

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000002773

Entity Name: SUN QRS POOL 9, INC.**Current Principal Place of Business:**27777 FRANKLIN RD, STE 200
SOUTHFIELD, MI 48034**Current Mailing Address:**27777 FRANKLIN RD, STE 200
SOUTHFIELD, MI 48034**FEI Number:** 20-1142662**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 RD, STE 200
City-State-Zip:	SOUTHFIELD MI 48034

Title	D
Name	LEWIS, CLUNET R
Address	27777 FRANKLIN RD, STE 200
City-State-Zip:	SOUTHFIELD MI 48034

Title	COO
Name	MCLAREN, JOHN B
Address	27777 FRANKLIN RD, STE 200
City-State-Zip:	SOUTHFIELD MI 48034

Title	CFO
Name	DEARING, KAREN J
Address	27777 FRANKLIN RD, STE 200
City-State-Zip:	SOUTHFIELD MI 48034

Title	D
Name	WEISS, ARTHUR A
Address	27777 FRANKLIN RD, STE 200
City-State-Zip:	SOUTHFIELD MI 48034

Title	EVP
Name	COLMAN, JONATHAN M
Address	27777 FRANKLIN RD, STE 200
City-State-Zip:	SOUTHFIELD MI 48034

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 DEARING

CFO

04/29/2014

Electronic Signature of Signing Officer/Director Detail_____
Date