FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
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| | | |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* <u>LOGAN BARRY S</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol WATSCO INC [WSO; WSOB] | | | | | | | | heck all ap Dire | applicable) Director | | g Person(s) to Issuer 10% Owner | | |
|---|---|-----------------------------|---|--------------------|---|--|------------------------------------|------------|--|---------------|--------------------|--|--------------------------------------|---|--|--|--|-----------------------------------|--|
| (Last) 2665 SO SUITE 9 | UTH BAYS | irst) SHORE DRIVE | (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 12/08/2009 | | | | | | | | | Officer (give title Other (special below) Senior Vice President | | | | |
| (Street) COCON GROVE (City) | FI | | 33133 (Zip) | | 4. | If Ame | ndme | nt, Date o | of Original Filed (Month/Day/Year) | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) | (5 | | | n-Deri | vativ | e Se | curit | ties Ac | auired | Dis | sposed o | f. or Be | neficia | IIv Own | -d | | | | |
| 1. Title of Security (Instr. 3) 2. Transport | | 2. Trans Date (Month/ | action | 2/ E: ar) if | 2A. Deemed Execution Date, | | 3. 4. Transaction D Code (Instr. 5 | | 4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4, 5) | | | 5. Amo Securit Benefic | unt of ies cially Following | Form: | nership Direct Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | | | Code | v | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) | | | |
| Common | Stock | | | | | | | | | | | | | | 450 | | I | By IRA | |
| Common | Stock | | | | | | | | | | | | | 2 | ,118 | | I | See footnote ⁽¹⁾ | |
| Common | Common Stock | | | | | | | | | | | | 108,750 | | D ⁽²⁾ | | | | |
| Class B Common Stock | | | | | | | | | | | | | 7 | 0,000 | I |) ⁽²⁾ | | | |
| Common Stock | | | | | | | | | | | | 4 | 1,355 | | D | | | | |
| Class B Common Stock 12 | | | 12/08 | 3/2009 | | | | F | | 6,879 | D | \$51.2 | 24 7 | 7,078 | | D | | | |
| Class B Common Stock 12/0 | | | 12/08 | 8/2009 | 2009 | | M | | 17,898 | A | \$11. | 3 1 | 17,898 | | D | | | | |
| | | - | Table II - | | | | | | , | • | osed of, | | | y Owned | I | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | | 3A. Deemed Execution Date, if any (Month/Day/Year) | | 4. Transaction Code (Instr. 8) | | 5. Number of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | sable and | 7. Title and Amof Securities Underlying Derivative Secu (Instr. 3 and 4) | | Derivativ Security | | ive ies cially ng ed ction(s) | 10. Ownersh Form: Direct (D) or Indirec (I) (Instr. | Beneficial Ownership t (Instr. 4) | |
| | | | | | Code | e V | (A) | (D) | Date Exercisa | | Expiration Date | Title | Amoun or Numbe of Shares | 1 | | | | | |
| Stock Option (right to buy) | \$11.3 | 12/08/2009 | | | M | | | 25,000 | 12/31/20 | 05 | 09/24/2011 | Class B Common Stock | 25,000 | \$11.3 | |) | D | | |

Explanation of Responses:

- 1. Ownership in Watsco, Inc. Profit Sharing Retirement Plan and Trust
- 2. Award of stock pursuant to Restricted Stock Agreement

/s/ Barry S. Logan

12/10/2009

** 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 Number.