

PRIMO WATER CORP /CN/

Reported by **OKEEFFE EDMUND**

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 04/29/04 for the Period Ending 04/27/04

Address 4221 W. BOY SCOUT BLVD.

SUITE 400

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



[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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STATEMENT OF CHANGES IN 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 *	2. I	2. Issuer Name and Ticker or Trading Sy			ng Syml	ool		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
OKEEFFE EDMUND	CO	OTT C	ORP /C	N/ [C	OT]				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	10	0/ 0	
(Last) (First) (Middle)	3. I	3. Date of Earliest Transaction (MM/DD/YYYY)			X Officer (s	rive title beld		% Owner Other (speci	fy below)			
			4	/27/20	04			VP, Investor	•		Other (speed	ry ociow)
(Street)	4. I	If Amend	lment, Date	e Origin	al File	ed (MM/I	DD/YYYY	6. Individual	or Joint/G	roup Filing	(Check Appl	licable Line)
(City) (State) (Zip)								X Form filed by	oy One Repo More than O	orting Person One Reporting F	erson	
	- Non-Der	ivative S	Securities .	Acquire	ed, Di	sposed (of, or Be	eneficially Own	ed			
1.Title of Security (Instr. 3) 2. Trans.		2A. Deeme Execution Date, if any	(Instr. 8)	3. Trans. Code (Instr. 8)		or Disposed of (D)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) Instr. 3 and 4)			6. 7. Nature of Indirect Beneficial	
			Code	v	Amou	(A) o	r Price					Ownership (Instr. 4)
Table II - Derivative S	ecurities I	Beneficia	ılly Owned	l (e.g. ,	puts,	calls, w	arrants	, options, conve	rtible sec	eurities)		
Security Conversion of Exercise Price of Derivative Date Execution Date, if any		Acqu Disp		e Securities (A) or of (D)				Underlying Security	Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned	Ownership Form of Derivative Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)
Security	Code	v	(A) (D	Date Exerci	sable I	Expiration Date	Title	Amount or Number of Shares		Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	
Stock Options \$30.35 (1) 4/27/2004	A	15	000	<u>(2</u>	2) 4	1/27/2011	Commo Shares	n 15000	\$0	15000 (3)	D	

Explanation of Responses:

- (1) The Options were granted at an exercise price of Cdn\$41.14. The U.S. dollar price represents the conversion of (Cdn)\$41.14 to U.S. dollars on the date of grant.
- (2) The stock options were granted pursuant to the Cott Corporation 1986 Common Share Option Plan, as amended, and vest over a period of three years with 30% vesting on each of April 27, 2005 and April 27, 2006, and 40% vesting on April 27, 2007.
- (3) The number includes only those of the particular class of options.

Reporting Owners

Paparting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	ctor 10% Owner Officer		Other			
OKEEFFE EDMUND							
			VP, Investor Relations				

Signatures

Andrea Szanto, by power of attorney	4/29/2004	
** 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 4(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.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.