2006 FOR PROFIT CORPORATION ANNUAL REPORT

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

DOCUMENT # F04000002712

1. Entity Name
SUN QRS POOL 2, INC.

Principal Place of Business	Mailing Address
27777 FRANKLIN ROAD SUITE 200 SOUTHFIELD, MI 48034	27777 FRANKLIN ROAD SUITE 200 SOUTHFIELD, MI 48034

DO NOT WRITE IN THIS SPACE

03102006 No Chg-P CR2E034 (11/05)

4. FEI Number
20-1142481

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

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

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	CD
NAME	SHIFFMAN, GARY A
STREET ADDRESS	27777 FRANKLIN ROAD
CITY-ST-ZIP	SOUTHFIELD, MI 48034
TITLE	D
NAME	LEWIS, CLUNET R
STREET ADDRESS	27777 FRANKLIN ROAD
CITY-ST-ZIP	SOUTHFIELD, MI 48034
TITLE	D
NAME	WEISS, ARTHUR A
STREET ADDRESS	27777 FRANKLIN ROAD
CITY-ST-ZIP	SOUTHFIELD, MI 48034
TITLE	EVTS
NAME	JORISSEN, JEFFREY P
STREET ADDRESS	27777 FRANKLIN ROAD
CITY-ST-ZIP	SOUTHFIELD, MI 48034
TITLE	E
NAME	FANNON, BRIAN W
STREET ADDRESS	27777 FRANKLIN ROAD
CITY-ST-ZIP	SOUTHFIELD, MI 48034
TITLE	EV
NAME	COLMAN, JONATHAN
STREET ADDRESS	27777 FRANKLIN ROAD
CITY-ST-ZIP	SOUTHFIELD, MI 48034

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05/16/06-80045-020 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: JEFFREY P. JORISSEN 4/24/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #