FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response... 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

(Print or Type	e Responses	s)	,															
1. Name and Address of Reporting Person * BUNKA CHRISTOPHER				2. Issuer Name and Ticker or Trading Symbol LEXARIA CORP. [LXRP]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director _X_ 10% Owner						
(Last) (First) (Middle) 5774 DEADPINE DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 11/01/2010							X_ Officer (give title below) Other (specify below) Chairman/CEO/President							
KELOW	NA, A1 V	(Street)		4. If An	nendı	ment, D	ate	Original File	d(Month	/Day/Yea	r)		6. Individual or _X_Form filed by 0 Form filed by N	One Reporting I		••	ine)	
(City		(State)	(Zip)				Ta	able I - Non-	Deriva	tive Se	curi	ities Acqui	red, Disposed	of, or Benef	ficially Own	ed		
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution D any (Month/Day		Date, if	Co (In	Transaction ode str. 8)	on 4. Securities Accor Disposed of ((Instr. 3, 4 and 5		of (l	D)				6. Ownership Form: Direct (D)	of In Ben	7. Nature of Indirect Beneficial Ownership	
								Code V	Amo		.) or D)	Price				or Indirect (I) (Instr. 4)	(Ins	str. 4)
Common Shares 11/01/2010			11/01/2010	I		P	15,0	00 A		\$ 0.1973	1,226,986		D					
Common Shares 11/04/2010			11/04/2010	Р			P	3,50	0 A		\$ 0.27	1,230,486			D			
Common Shares 11/05/2010					P	5,00	0 A		\$ 0.27	1,235,486		D						
Common	Shares		11/05/2010				P	5,00	0 A		\$ 0.34	1,240,486		D				
Common	Shares												2,468,521			I (1)	Но	vate olding ompany
1. Title of	2.		3A. Deemed	(e.g., p	outs,	calls, w	varr	6. Date Exe	s, conv	ertible		7. Title an	d Amount of					
1. Title of Derivative Conversion Date 3A. Deemed Execution Date, if 1			(e.g., puts, calls, warrants, op4.5.6. DateTransactionNumberExpiraCodeof(Month			Acquired, Dants, options 6. Date Exe Expiration 1	in this form are not required a currently valid OMB control ed, Disposed of, or Beneficially tions, convertible securities) Exercisable and 7. Title and 1.			Owned and Amount of ag Securities B. Price of perivative Derivative Derivative			f 10. Ownership Form of Derivative		11. Natur			
	Security					Acquir (A) or Dispos of (D) (Instr. 4, and	sed	ed e					Following Reported Transaction((Instr. 4)	Direct or Indi (I) (Instr.	rect			
				Code	V	(A)	(D)	Date Exercisable		piration te		Title	Amount or Number of Shares					
Warrants	\$ 0.2096							12/24/200)9 12	/24/20	010	Commo Shares	1 100 000		100,000) I (1)	Private Holding Compar
Warrants	\$ 0.20							07/10/200	09 07	/10/20	11	Commo Shares			1,600,00	0 I (1)	Private Holding Compa
Stock Options	\$ 0.20 (2)							04/26/200	04	/26/20)11	Commo	1 10000000		100,000	D		
Stock Options	\$ 0.20 (3)							03/04/200	09 07	/20/20	11	Commo			100,000) D		
Stock Options	\$ 0.20							07/08/200	09 07	/20/20	11	Commo			18,750	D		
Stock Options	\$ 0.20							01/20/201	10 01	/20/20	15	Commo	500,000		500,000	D		

Reporting Owners

	Relationships
Reporting Owner Name /	

Address	Director	10% Owner	Officer	Other
BUNKA CHRISTOPHER 5774 DEADPINE DRIVE KELOWNA, A1 V1P1A3	X	X	Chairman/CEO/President	

Signatures

Christopher Bunka	11/05/2010
***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).
- (1) Chris Bunka is the sole owner of CAB Financial Services Ltd.
- (2) On July 8, 2009, the exercise price was reduced from \$0.80.
- (3) On July 8, 2009, the exercise price was changed from \$0.12.

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.