SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

Schedule 13G

UNDER THE SECURITIES EXCHANGE ACT OF 1934 (Amendment No. 1)*

Full House Resorts Inc. (Name of Issuer)

Common Stock (Title of Class of Securities)

> 359678109 (CUSIP Number)

Check the following space if a fee is being paid with this statement (). (A fee is not required only if the filing person: (1) has a previous statement on file reporting beneficial ownership of more than five percent of the class of securities described in Item 1; and (2) has filed no amendment subsequent thereto reporting beneficial ownership of five percent or less of such class.) (See Rule 13d-7.)

*The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter the discloures provided in a prior cover page.

The information required in the remainder of this cover page shall not be deemed to be "filed" for the purpose of Section 18 of the Securities Exchange Act of 1934 ("Act") or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes).

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	CUSIP NO.	359678109					
1	NAME OF REPORTING PERSON S.S. OR I.R.S. IDENTIFICA Comerica Ban	CION NO. OF THE ABOVE PERSON 38-0477375					
2	CHECK THE APPROPRIATE LET	ER IF A MEMBER OF A GROUP (a)					
3	SEC USE ONLY	(d)					
4	CITIZENSHIP OR PLACE OF O	GANIZATION					

NUMBER O)F 5	5	SOLE VO	OTIN	IG POWE	ER			
SHARES					0				
BENEFICIAL	'TA 6	5	SHARED	VOI	'ING PC	OWEF	2		
OWNED BY					0				
EACH	-	7	SOLE DI	ESPC	SITIVE	E PC	WER		
REPORTIN	IG				0				
PERSON	8	3	SHARED	DIS	POSITI	IVE	POWER	ર	
WITH					0				
AGGREGATE	AMOUNT	BEN	IEFICIAI	LLY	OWNED 0	BY	EACH	REPORTING	PERSON

10 CHECK THE SPACE BELOW IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES ()

ВK

- 11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9 0.00%
- 12 TYPE OF REPORTING

9

<PAGE 3> SCHEDULE 13G Under the Securities Exchange Act of 1934 Check the following space if a fee is being paid with this statement: () Item 1(a) Name of Issuer: Full House Resorts Inc. Item 1(b) Address of Issuer's Principal Executive Offices: P.O. Box 643 Deadwood, SD 57732 Item 2(a) Name of Person Filing: Comerica Bank Item 2(b) Address of Principal Business Officer or, if none, Residence: One Detroit Center Detroit, MI 48275 Item 2(c) Citizenship: Michigan Banking Corporation Item 2(d) Title of Class of Securities: Common Stock 359678109 Item 2(e) Cusip Number: This statement is filed in pursant to Rules 13d-1(b), or Item 3 13d-2(b). The person filing is a Bank as defined in section 3(a)(6) of the Act. Item 4 Ownership: (a) Amount Beneficially Owned: 0 0.00% (b) Percent of Class: (c) Number of shares as to which such person has:

(c) Number of shares as to which such person has:
(i) sole power to vote or direct the vote:
(ii) shared power to vote or direct the vote:
(iii) sole power to dispose or direct the disposition of:

Item 5 Ownership of Five Percent or Less of a Class:

If this statement is being filed to report the fact that as of the date hereof the reporting person has ceased to be the beneficial owner of more than five percent of the class of securities, check the following: ($\rm X$)

- Item 6 Ownership of More than Five Percent on Behalf of Another Person:
- Item 7 Identification and Classification of the Subsidiary Which Acquired the Security being Reported on by the Parent Holding Co:

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Item 8 Identification and Classification of Members of the Group:

Item 9 Notice of Dissolution of Group:

Item 10 Certification:

By signing below I certify that, to the best of my knowledge and belief, the securities referred to above were acquired in the ordinary course of business and were not acquired for the purpose of and do not have the effect of changing or influencing the control of the issuer of such securities and were not acquired in connection with or as a participant of any transaction having such purposes or effect.

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

******** Date

Comerica Bank

By: Ronald Fedoronko Assistant Vice President