## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C	C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	VAL
	OMB Number:	3235-0287
l	Estimated average burde	en
l	hours per response:	0.5

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

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

1. Name and Address of Reporting Person* <u>LUECHTEFELD MONICA</u>						2. Issuer Name and Ticker or Trading Symbol OFFICE DEPOT INC [ ODP ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  V Officer (give title Other (specify						
(Last) (First) (Middle) 2200 OLD GERMANTOWN ROAD MAIL CODE: LEGL						3. Date of Earliest Transaction (Month/Day/Year) 10/05/2006										X Office (give title Office (specify below) below)  EVP-Business Development & IT					
(Street) DELRAY BEACH	Y FI	. :	33445		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	Individual or Joint/Group Filing (Check Applicable le)  X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(St	ate) (	(Zip)																		
1 Tido of 6	Saarriibe (laas		le I - Noi	1-Deriv		_			quired,	Dis	<u>.                                      </u>	-			y Owned		6.00	nership :	7. Nature		
Date				Date			2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				Securiti Benefici Owned	es ally Following	Form	: Direct r Indirect str. 4)	of Indirect Beneficial Ownership		
									Code	v	Amount	Amount (A) or (D)		Price	Reporte Transac (Instr. 3	tion(s)		[	(Instr. 4)		
Common Stock				10/05	05/2006				М		1,000	) [	1	\$6.72	96	,325		D			
Common Stock 10/				10/05	/2006				S <sup>(1)</sup>		1,000	) [		\$40.4	5 95	95,325		D			
Common Stock 10/06/2					5/200 <del>6</del>	/2006		М		1,000 A		1	\$6.72	96	96,325		D				
Common Stock 10/06/2				/2006		S <sup>(1)</sup>		1,000 D			\$40.9	6 95,	95,325(2)		D						
		Т	able II -								osed of converti				Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transaction Code (Instr 8)		n of		6. Date Exercisa Expiration Date (Month/Day/Yea			7. Title and Amount of Securities Underlying Derivative Sect (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	e s illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	or Nu of	umber							
Option (Right to Buy)	\$6.72	10/05/2006			M			1,000	08/03/20	01 0	8/03/2010	Commo Stock	1	,000	\$0	17,000		D			
Option (Right to Buy)	\$6.72	10/06/2006			M			1,000	08/03/20	01 (	08/03/2010	Commo Stock	1	,000	\$0	16,000		D			

## **Explanation of Responses:**

- 1. Sales were effected pursuant to instructions from a 10b5-1 Sales Plan entered into on 5/16/2006 between reporting person and financial advisor.
- 2. Beneficial holdings on Table I is updated to include 3633 total shares in the Employee Stock Purchase Plan; and 3150 total shares under a Deferred Compensation Plan as of 10/02/2006.

## Remarks:

By: Anne Zuckerman, 10/09/2006 Attorney-in-Fact for:

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- \* 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.

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