FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| ı | OIVID APPROVAL | | | | | | | | |
|---|-------------------------|-----------|--|--|--|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | | | | |
| l | Estimated average burde | en | | | | | | | |
| ı | 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>CAMPBELL CYNTHIA H</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% Owne | | | | |
|--|--|------------|--|------------------------------|--|---|-------------------|---|--------------------|---|---|---|--|-----------------------------------|--|---------------------------------------|
| (Last) | (First) (Middle) | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/18/2004 | | | | | | X Officer (give title below) Other (specify below) EVP - Sales | | | | |
| 2200 OLD GERMANTOWN ROAD MAIL CODE: LEGL | | | | | 55, 15, 2504 | | | | | | | | | | | |
| (Street) DELRA | 121 | L | 33445 | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | Line | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting | | | | |
| (City) | | tate) | (Zip) | - | | | | | | | | Person | | | | |
| | | Tal | ble I - Non-De | erivativ | ve Se | curitie | s Ad | quired, Di | sposed o | f, or Ber | eficiall | y Owned | | | | |
| Date | | | | ransactio e onth/Day/\ | Execution Date, | | Code (Instr. 5) | | | | 5. Amour Securitie Beneficia Owned F | es For ally (D) Following (I) (I | | Direct I Indirect E str. 4) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | Code V | Amount | (A) or (D) | Price | Transact (Instr. 3 a | ion(s) | | | (Instr. 4) |
| | | | Table II - Der (e.g | | | | | uired, Disp s, options, | | | | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Yea | | 3A. Deemed Execution Date, if any (Month/Day/Year | Code (Instr | | | | 6. Date Exerci Expiration Dat (Month/Day/Ye | e | nd 7. Title and Am of Securities Underlying Derivative Sec (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | ly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | | |
| Option (Right to Buy) | \$17.545 | 02/18/2004 | | A | | 18,750 | | (1) | 02/18/2011 | Common Stock | 18,750 | \$17.545 | 18,750 | | D | |
| Option (Right to Buy) | \$17.545 | 02/18/2004 | | A | | 40,000 | | 02/18/2005 ⁽²⁾ | 02/18/2014 | Common Stock | 40,000 | \$17.545 | 40,000 | | D | |

Explanation of Responses:

- 1. Vest on earlier achievement of stock price performance target of 25%-50% increase or 5 years from the date of the grant.
- 2. Each option is exercisable with respect to one-third of the shares on each annual anniversary of the date of the grant.

Remarks:

By: Brian Dan, Attorney-in-Fact for:

02/20/2004

** 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.