

# PRIMO WATER CORP /CN/

Reported by  
**WATSON LEONARD**

## FORM 3

(Initial Statement of Beneficial Ownership)

Filed 09/07/04 for the Period Ending 09/06/04

|             |   |
|-------------|---|
| Address     | 4221 W. BOY SCOUT BLVD.<br>SUITE 400<br>TAMPA, FL, 33607    |
| Telephone   | 813-313-1732  |
| CIK         | 0000884713  |
| Symbol      | PRMW  |
| SIC Code    | 2086 - Bottled and Canned Soft Drinks and Carbonated Waters |
| Industry    | Non-Alcoholic Beverages                                     |
| Sector      | Consumer Non-Cyclicals                                      |
| Fiscal Year | 12/02   |

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

|   |  |  |
|---|--|--|
| 1. Name and Address of Reporting Person *<br><b>WATSON LEONARD</b><br><br>(Last) (First) (Middle) | 2. Date of Event Requiring Statement (MM/DD/YYYY)<br><b>9/6/2004</b>   | 3. Issuer Name and Ticker or Trading Symbol<br><b>COTT CORP /CN/ [COT]</b>   |
| <b>159 GLENVALE BLVD.</b><br><br>(Street)   | 4. Relationship of Reporting Person(s) to Issuer (Check all applicable)<br><br><input type="checkbox"/> Director <input type="checkbox"/> 10% Owner<br><input checked="" type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (specify below)<br><b>Chief Information Officer /</b> | 6. Individual or Joint/Group Filing (Check Applicable Line)<br><br><input checked="" type="checkbox"/> Form filed by One Reporting Person<br><input type="checkbox"/> Form filed by More than One Reporting Person |
| <b>TORONTO, A6 M4G 2W5</b><br><br>(City) (State) (Zip)  | 5. If Amendment, Date Original Filed (MM/DD/YYYY)  |  |

### Table I - Non-Derivative Securities Beneficially Owned

|                                 |   |  |   |
|---------------------------------|---|--|---|
| 1. Title of Security (Instr. 4) | 2. Amount of Securities Beneficially Owned (Instr. 4) | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | 4. Nature of Indirect Beneficial Ownership (Instr. 5) |
|---------------------------------|---|--|---|

### Table II - Derivative Securities Beneficially Owned ( e.g. , puts, calls, warrants, options, convertible securities)

|  |  |                 |   |                            |  |   |   |
|--|--|-----------------|---|----------------------------|--|---|---|
| 1. Title of Derivate Security (Instr. 4) | 2. Date Exercisable and Expiration Date (MM/DD/YYYY) |                 | 3. Title and Amount of Securities Underlying Derivative Security (Instr. 4) |                            | 4. Conversion or Exercise Price of Derivative Security | 5. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5) | 6. Nature of Indirect Beneficial Ownership (Instr. 5) |
|  | Date Exercisable                                     | Expiration Date | Title   | Amount or Number of Shares |  |   |   |

#### Explanation of Responses:

No securities are beneficially owned.

#### Reporting Owners

| Reporting Owner Name / Address                                       | Relationships |           |                                  |       |
|--|---------------|-----------|----------------------------------|-------|
|  | Director      | 10% Owner | Officer                          | Other |
| <b>WATSON LEONARD<br/>159 GLENVALE BLVD.<br/>TORONTO, A6 M4G 2W5</b> |               |           | <b>Chief Information Officer</b> |       |

#### Signatures

**Andrea Szanto, by power of attorney**

**9/7/2004**

\*\*Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

\* If the form is filed by more than one reporting person, see Instruction 5(b)(v).

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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