## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
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

Name and Address of Reporting Person*  MYERS MICHAEL J						2. Issuer Name and Ticker or Trading Symbol OFFICE DEPOT INC [ ODP ]								Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner					
(Last) 113 HER	(F	rirst) 'N LANE	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/17/2004									Officer below)	(give title Other (sp below)			pecify
Street) PRINCE	TON N	J	08540		4.	If Ame	endme	nt, Date o	f Original	Filed	(Month/Da	6. Indi Line) X	· /						
(City)	(S	itate)	(Zip)												1 013011				
		Tak	ole I - Noi	n-Deri	ivativ	e Se	curit	ties Acc	quired,	Dis	posed o	f, or Be	nefi	cially	Owned				
. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Y		Exe //Year) if ar		A. Deemed Execution Date, f any Month/Day/Year)	3. Transaction Code (Instr. 8)				ed (A) tr. 3, 4	or I and	5. Amount of Securities Beneficially Owned Follow Reported	es ally Following	Form:	Direct Indirect I	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)	Pr	ice	Transaction(s) (Instr. 3 and 4)				
Common	Stock			05/1	17/200	)4			M		16,875	5 A	\$	14.33	51,	644		D	
Common	Stock			05/1	17/200	)4			S		700	D	\$	16.06	50,	944		D	
Common Stock 05			05/1	17/200	)4			S		800	800 D		\$16.07 50		50,144		D		
Common Stock 05/1			17/200	)4			S		1,200 D		\$	\$16.08 48,94		944		D			
Common	Stock			05/1	17/200	)4			S		400	D	\$	16.09	48,	544		D	
Common Stock 0			05/17/2004					S		800 E		1	\$16.1 47,		7,744		D		
Common	Stock			05/1	17/200	)4			S		500	D	\$	16.11	47,	244		D	
Common	Stock			05/1	17/200	)4			S		900	D	\$	16.12	46,	344		D	
Common Stock			05/17/2004					S		1,100	D	\$	16.14	45,	,244		D		
Common	Stock			05/1	17/200	)4			S		100	D	\$	16.16	45,	144		D	
Common Stock			05/1	17/200	)4			S		900	D	\$	\$16.21 44		44,244		D		
Common Stock			05/1	/17/2004				S		600	D	\$	16.25	43,644		D			
Common Stock			05/1	05/17/2004				S		2,000	D	\$	16.4	41,644		D			
Common Stock 05/			05/1	17/200	)4			S		2,000	D	1	16.3	39,	9,644		D		
Common	Stock			05/1	5/19/2004				S		2,000	D	\$	16.35	37,	7,644		D	
Common Stock 05/1			19/200	)4			S		1,000	D	4	16.3	36,	6,644		D			
Common Stock 05/			05/1	19/200	9/2004					875	D	\$	16.25	35,	35,769		D		
Common Stock 05/1				19/200	)4			S		1,000 D		1	16.4	34,769			D		
		•	Table II -	Deriv (e.a	ative puts.	Sec call	uritie s. wa	es Acquarrants	uired, D	ispo is. c	osed of, onvertib	or Ben	efici Iritie	ally C	wned				
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	3A. Deemed 4. Execution Date, if any		4. Transa Code ( 8)	action	5. Number 6.		6. Date Expiration (Month/Da	cercis	able and	7. Title and Alof Securities Underlying Derivative Se (Instr. 3 and 4		ount 8	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactie (Instr. 4)	Owner Form: Direct or Ind (I) (Ins	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)
Donation .					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	or Num of Sha				$\perp$		
Option Right to Buy)	\$14.33	05/17/2004			M			16,875	05/18/199	95 0	05/18/2004	Common Stock	16,	875	\$14.33	0.00		D	
vhiquatio:	n of Respon	505.																	

Remarks:

\*\* 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.