

| OMB APPROVAL                                 |           |
|--|-----------|
| OMB Number:                                  | 3235-0287 |
| Estimated average burden hours per response: | 0.5       |

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP**

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*<br><u>LUECHTEFELD MONICA</u><br><br>(Last) (First) (Middle)<br>2200 OLD GERMANTOWN ROAD<br>MAIL CODE: LEGL<br><br>(Street)<br>DELRAY BEACH FL 33445<br><br>(City) (State) (Zip) | 2. Issuer Name and Ticker or Trading Symbol<br><u>OFFICE DEPOT INC [ ODP ]</u> | 5. Relationship of Reporting Person(s) to Issuer<br>(Check all applicable)<br><br>Director 10% Owner<br><input checked="" type="checkbox"/> Officer (give title below) Other (specify below)<br><u>EVP-Business Development &amp; IT</u> |
|  | 3. Date of Earliest Transaction (Month/Day/Year)<br>11/01/2006                 |  |
| 4. If Amendment, Date of Original Filed (Month/Day/Year)   |  |  |

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) |   | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) |            |         | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---------------------------------|--------------------------------------|--|--------------------------------|---|---|------------|---------|---|--|---|
|                                 |                                      |  | Code                           | V | Amount  | (A) or (D) | Price   |   |  |   |
| Common Stock                    | 11/01/2006                           |  | M                              |   | 1,000   | A          | \$6.72  | 96,334  | D  |   |
| Common Stock                    | 11/01/2006                           |  | s <sup>(1)</sup>               |   | 1,000   | D          | \$42.15 | 95,334  | D  |   |
| Common Stock                    | 11/02/2006                           |  | M                              |   | 1,000   | A          | \$6.72  | 96,334  | D  |   |
| Common Stock                    | 11/02/2006                           |  | s <sup>(1)</sup>               |   | 1,000   | D          | \$41.05 | 95,334  | D  |   |
| Common Stock                    | 11/03/2006                           |  | M                              |   | 1,000   | A          | \$6.72  | 96,334  | D  |   |
| Common Stock                    | 11/03/2006                           |  | s <sup>(1)</sup>               |   | 1,000   | D          | \$41.5  | 95,334 <sup>(2)</sup>   | D  |   |

**Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transaction Code (Instr. 8) |   | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) |       | 6. Date Exercisable and Expiration Date (Month/Day/Year) |                 | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |       |
|--|--|--------------------------------------|--|--------------------------------|---|--|-------|--|-----------------|---|--|--|---|--|-------|
|  |  |                                      |  | Code                           | V | (A)  | (D)   | Date Exercisable   | Expiration Date |   |  |  |   |  | Title |
| Option (Right to Buy)                      | \$6.72   | 11/01/2006                           |  | M                              |   |  | 1,000 | 08/03/2001   | 08/03/2010      | Common Stock  | 1,000                                      | \$0  | 15,000  | D  |       |
| Option (Right to Buy)                      | \$6.72   | 11/02/2006                           |  | M                              |   |  | 1,000 | 08/03/2001   | 08/03/2010      | Common Stock  | 1,000                                      | \$0  | 14,000  | D  |       |
| Option (Right to Buy)                      | \$6.72   | 11/03/2006                           |  | M                              |   |  | 1,000 | 08/03/2001   | 08/03/2010      | Common Stock  | 1,000                                      | \$0  | 13,000  | D  |       |

**Explanation of Responses:**

- Sales were effected pursuant to instructions from a 10b5-1 Sales Plan entered into on 5/16/2006 between reporting person and financial advisor.
- Beneficial holdings on Table I is updated to include 3642 total shares in the Employee Stock Purchase Plan; and 3150 total shares under a Deferred Compensation Plan as of 11/01/2006.

**Remarks:**

By: Anne Zuckerman, 11/03/2006  
 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.