- Enclosed supporting documentation relevant to changes being made.

If you have any questions about the process, send an email to pharmacyapplications@ocpinfo.com or call 416-962-4861 ext. 3600.

Submit documentation by email to pharmacyapplications@ocpinfo.com, or fax to 416-847-8399, or mail to the attention of Pharmacy Applications & Renewals at 483 Huron St, Toronto, ON M5R 2R4

OCP Corporate Information Form

The OCP Corporate Information Form should be used only when there have been changes to the Corporation. Examples include: changes to the Corporate Name, changes to Director or Shareholder structures or if the Corporation wishes to change the Director Liaison on file with OCP. This form must be submitted with supporting documentation unless the only change is the Director Liaison designation.

*Only the current corporate information should be listed below. This information should be identical to what is reflected in your supporting documents.

CORPORATION INFORMATION

A	Today's Date:		Pharmacy Accreditation #:		Contact Phone#:	
	Corporation Name:					
	New Corporation Name (if applicable):					
	Address:	STREET ADDRESS	CITY	PROVINCE	POSTAL CODE	

DIRECTOR(S)

	Director Liaison <i>See Below *</i>	Pharmacist <i>Check if Yes</i>	OCP Number <i>(if applicable)</i>	Director's Name
B	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		1)
	<input type="checkbox"/>	<input type="checkbox"/>		2)
	<input type="checkbox"/>	<input type="checkbox"/>		3)
	<input type="checkbox"/>	<input type="checkbox"/>		4)

*The Director Liaison (DL) is the pharmacist director of the corporation who will act as the representative of the corporation to the College and serve as the primary contact person. The DL is also the person who will complete the annual renewal.

SHAREHOLDER(S)

	Pharmacist <i>Check if Yes</i>	OCP Number <i>(if applicable)</i>	Shareholder's Name <i>(this may be an individual or a corporation and should match the name found on the Share Certificate)</i>	Number of Shares	
				Common	Preferred
C	<input type="checkbox"/>		1)		
	<input type="checkbox"/>		2)		
	<input type="checkbox"/>		3)		
	<input type="checkbox"/>		4)		

AUTHORIZATION – ALL DIRECTORS ARE REQUIRED TO SIGN THIS FORM

	OCP Number <i>(if applicable)</i>	Director's Name <i>(print)</i>	Director's Signature
D		1)	
		2)	
		3)	
		4)	

Submit completed form by email to pharmacyapplications@ocpinfo.com, or fax to 416-847-8399, or mail to the attention of Pharmacy Applications & Renewals at 483 Huron St, Toronto, ON M5R 2R4