

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F04000002746

**Entity Name:** SUN QRS POOL 4, INC.

**Current Principal Place of Business:**

27777 FRANKLIN ROAD, SUITE 200  
SOUTHFIELD, MI 46034

**Current Mailing Address:**

27777 FRANKLIN ROAD, SUITE 200  
SOUTHFIELD, MI 46034

**FEI Number:** 20-1142548

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title CEO  
Name SHIFFMAN, GARY A  
Address 27777 FRANKLIN ROAD, SUITE 200  
City-State-Zip: SOUTHFIELD MI 46034

Title CFO  
Name DEARING, KAREN J  
Address 27777 FRANKLIN ROAD, SUITE 200  
City-State-Zip: SOUTHFIELD MI 46034

Title COO  
Name MCLAREN, JOHN B  
Address 27777 FRANKLIN ROAD, SUITE 200  
City-State-Zip: SOUTHFIELD MI 46034

Title EVP  
Name COLMAN, JONATHAN  
Address 27777 FRANKLIN ROAD, SUITE 200  
City-State-Zip: SOUTHFIELD MI 46034

Title D  
Name LEWIS, CLUNET R  
Address 27777 FRANKLIN ROAD, SUITE 200  
City-State-Zip: SOUTHFIELD MI 46034

Title D  
Name WEISS, ARTHUR A  
Address 27777 FRANKLIN ROAD, SUITE 200  
City-State-Zip: SOUTHFIELD MI 46034

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** KAREN J DEARING

**CFO**

**04/28/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date