



**State of Rhode Island
Office of the Secretary of State**

No Fee

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

**Foreign Non-Profit
Annual Report - Amended**

Filing Period: February 1 - May 1

In accordance with R.I.G.L. 7-1.2-1501(e), 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.

This form is only to be used to amend the current annual report on file with this office.

ANNUAL REPORT YEAR: 2025

1. Corporate ID No. 001766657

2. Name of Corporation Lowell Community Loan Fund Inc.

3. State of Incorporation

State: MA

NAICS CODE

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification [click here](#).

NAICS Code

522298

4. Corporate Address in Rhode Island

No. and Street: 50 ISLAND ST.
SUITE 103

City or Town: LAWRENCE State: MA Zip: 01840 Country: USA

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

THE PURPOSE OF THE CORPORATION INCLUDES BUT IS NOT LIMITED TO
ADVANCING

COMMUNITY REVITALIZATION, DEVELOPMENT, AND EMPLOYMENT
OPPORTUNITIES IN LOW-

INCOME COMMUNITIES AND ELIMINATING PREJUDICE AND DISCRIMINATION

BY, AMONG
OTHER MEANS, FOSTERING THE GROWTH OF SMALL BUSINESSES, INCLUDING
THOSE
OWNED OR OPERATED BY WOMEN AND MINORITIES, PARTICULARLY BLACKS
AND LATINX:
MITIGATING GROWING WEALTH AND INCOME INEQUALITY, AND REMOVING
STRUCTURAL
BARRIERS TO RACIAL ECONOMIC EQUITY, THROUGH THE FOLLOWING
ACTIVITIES, AMONG
OTHERS:

ASSISTING, INCLUDING PROVIDING LOANS TO, LOW- AND MODERATE-INCOME
PERSONS
AND FAMILIES AND COMMUNITY ORGANIZATIONS TO DEVELOP, ACQUIRE,
IMPROVE,
OPERATE, RENOVATE, AND/OR REFURBISH HOUSING.

ENCOURAGING AND SUPPORTING THE STARTUP AND EXPANSION OF SMALL
BUSINESSES,
INCLUDING BUT NOT LIMITED TO PROVIDING EXTENSIVE TECHNICAL
ASSISTANCE SUCH
AS EDUCATIONAL PROGRAMS, TRAINING, STRATEGIC ADVICE AND MENTORING,
OPERATIONAL SUPPORT IN AREAS SUCH AS MARKETING, WEBSITE
DEVELOPMENT, AND
TECHNOLOGY, NETWORKING OPPORTUNITIES TO FOSTER ACCESS TO CAPITAL
AND
MARKETS; AND PROMOTING SUPPLIER DIVERSITY.

INVESTING IN AND LENDING TO SMALL BUSINESSES IN LOW-INCOME
COMMUNITIES AND
OWNED OR OPERATED BY WOMEN AND MINORITIES, WITH A FOCUS ON BUT NOT
LIMITED
TO BUSINESSES OWNED OR OPERATED BY BLACKS AND LATINX.

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	MALIA LAZU	5 AKRON ST. BOSTON, MA 02119 USA
TREASURER	LISA KOZOL	95 S. BRADFORD ST. NORTH ANDOVER, MA 01845 USA
CLERK	ABEL VARGAS	610 HAVERHILL ST. LAWRENCE , MA 01841 USA

DIRECTOR	NANCY STAGER	42 AUTUMN LANE READING , MA 01867 USA
DIRECTOR	ABBOTT LAWRENCE	18 ALDWORTH ST. JAMAICA PLAIN , MA 02130 USA
DIRECTOR	QUINCY MILLER	265 FRANKLIN ST. BOSTON, MA 02110 USA
DIRECTOR	MATTHEW HANSON	52 FISHRE AVE. BOSTON , MA 02120 USA
DIRECTOR	MICHELE WITTS	77 WAGON WHEEL ROAD DRACUT, MA 01850 USA
DIRECTOR	ORLANDO WATKINS	1038 BEACON ST. #203 BROOKLINE , MA 02446 USA
DIRECTOR	DAN RIVERA	517 MOODY ST LOWELL, MA 01840 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

LISA M. KRESGE 362 BROADWAY PROVIDENCE , RI 02909

Signed this 11 Day of July, 2025 at 11:22:24 AM by the authorized person. *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 company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

By FREINY PENA
Signature of Authorized Person

Form No. 631
Revised 09/07

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State of Rhode Island

Department of State | Office of the Secretary of State

Gregg M. Amore, *Secretary of State*

I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,
hereby certify that this document, duly executed in accordance with the provisions
of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this

office on this day:

July 11, 2025 11:21 AM

A handwritten signature in black ink, reading "Gregg M. Amore".

Gregg M. Amore
Secretary of State

