

PRIMO WATER CORP /CN/

Reported by **BENADIBA MARK**

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 04/28/04 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 *					Issuer Name and Ticker or Trading Symbol						bol		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
BENADIBA MARK (Last) (First) (Middle)				COTT CORP /CN/ [COT] 3. Date of Earliest Transaction (MM/DD/YYYY)						Y)	Director X Officer (s	,		% Owner Other (speci	fy below)	
25 PARKWOOD AVE					4/27/2004							EVP/Cott Int	tn'l and N	1exico		
(Street)					4. If Amendment, Date Original Filed (MM/DD/YYYY)						DD/YYYY)	6. Individual	6. Individual or Joint/Group Filing (Check Applicable Line)			
TORONTO, A6 M4V 2W9 (City) (State) (Zip)													X Form filed by One Reporting Person Form filed by More than One Reporting Person			
			Table I	- Non-I) eriva	ntive Secu	ırities A	cquir	ed, D	isposed	of, or Be	eneficially Own	ed			
1.Title of Security (Instr. 3) 2. Trans. I			2. Trans. Da			3. Trans. Code (Instr. 8)		or Di	sposed of (I : 3, 4 and 5) (A) of	D)) or	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) [Instr. 3 and 4)		lly Owned	Form: Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
	Tab	ole II - Der	ivative S	Securitie	es Ben	neficially	Code Owned ((e.g. ,	Amo		1	, options, conve	ertible sec	urities)	4)	
Security (Instr. 3)	2. Conversion or Exercise Price of Derivative	3. Trans. Date	3A. Deem Execution Date, if ar	(Instr.	ns. Cod 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			6. Date Exercisable and Expiration Date			Underlying Security		9. Number of derivative Securities Beneficially Owned	Ownership Form of Derivative Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Security			Cod	e V	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amount or Number of Shares		Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	
Stock Option	\$30.35 (1)	4/27/2004		A		50000		(2)	4/27/2011	Commo Shares	n 50000	\$0	50000 (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

Reporting Owners									
Paparting Owner Name / Address	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
BENADIBA MARK									
25 PARKWOOD AVE			EVP/Cott Intn'l and Mexico						
TORONTO, A6 M4V 2W9									

Signatures

Andrea Szanto, by power of attorney	4/28/2004		
** 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.