FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	S IN BENEFIC	IAL OWNER	SHIP

	OMB APPROVAL									
	OMB Number:	3235-0287								
l	Estimated average burd	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

Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol OFFICE DEPOT INC [ODP]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
<u>AUSTRIAN NEIL R</u>														X Dire		ctor 10		10% O	wner		
(Last) (First) (Middle)					3. D	Date of Earliest Transaction (Month/Day/Year)								\dashv					Other (below)	(specify	
6600 NORTH MILITARY TRAIL						02/18/2013								Chairman & CEO							
LEGAL DEPARTMENT																					
						4. If Amendment, Date of Original Filed (Month/Day/Year) 02/20/2013									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) BOCA RATON FL 33496					02/	02/20/2013									X Form filed by One Reporting Person						
															Form filed by More than One Reporting Person					orting	
(City)	-	State)	(Zip)																		
		Tal	ole I - No	on-Deriv	ative	Sec	uritie	s Ac	quired	d, Dis	sposed o	of, c	or Ben	efici	ally C	Owne	ed				
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day						Execution Date,					es Acquired (A) o Of (D) (Instr. 3, 4 a			and 5) Secu Bene		icially d Following	6. Owne Form: D (D) or In (I) (Instr	irect direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount		(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)				(1130.4)		
Common Stock 02/18/20						A 310,000 ⁽²⁾ A \$		\$0.0	000	00 1,586,282		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 (Instr. 3) 3. Transaction Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year)			on Date,		Transaction Code (Instr. 8) Set Act (A) Dis		sed . 3, 4	Expiration Day/Youthouthides (Month/Day/Youth)		te	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		nstr. 3	Deriva	rivative curity	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(: (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	n: ct (D) direct	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
	Code V (A)		(D)	Date Expiration of Services by Page 1 Title Shares			mber	1 1													

Explanation of Responses:

- $1. \ This amendment is being filed to correct the vesting time stated in the footnote for the original Form 4 filed on 2/20/2013.$
- 2. These shares of the Issuer's common stock were awarded by the Issuer to the Reporting Person as settlement of certain performance shares that were granted for the performance period of fiscal year 2012 (the "2012 Period"). Each performance share converts into one share of the Issuer's common stock and the vesting of such performance shares are contingent upon the Issuer meeting certain performance objectives over the 2012 Period. The Issuer achieved 62% of its targeted performance goals for the 2012 Period and thus awarded the Reported Person 310,000 shares of its common stock, representing 62% of the targeted amount. These performance shares will vest on April 30, 2014.

Remarks:

austrianpoa.txt

Darlene Quashie Henry, Attorney-in-Fact 02/26/2013

** 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.