



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

Fee: \$20.00

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

**Foreign Non-Profit  
Annual Report**

Filing Period: June 1 - June 30

In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

**ANNUAL REPORT YEAR:** 2013

**1. Corporate ID No.** 000646202

**2. Name of Corporation** The Cortes Foundation

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 6 OCEAN AVE  
City or Town: JAMESTOWN State: RI Zip: 02835 Country: USA

**5. Foreign Corporation. Enter Principal Office Address**

No. and Street: PO BOX 16871  
City or Town: SAN JUAN State: PR Zip: 00907 Country:

**6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island**

SUPPORTS PROGRAMS IN PUERTO RICO FOR UNDERPRIVILEGED FAMILIES AND IN TEXAS FOR AN HIV RESIDENCE PROGRAM. SUPPORT IN FOR VICTIMS IN HAITI AND RELATED FUNDRAISING IN THE CONTINENTAL NORTHEAST

**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
PRESIDENT	GREG CORTES	4111 BUCKINGHAM PLACE COLLEYVILLE, TX 76034 USA
SECRETARY	LINDA NILSSON	6 OCEAN AVE JAMESTOWN, RI 02835 USA
DIRECTOR	JASON HOLDER BENNETT	350 E. VISTA RIDGE MALL DR., #221 LEWISVILLE, TX 75067 USA

DIRECTOR	JOHN DOUGLAS CORTES	4111 BUCKINGHAM PL COLLEYVILLE, TX 76034 USA
DIRECTOR	FREDERICO GORDO	3518 AVE. SUR APT. 10-31 CAROLINA, PR 00987 USA

**8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER  
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

LINDA NILSSON 6 OCEAN AVENUE JAMESTOWN , RI 02835

**9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver, or Trustee.**

**Signed this 12 Day of July, 2013 at 9:09:33 PM.** *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 LINDA R NILSSON  
Signature of Officer of the Corporation

President or  Vice President or  Secretary or  Assistant Secretary or  
 Treasurer or  Receiver or  Trustee (check one)

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

Form No. 631  
Revised 09/07

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