Gibbons Michael Form 4 November 30, 2010

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL OMB

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2005

Estimated average burden hours per response... 0.5

if no longer subject to Section 16. Form 4 or Form 5

obligations

may continue.

See Instruction

Check this box

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Instr. 3)

Common

Shares

11/29/2010

(Print or Type Responses)

1. Name and A Gibbons M	Address of Repo	rting Person *	2. Issuer Symbol COTT (5. Relat Issuer						
(Last)	(First)	(Middle)	3. Date of (Month/D	f Earliest Transaction Oay/Year)		Pirector	k all applicable 10%	Owner		
5519 W. IDLEWILD AVENUE (Street)			11/29/2	010	_X_ C below)	_X_ Officer (give title Other below) below) General Manager - U.S.				
			4. If Ame	ndment, Date Original	6. Indiv	6. Individual or Joint/Group Filing(Check				
			Filed(Mor	nth/Day/Year)	_X_ For	Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting				
TAMPA, F	L 33634				Person	n filed by M	iore than One Re	porting		
(City)	(State)	(Zip)	Tabl	e I - Non-Derivative Securities	Acquired, D	isposed of	, or Beneficial	ly Owned		
1.Title of		Date 2A. De		3. 4. Securities Acqui			6. Ownership			
Security	(Month/Day/)	(ear) Executi	ion Date, if	Transaction(A) or Disposed of	(D) Securit	ies	Form: Direct	Indirect		

(Instr. 3, 4 and 5)

24,416 D

(A)

(D)

Price \$

8.41

(1)

Code

S

(Instr. 8)

Code V Amount

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

(Month/Day/Year)

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

Beneficially

Following

Reported

99,462

Transaction(s) (Instr. 3 and 4)

Owned

(D) or

D

Indirect (I)

(Instr. 4)

Beneficial

Ownership

(Instr. 4)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
	·				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						`
					4, and 5)						
									Amount		
						Date	Expiration		or		
						Exercisable	Date	Title N	Number		
						Lacroisdoic	Dute		of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Gibbons Michael			General				
5519 W. IDLEWILD AVENUE			Manager -				
TAMPA, FL 33634			U.S.				

Signatures

/s/ Marni Morgan Poe, Attorney-in-Fact

**Signature of Reporting Person Date

Explanation of Responses:

- * 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).

The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$8.40 to \$8.42, inclusive. The reporting person undertakes to provide to Cott Corporation, any security holder of Cott Corporation, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in Footnote (1) to this Form 4.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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