



**State of Rhode Island and Providence Plantations
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Foreign Business Corporation
Annual Report**

Filing Period: January 1 - March 1

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2011

1. Corporate ID No. 000138815

2. Name of Corporation Cott Beverages Inc.

3. Street Address Principal Business Office:

No. and Street: 5519 W. IDLEWILD AVENUE

City or Town: TAMPA

State: FL

Zip: 33634

Country: USA

4. Business Phone No.

813-313-1800

5. State of Incorporation

State: GA

6. Brief Description of the Character of Business Conducted in Rhode Island

Manufacture, distribution and sale of non-alcoholic beverages

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
TREASURER	MICHAEL ZIMMERMAN	5519 W. IDLEWILD AVE TAMPA, FL 33634 USA
SECRETARY	MARNI MORGAN POE	5519 W. IDLEWILD AVE TAMPA, FL 33634 USA
CEO	JERRY FOWDEN	5519 W. IDLEWILD AVENUE TAMPA, FL 33634 US
CFO	NEAL CRAVENS	5519 W. IDLEWILD AVE TAMPA, FL 33634 USA
VICE PRESIDENT	MICHAEL CREAMER	5519 W. IDLEWILD AVE TAMPA, FL 33634 USA
VICE PRESIDENT	GREGORY LEITER	5519 W. IDLEWILD AVE TAMPA, FL 33634 USA
VICE PRESIDENT	WILLIAM REIS	5519 W. IDLEWILD AVE TAMPA, FL 33634 USA
ASSISTANT SECRETARY	GREGORY LEITER	5519 W. IDLEWILD AVE TAMPA, FL 33634 USA
DIRECTOR	JERRY FOWDEN	5519 W. IDLEWILD TAMPA, FL 33634 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CNP		\$0.00	1,000,000.00	998135

9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

Signed this 21 Day of February, 2011 at 11:07:54 AM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By MEGAN TUCKER
Signature of Authorized Representative of the Corporation

AUTHORIZED AGENT
Title

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in section 7.

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