UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response...

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Print or Ty	pe Responses	s)																
1. Name and Address of Reporting Person * VIOLETTE GREG					2. Issuer Name and Ticker or Trading Symbol FULL HOUSE RESORTS INC [FLL AMEX]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) 4670 SOUTH FORT APACHE ROAD, SUITE 190				3. Date of Earliest Transaction (Month/Day/Year) 05/31/2006									X Office	Exec.	v.P of Deve	Other (specify lopment	pelow)	
(Street)					4. If Amendment, Date Original Filed(Month/Day/Year)								6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
LAS VEGAS, NV 89147 (City) (State) (Zip)																		
		· ′				Ta			1			<u> </u>			Beneficially			
1.Title of Security (Instr. 3)			Transaction te onth/Day/Year)	Exect	A. Deemed Execution Date, if any Month/Day/Year		(Instr. 8)		(A) or Disposed of (D) (Instr. 3, 4 and 5)			D) [1	Beneficially Owned Following Reported Transaction(s)			Ownership Form:	Beneficial	
				(Mon			Code	V	Amour		(A) or (D) P		(Instr. 3 and 4)			Ownership (Instr. 4)		
Common	Stock	05	/31/2006				A		275,00		_		282,500)		D		
			_			, wa	arrants, op		-	-	curiti	ies)						
	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year	3A. Deemed Execution Da	(e.g., p	g., puts, calls, wa 4. c, if Transaction Code ear) (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed	6. E	and Expiration Date (Month/Day/Year) Ar Ur Se			ies) 7. Titl Amou Under Secur (Instr.	itle and ount of berivative Security (Instr. 5)		Securities Beneficially Owned Following Reported Transaction(Ownersh Form of Derivativ Security: Direct (D or Indirects) (I)	O) ct	
							of (D) (Instr. 3, 4, and 5)								(Instr. 4)	(Instr. 4)	
					Code	V	(A) (D)	Date Exe	e rcisable	Expira Date	tion 7	Title	Amount or Number of Shares					
Repor	ting O	wners																
						R	elationshij	os										
Reporting Owner Name / Address				10%	10% Officer Other													

Signatures

SUITE 190

VIOLETTE GREG

LAS VEGAS, NV 89147

/s/ Greg Violette	06/30/2006
**Signature of Reporting Person	Date

4670 SOUTH FORT APACHE ROAD

Director

Owner

Officer

Exec. V.P of Development

Other

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. *See* 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.