2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F04000002746

1. Entity Name SUN QRS POOL 4, INC.

Principal Place of Business



Mailing Address

27777 FRANKLIN ROAD, SUITE 200 SOUTHFIELD, MI 46034 27777 FRANKLIN ROAD, SUITE 200 SOUTHFIELD, MI 46034

FILED May 01, 2006 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

5. Name and Address of Current Registered Agent

NRAI SERVICES, INC. 2731 EXECUTIVE PARK DR, SUITE 4 WESTON, FL 33331

DO NOT WRITE IN THIS SPACE

	a named entity submits this statement for the pritions of registered agent.	urpose of changing its registered off	ice or r	agistered agent, or bo	oth, in the State of Florida. I am lamiliar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title if	applicable (NOTE, Registered Agent	s/gnaturi	required when reinstating)	OATE
	E NOWIII FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			
The Mame Street adoress City-St-Zip	CCEO SHIFFMAN, GARY A 27777 FRANKLIN ROAD, SUITE 200 SOUTHFIELD, MI 46034			٠	U00000555773 US/16/06-90045-019 150.00
THE NAME STREET ADDRESS CITY-ST-ZIP	EVPC JORISSEN, JEFFREY P 27777 FRANKLIN ROAD, SUITE 200 SOUTHFIELD, MI 46034				- .
TITLE NAME STREET ADDRESS CITY-ST-21P	EVPC FANNON, BRIAN W 27777 FRANKLIN ROAD, SUITE 200 SOUTHFIELD, MI 46034	• ••		DO	NOT WRITE
NRLE NAME STREET ADDRESS CITY-ST-ZIP	EVP COLMAN, JONATHAN 27777 FRANKLIN ROAD, SUITE 200 SOUTHFIELD, MI 46034	- 1		IN '	THIS SPACE
THEE NAME STREET ADDRESS CITY-ST-ZIP	D LEWS, CLUNET R 27777 FRANKLIN ROAD, SUITE 200 SOUTHFIELD, MI 46034				
TISLE NAME STREET ADDRESS CITY-ST-ZIP	D WEISS, ARTHUR A 27777 FRANKLIN ROAD, SUITE 200 SOUTHFIELD. MI 46034				

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 118, 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	S	GI	N/	١T	U	R	E
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JEFFREY

AURE AND TYPED OR PRINTED NAME OF STONING OFFICER OR ORRECTOR

JORISSEN

4/24/06

Daysme Phone #