## Edgar Filing: OFFICE DEPOT INC - Form 4

| Form 4   |  |  |  |   |   |              |   |             |  |   |   |
|--|--|--|--|---|---|--------------|---|-------------|--|---|---|
| <b>FORM</b><br>Check this<br>if no longe<br>subject to<br>Section 16<br>Form 4 or<br>Form 5<br>obligations<br>may contin | Section 16.SECURITIESForm 4 orForm 5Form 5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,obligationsSection 17(a) of the Public Utility Holding Company Act of 1935 or SectionSee Instruction30(h) of the Investment Company Act of 1940 |  |  |   |   |              |   |             |  | OMB APPROVAL<br>OMB 3235-0287<br>Number: January 31,<br>2005<br>Estimated average<br>burden hours per<br>response 0.5 |   |
| (Print or Type Ro  | esponses)  |  |  |   |   |              |   |             |  |   |   |
| 1. Name and Ad<br>MCKAY PA   | 2. Issuer Name and Ticker or Trading<br>Symbol<br>OFFICE DEPOT INC [ODP]   |  |  |   |   |              | 5. Relationship of Reporting Person(s) to<br>Issuer<br>(Check all applicable) |             |  |   |   |
| (Month   |  |  |  | Pate of Earliest Transaction<br>onth/Day/Year)<br>12/2006 |   |              |   |             | Director 10% Owner<br>X Officer (give title Other (specify<br>below) below)<br>EVP & Chief Financial Officer                                     |   |   |
| File   |  |  |  | ndment,<br>th/Day/Y                                       |   | e Original   |   |             | 6. Individual or Joint/Group Filing(Check<br>Applicable Line)<br>_X_ Form filed by One Reporting Person<br>Form filed by More than One Reporting |   |   |
| DELRAY BI  | EACH, FL 3344  | 5  |  |   |   |              |   |             | Person   | ore than One Re   | porting   |
| (City)   | (State)  | (Zip) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned |  |   |   |              |   |             |  | ly Owned  |   |
| 1.Title of<br>Security<br>(Instr. 3)   | 2. Transaction Da<br>(Month/Day/Year   | ransaction Date 2A. Deemed<br>nth/Day/Year) Execution Date, if<br>any<br>(Month/Day/Year)    |  |   | 3. 4. Securities Acqui<br>Transaction(A) or Disposed of<br>Code (Instr. 3, 4 and 5)<br>(Instr. 8)<br>(A)<br>or<br>Code V Amount (D) P |              |   |             | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4)                               | 6.<br>Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4)   | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
| Restricted<br>Stock  | 09/12/2006   |  |  | F   |   | 1,675<br>(1) | D   | \$<br>38.99 | 14,067   | D   |   |

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

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 control number.

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

## Price of (Month/Day/Year) (Instr. 8) Securities (Instr. 3) Derivative (Instr. 3 and 4) Derivative Securities Security Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) Amount or Date Expiration Title Number Exercisable Date of Code V (A) (D) Shares **Reporting Owners Relationships Reporting Owner Name / Address** Director 10% Owner Officer Other MCKAY PATRICIA 2200 OLD GERMANTOWN ROAD **EVP & Chief Financial Officer** MAIL CODE: LEGL DELRAY BEACH, FL 33445 Signatures

By: Anne Zuckerman, Attorney-in-Fact for: 09/14/2006

\*\*Signature of Reporting Person

1. Title of

Security

Derivative

2.

Conversion

or Exercise

Date

## **Explanation of Responses:**

\* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

3. Transaction Date 3A. Deemed

any

(Month/Day/Year)

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

(1) Restricted Stock withheld by Issuer to satisfy tax withholding obligation on vesting of Restricted Stock.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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4.

Code

Execution Date, if

5.

of

TransactionNumber

6. Date Exercisable and

Expiration Date

(Month/Day/Year)

7. Title and

Amount of

Underlying

8. Price of

Derivative

Security

(Instr. 5)

9. Nt

Deriv

Secu

Bene

Own

Follo

Repo

Trans

(Insti