

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2007 8:00 am
Secretary of State

02-02-2007 90005 038 ***158.75

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1. Entity Name
COTT BEVERAGES INC.



Principal Place of Business
**4211 W BOY SCOUT BLVD
290
TAMPA, FL 33607**

Mailing Address
**4211 W BOY SCOUT BLVD
290
TAMPA, FL 33607**

40008555



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01102007 Chg-P CR2E034 (12/06)

City & State

City & State

4. FEI Number

58-1947565

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VP
NAME O'KEEFFE, EDMUND
STREET ADDRESS 207 QUEENS QUAY W, #340
CITY-STATE-ZIP TORONTO, ONT., CANADA, ☐ Delete

TITLE PRESIDENT / CEO
NAME BRENT WILLIS
STREET ADDRESS 4211 W. BOYSCOUT BLVD, SUITE 290
CITY-STATE-ZIP TAMPA, FL 33607 ☐ Change ☒ Addition

TITLE CEO
NAME SHEPPARD, JOHN
STREET ADDRESS 4211 W BOY SCOUT BLVD
CITY-STATE-ZIP TAMPA, FL 33607 ☒ Delete

TITLE DIRECTOR
NAME TINA DELL'AQUILA
STREET ADDRESS 4211 W. BOYSCOUT BLVD, SUITE 290
CITY-STATE-ZIP TAMPA FL 33607 ☐ Change ☒ Addition

TITLE VPSD
NAME HALPERIN, MARK
STREET ADDRESS 207 QUEENS QUAY W, #340
CITY-STATE-ZIP TORONTO, ONTARIO CANADA, ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ Change ☐ Addition

TITLE VD
NAME DENNEHY, JOHN
STREET ADDRESS 4211 W. BOYSCOTT BLVD SUITE 290
CITY-STATE-ZIP TAMPA, FL 33607 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ Change ☐ Addition

TITLE S
NAME KANE, MATTHEW A JR, ESQ
STREET ADDRESS 4211 W BOYSCOUT BLVD #290
CITY-STATE-ZIP TAMPA, FL 33607 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ Change ☐ Addition

TITLE VPT
NAME BRENNAN, CATHERINE
STREET ADDRESS 207 QUEENS QUAY W, #340
CITY-STATE-ZIP TORONTO ONTARIO, CA m5jia7 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Matthew A. Kane, Jr. Assistant Secretary

1/18/07 (913) 313-1728